

FEB 14 2017

Civil Division

PROSECUTOR GRCOMMISSIONERS JKDEPARTMENT MCINSURANCE JP

02/08/2017 02:34:37 PM

201702080017

\$0.00
Claims Against County/rls/misc
Kittitas County AuditorPage 1 of 19
KCPR05KITTITAS COUNTY CLAIM FOR DAMAGES

Return to:

County Auditor205 W 5th Ave, Suite 105
Ellensburg, WA 98926
509-962-7504

Instructions:

Please read the entire form before completion. Fill out each question as completely as possible, to the best of your ability. Do not hesitate to use the back side of this form if you need more than the space provided. An incomplete response may delay the processing of your claim.

1. Name (Including spouse, if married):

JACK LEEPER

2. Phone (Home): (
- 425-444-1875
-) (Work): (_____)

3. Address (include former address if at present address for less than 6 months):

710 SNOQUALMIE DR, SNOQUALMIE PASS, WA 98068

Physical

8401 BRICKMILL RD, ELLensburg, WA 98926

Mailing

4. Date of Birth:
- 9-1-61

5. Date and Time of Incident:

1-20-2017

6. Location of Incident:

710 SNOQUALMIE DR

7. Describe in detail the defect which caused the injury:

Kittitas Co snow removal/Blower was directed at
my home, dumped large amount of snow into
window

8. Describe in narrative form and in detail exactly how the incident occurred:

Snow was directed at bedroom window, knocked out
glass and everything in its path.

9. List the names of all persons involved and contact information, if known.

UNKNOWN

10. Was claim investigated by a police officer? NO

Sheriff _____ State Patrol _____ City Police _____

11. Description of claimant's vehicle: _____ Make _____ Year _____

Model: _____ License No. _____

12. Describe what you did after the accident occurred:

SAT AM left message with Road Foreman for
Kittitas Co. Chuck Reed

13. Describe the conversations you had, if any, with County personnel during or after the incident occurred:

Message left.

14. Describe the damages or injuries which you sustained as a result of the incident:
Broken Items, Window, Dresser, DVR player, Door, Twin
around window. Carpet full of glass shards and pad (both) soaked.

15. What is the amount of damages claimed? (Include estimates and bills, if available):
Carpet Replacement = 892.08 Dresser = 100.00
Window & Door + = 1018.40 DVR = 60.00 TOTAL 2060.48

16. How did you identify the County as the party responsible for your damage?
County did snow removal

17. List the names and addresses of all witnesses to the incident:
None

18. Are you covered by insurance? Yes If yes, who is your insurance agent/carrier?
FOREMOST INSURANCE GROUP

Dated this 8 Day of FEB, 2017.

[Signature]
Signature of Claimant

Subscribed and sworn (affirmed) to before me this 8th day of FEBRUARY, 2017.

Seal



Rise T. Underhill
Notary Public in and for the State of Washington
Residing at KILGUSBURG

Premier

Paint & Floor Covering

610 South Main • P.O. Box 1238
Ellensburg, WA 98926-1238
Phone (509) 962-2551
Fax (509) 925-5855

PROPOSAL AND ACCEPTANCE

PROPOSAL SUBMITTED TO <u>JACK Leeper</u>	PHONE <u>425-444-1825</u>	DATE <u>2/3/17</u>
STREET <u>710 Snoqualmie Drive</u>	JOB NAME	
CITY, STATE AND ZIP CODE <u>Snoqualmie Pass, Wa 98068</u>	JOB LOCATION <u>710 Snoqualmie Drive</u>	
SALESPERSON <u>Ray Osborn</u>		JOB PHONE <u>509-962-2551</u>

We hereby submit specifications and estimates for: Install instock carpet (sco328) with
8 lbs rebound pad in one bedroom. Measured by
customer. 8' X 18' - product comes in 12'
rolls.

