

STATE OF WISCONSIN: CIRCUIT COURT: MILWAUKEE COUNTY

PETER J. TORIA AND JENNIFER TROIA,
Plaintiffs,

And

Case No. 19CV3642
Code No. 30101

AUROR HEALTH CARE, INC., A/K/A
THE AURORA NETWORK HEALTH AND WELFARE PLAN,
By its Claims Administrator, ANTHEM BLUE CROSS BLUE SHIELD and
AMERICAN FAMILY MUTUAL INSURANCE COMPANY, S.I.,
Subrogate Plaintiffs,

v.

CITIES AND VILLAGES MUTUAL INSURANCE COMPANY,
CITY OF WEST ALLIS and THOMAS J. ORR,
Defendants.

DEFENDANT CITY OF WEST ALLIS’
FIRST SET OF WRITTEN INTERROGATORIES AND
REQUESTS FOR PRODUCTION OF DOCUMENTS TO SUBROGATED
PLAINTIFF AMERICAN FAMILY MUTUAL INSURANCE COMPANY, SI

Pursuant to Wisconsin Statutes Sections 804.08 and 804.09, the above-named Defendant, City of West Allis (“City”), by City Attorney Kail Decker, and Principal Assistant City Attorney Rebecca Hammock, hereby pose the following interrogatories and requests for production of documents to the subrogated plaintiff, American Family Mutual Insurance Company, SI (“American Family”).

Within 45 days of service, American Family shall answer each of the following interrogatories separately and fully in writing and under oath. Further, American Family shall either produce or permit Defendant’s attorneys to inspect and copy each of the following requested documents at the City Attorney’s Office, 7525 West Greenfield Avenue West Allis, WI 53214, within the same forty-five (45) days from service.

If after you answer these interrogatories/requests for production you learn of or discover any new information and/or documents which would alter or modify your responses/production in any way, you are required to and hereby requested to supplement your responses prior to trial.

A failure to fairly meet the substance of the interrogatories and requests shall subject you to the sanctions provided in Wis. Stats. §804.12.

INTERROGATORIES

INTERROGATORY NO. 1: Please state the full name, address, and occupation of the person responding to, or assisting in the preparation of responses, to these interrogatories.

INTERROGATORY NO. 2: Please identify by policy number any and all policies that plaintiffs, Peter J. and Jennifer Troia, held with American Family at the time of the accident on April 6, 2017.

INTERROGATORY NO. 3: Please state the names and addresses of any and all individuals from whom written, tape recorded, or otherwise memorialized statements regarding the incident in question were taken by anyone, including but not limited to insurance adjusters, investigators, attorneys, claims representatives, or others.

INTERROGATORY NO. 4: For each said written or otherwise recorded statement, identified in response to Interrogatory No. 3, state the location of the statement(s), the date(s) on which said statements were obtained, the identity of the person or persons to whom said statements were given, and the identity of the person or persons charged with the custody of said statements at the present time.

INTERROGATORY NO. 5: Please state whether or not you have knowledge of the existence of any photographs, video tapes, or other visual depictions taken by any party to

this action, or by anyone else, of the Plaintiff, Peter J. Troia, the scene of the incident, the vehicles involved, or anything or anyone else relating to or concerning in any way the incident in question.

INTERROGATORY NO. 6: For each photograph, videotape, or other visual depiction identified in response to Interrogatory No. 5, please identify:

- A. The name, address, and telephone number of the person taking the photograph, video tape, or other visual depiction;
- B. The present location of each photograph, videotape, or other visual depiction;
- C. The identity of the person(s) charged with its custody at the present time;
- D. The date on which said photograph, video tape, or other visual depiction was taken;
and
- E. The subject matter of each photograph, videotape, or other visual depiction.

INTERROGATORY NO. 7: Identify whether an ISO Claim Search inquiry/search was performed on any parties, witnesses, or other individuals and/or propert(ies) or address(es) associated in any way with the subject incident, and for each inquiry/search performed, please further identify the date of inquiry/search, the person and/or property inquired about, and all information that was received in response thereto.

REQUEST FOR PRODUCTION OF DOCUMENTS

REQUEST NO. 1: A true, accurate and complete certified copy of each policy of insurance identified in response to Interrogatory No. 2 above.

REQUEST NO. 2: A true, accurate and complete copy of any and all written, recorded, or otherwise memorialized statements referred to in response Interrogatory No. 4 above.

REQUEST NO. 3: A true, accurate and complete copy of any and all photographs, video tapes, or other visual depictions identified in response to Interrogatory No. 6 above.

REQUEST NO. 4: A true, accurate and complete copy of the claim file related to the incident of April 6, 2017, including any ISO Claim Search results identified in response to Interrogatory No. 7.

Dated at West Allis, Wisconsin, this 4 October 2019.

CITY OF WEST ALLIS
Kail Decker, City Attorney

By:



Rebecca Hammock
Principal Assistant City Attorney
State Bar No. 1065869

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