\$ 826⁰⁰ plus tax 8%

We Propose hereby to furnish material and labor - complete in accordance with above specifications, for the sum of: eight hundred ninety two⁰⁸ / 100 dollars (\$ 892.08)

Payment Method: ☐ Cash ☐ Check ☐ Charge/Acct # _____ ☐ Deposit Amount \$ 446.04

☐ Bank Card # _____ Exp. Date _____ Balance Due on Completion \$ 446.04

All material is guaranteed to be as specified. All work to be completed in a workmanlike manner according to standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents, or delays beyond our control. Owner to carry fire, tornado, and other necessary insurance. Our workers are fully covered by Workman's Compensation insurance.

We look forward to working with you on your project. As a result of a change in the law by the Washington State Legislature, the following notice is required to be sent to all our customers covered by the revised law. If at any time during the project you are not completely satisfied, we hope that you will contact us immediately. The law requires we advise you of the following:

NOTICE TO CUSTOMERS

This contractor is registered with the state of Washington as a general specialty contractor, PREMIPF953RT, and has posted with the state a bond or cash deposit of \$6,000.00/\$4,000.00 for the purpose of satisfying claims against the contractor for negligent or improper work or breach of contract in the conduct of the contractor's business. The expiration date of this contractor's registration is _____. This bond or cash deposit may not be sufficient to cover a claim which might arise from the work done under your contract. If any supplier of materials used in your construction project or any employee of the contractor or subcontractor is not paid by the contractor or subcontractor on your job, your property may be lien to force payment. If you wish additional protection, you may request the contractor to provide you with further information about lien release documents if you request it. General information is also available from the Department of Labor and Industries.

Authorized
Signature _____

Note: This proposal may be withdrawn by us
if not accepted within 30 days.

A late charge of one and one-half percent (1 1/2%) per month, which is an annual percentage rate of 18% interest at the maximum lawful rate, whichever is greater, is charged on all past due accounts. In case action is brought to collect this account, I consent to jurisdiction of and service of process by the courts and agree venue may be laid in the state of Washington, County of Kittitas; and that the action may be maintained without regard to the residence of defendants. In any action brought to collect this account, I will pay such sum as the court may adjudge reasonable as the court may adjudge reasonable as attorney's fees and costs.

Acceptance of Proposal

The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Date _____ Signature _____ Title _____

Please sign and return white (original) copy.

Leeper Residence

February 1, 2017

Ron Linde
 Laconia Builders
 POB 22
 Snoqualmie Pass, WA 98068
 Mobile 425-214-3973
 ronlinde@hotmail.com

Estimate**Project**

Leeper Residence

Customer

Jack Leeper

Mobile (425) 444-1875
 ski@hyak.net
 http://Hyak.net

Repair damage caused by Kittitas County snowplow

Description	Quantity	Hours	Material	Labor	Other	Subcontract	Cost
Interior Trim							930.00
Remove and reinstall interior and exterior window trim	1 Ea	3.5	150.00	210.00	0.00	0.00	360.00
Replace broken window Remove broken window and install new window, flashing,	1 Ea	2	240.00	120.00	0.00	0.00	360.00
Replace interior door New interior door, mount hinges and lock set	1 Ea	2.5	60.00	150.00	0.00	0.00	210.00
Project Subtotal		8	450.00	480.00	0.00	0.00	930.00
Fixed Fee							50.00
Project Total		8	450.00	480.00	0.00	0.00	980.00
Tax							38.40
Total with Tax							1,018.40

Approved By:

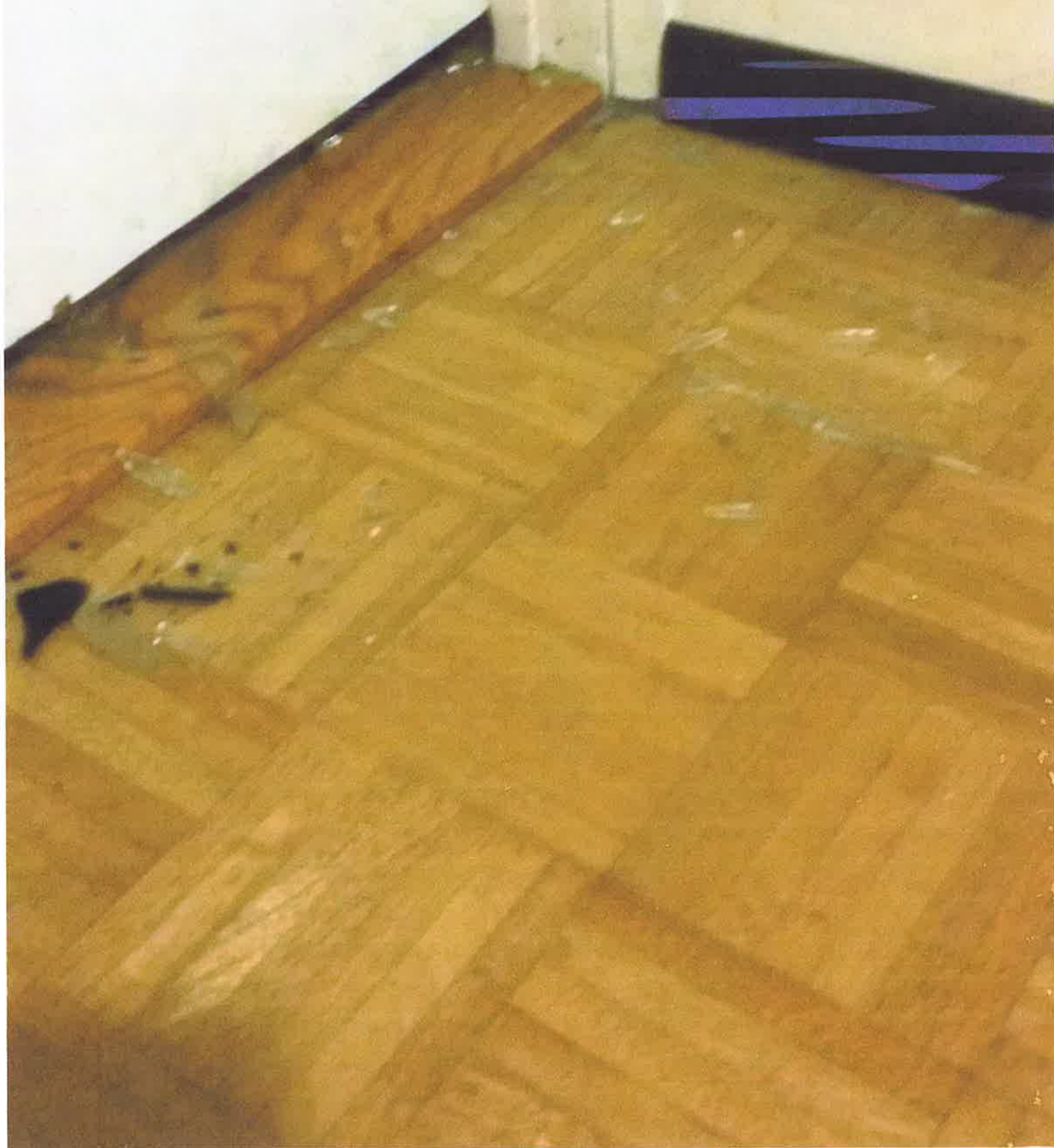
Date:

Date:

Contractor _____

Customer _____

Glass went under
door into hallway.



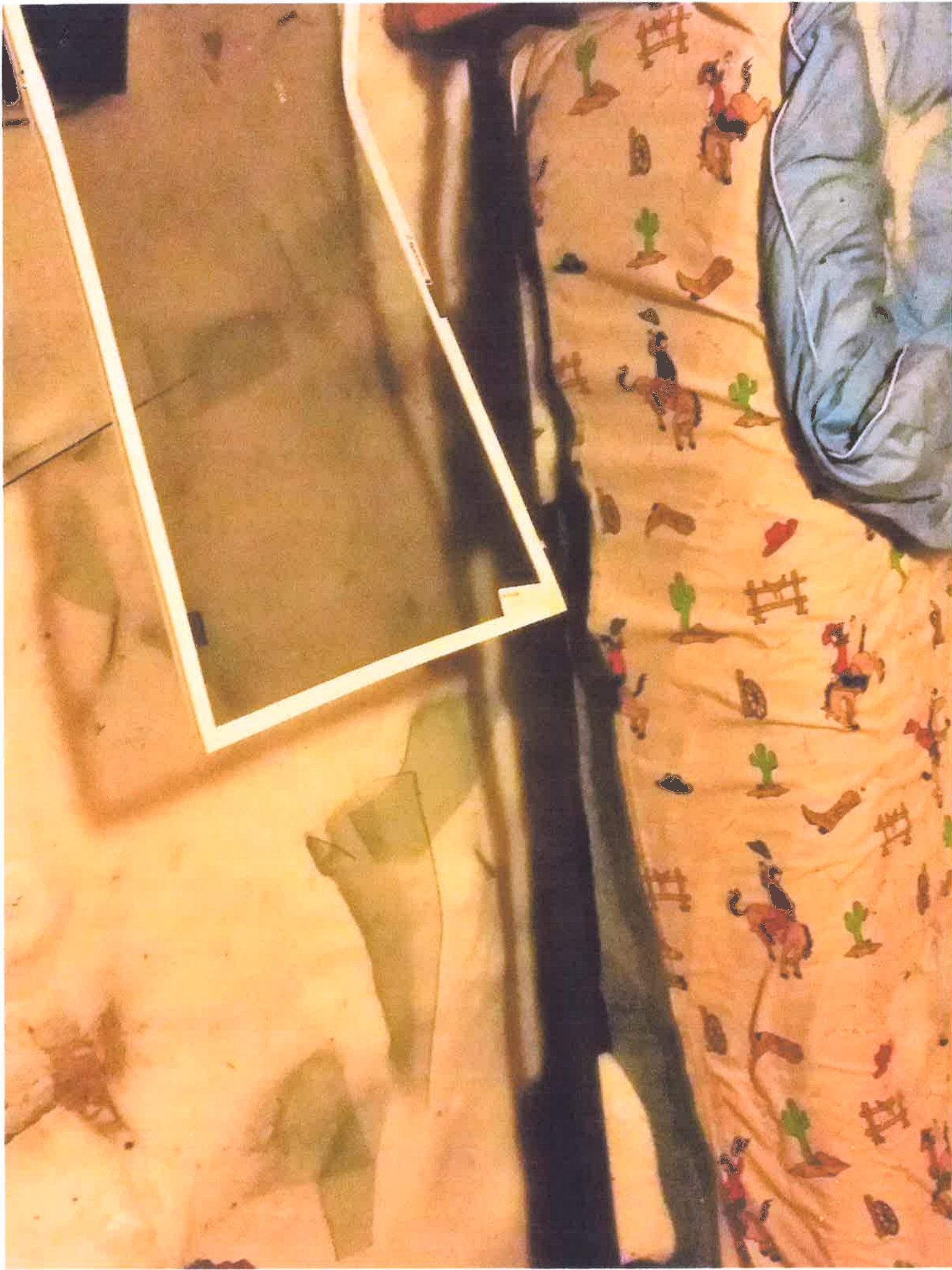
Door from outside
room, how we found
it. Impact broke
door.








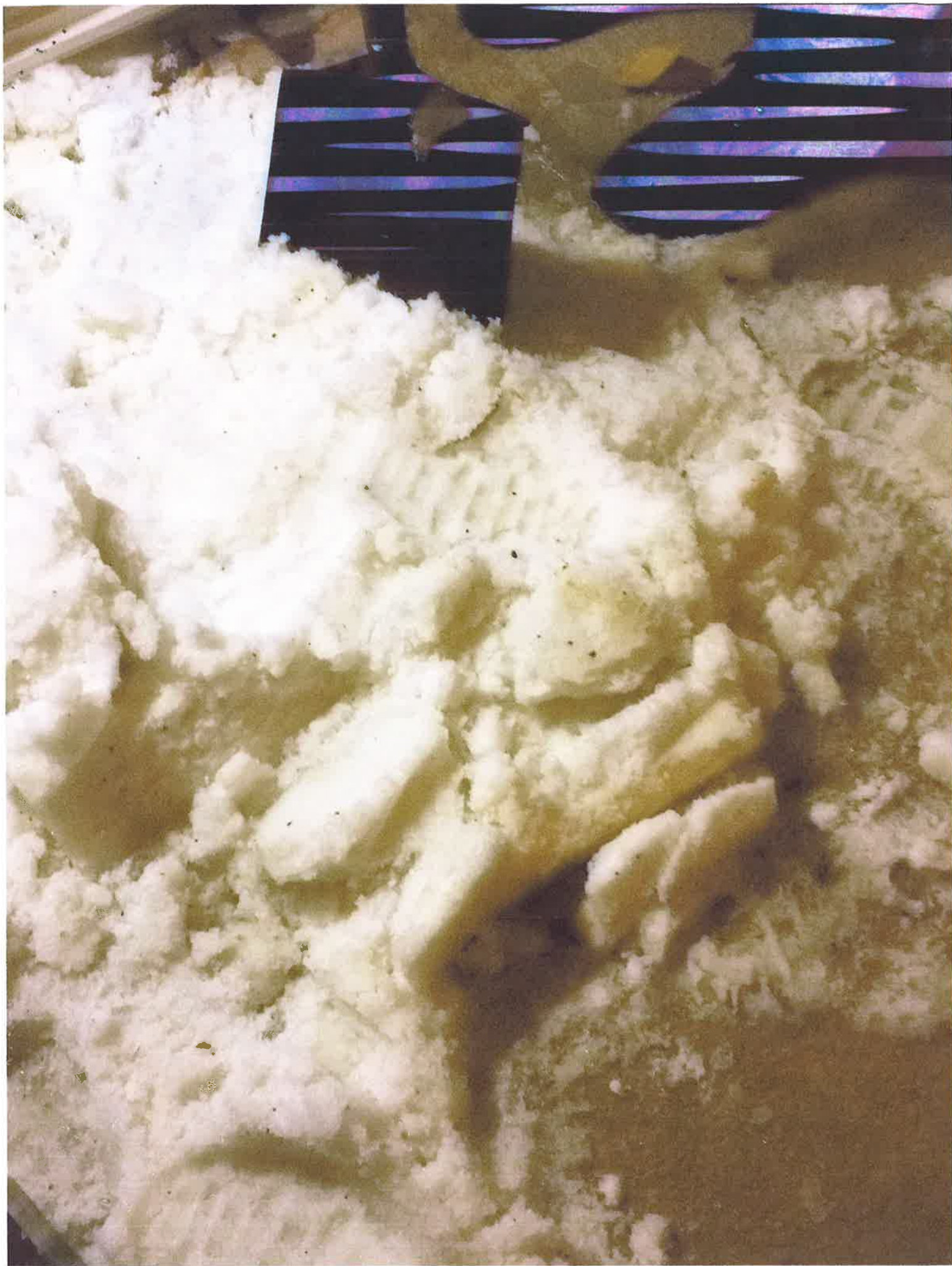






Dresser drawers full
of snow









← DOOR where
Dresser &
hit DVR



DVR

This one
OK





Face plate for
DVR