



CLAIMANT CONTACT INFORMATION

Name: Hilda Alanis
Address: 3021 S 11th ST
Milwaukee, WI 53215

Phone: 414-306-0660
Email: leticia29@yahoo.com

INSTRUCTIONS

Complete this form, print and sign it, and serve a hard copy upon the West Allis City Clerk. If you have questions about how to fill out this form, please contact a private attorney who can assist you.

NOTICE OF CLAIM

Date of incident: 02/24/2021 Time of day: _____
Location: 3450 S 108TH ST, MILWAUKEE, WI 53227

Describe the circumstances of your claim here. You may attach additional sheets or exhibits. Some helpful information may be the police report, pictures of the incident or damage, a diagram of the location, a list of injuries, a list of property damage, names and contact information for witnesses to the incident, and any other information relevant to the circumstances.

West Allis Police Report Number: 21-006038- Officer Gaenslen
Wake up to a paper on my windshield that the city plow had hit my car. I will enclose policereport. I contacted my insurance company. The insurance company stated they contacted the city of west Allis on 3/15/21 11am. City wanted me to sign this form, I turned it in. The city called me back stating they didnt know anything about an accident and police report. Also that Eric hadn't contacted them. This is my 2nd attempt. My car was parked on the street overnight. Plow truck of west Allis hit my vehicle.

Check one:

- I am seeking damages at this time (complete Claim Amount section below)
- I am submitting this notice without a claim for damages. This claim is not complete and will not be processed until I submit a claim for damages on a later date.

Signed: Hilda Alanis

Date: 3/25/21

CLAIM AMOUNT

To complete this claim, attach an itemized statement of damages sought. If any damages are for repair to property, include at least 2 estimates for repairs.

The total amount sought is: \$ 7488.84



PRINT

1SL05DXVSL

21-006038

WISCONSIN MOTOR VEHICLE CRASH REPORT

WEST ALLIS POLICE DEPARTMENT
11301 WEST LINCOLN AVENUE
WEST ALLIS, WI 53227
(414) 302-8000

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Document Number Override		Primary Crash Document #		Agency Crash Number		Investigating Officer/Deputy OFFICER C. GAENSLEN	
Crash Date 02/24/2021		Crash Time 05:42 AM		Date Arrived 02/24/2021		Time Arrived 05:48 AM	
Date Notified 02/24/2021		Time Notified 05:42 AM		Total Units 02		Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone	<input type="checkbox"/> Trailer or Towed	<input type="checkbox"/> Reporting Threshold		
<input type="checkbox"/> Government Property	<input type="checkbox"/> Active School Zone		School Bus Related NO		Tags SUPPLEMENTAL		
<input type="checkbox"/> Reportable	Crash Type DT4000 (STANDARD CRASH)			<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash		

Description

Diagram		Reconstruction By
		Photos By PO GAENSLEN
		Additional Information PHOTOS

I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

CITY OF WEST ALLIS DPW EMPLOYEE, THOMAS J ORR (M/W,11/24/58), WAS OPERATING UNIT 1, FRONT END LOADER #2155 (VIN L90DV64567), SOUTHBOUND IN THE PARKING LANE OF S. 92 ST., UNIT 2 WAS LEGALLY PARKER ON S. 92ND ST. UNIT 1 STRUCK THE REAR OF UNIT 2 WHILE ATTEMPTING TO PLOW THE SNOW IN THE PARKING LANE. NON REPORTABLE CRASH COMPLETED TO DOCUMENT INCIDENT - NOT A CRASH

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Location

ON S 92ND ST 36 FT N OF W HAYES AVE IN THE CITY OF WEST ALLIS IN MILWAUKEE COUNTY	Latitude	Longitude
	43.001149195	-88.027213449
	X Coordinate	Y Coordinate
	416274.75	4761454.5
Structure Type		NO STRUCTURE

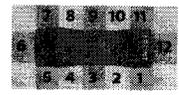
Crash Scene

First Harmful Event PARKED MOTOR VEHICLE		First Harmful Event Location ON ROADWAY	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT		Light Condition DARK/LIGHTED	
Road Surface Condition(s) DRY		Roadway Factor(s) NONE	
Environment Factor(s) NONE			
Weather Condition(s) CLOUDY			
Animal Type		Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY		Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land		Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION	

Unit Summary

UNIT 01	Unit Status IN TRANSIT		Vehicle Operating As Classification O CLASS		Unit Type TRUCK	
	Vehicle Type				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? UNKNOWN	Direction Of Travel SOUTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 30	Total Lanes 2	
	Most Harmful Event: Collision With PARKED MOTOR VEHICLE		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type CONCRETE		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

UNIT 01	VEHICLE 01	Vehicle			
		License Plate Number	Plate Type	St	Country of Issuance
		Vehicle Identification Number	Make VOLVO	Year 2002	Model L90D
		Color	Body Style OT - OTHER	Bus Use	
		Initial Contact Point 12 - FRONT	Vehicle Damage		
		Extent Of Damage NO DAMAGE	00 - NO DAMAGE		



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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR		
	What Driver Was Doing OTHER		Vehicle Factors		
	Driver Prior Action Other SNOW PLOWING ROAD		NOT APPLICABLE		
	Driver Actions FAILURE TO CONTROL				
01 01	Owner Name CITY OF WEST ALLIS DEPARTMENT OF PUBLIC WORKS (414) 302-8889		Owner Address 6300 W MCGEOCH AVENUE WEST ALLIS, WI 53219 , US		
	Sequence Of Events				
01 02 03 04	Event PARKED MOTOR VEHICLE				
	Event				
	Event				
	Event				
UNIT INDIVIDUAL	Driver THOMAS JAMES ORR (414) 702-5705		Citations Issued 0	Sex MALE	
	Address 3740 S SUNNY VIEW DR NEW BERLIN, WI 53151 , US		Date of Birth [REDACTED]	Race WHITE	
			Driver License Number [REDACTED]	COUNTRY: UNITED STATES	
	Safety Equipment				
On Duty Crash WINTER-HWY-MAINTENANC		Safety Equipment SHOULDER & LAP BELT			
Row 01 - FRONT ROW	Seat Position 07 - LEFT				
Helmet Use		Helmet Compliance			
Eye Protection		Tint Compliance			
01 001	Injury Severity NO APPARENT INJURY		Airbag NON DEPLOYED		
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED		
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #	
	Hospital		Date of Death	Time of Death	
Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)			
Distracted By Action NOT DISTRACTED					
Non-Motorist		Striking Unit #	Location		

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UNIT INDIVIDUAL	Prior Action		
	Action		
	Action Other		To/From School
	Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use NO
	Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	Alcohol Test Results
	Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results
	Drug Type		
	Individual Condition APPEARED NORMAL		

Unit Summary

UNIT 02	Unit Status LEGALLY PARKED		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR				Operating As Endorsements	
	Total Occs 0	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel NOT ON ROADWAY	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 30	Total Lanes 2	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type CONCRETE		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

UNIT VEHICLE 02	Vehicle					
	License Plate Number [REDACTED]		Plate Type AUT - AUTOMOBILE	St GA	Country of Issuance UNITED STATES	
	Vehicle Identification Number K [REDACTED]		Make KIA MOTORS CORPORA	Year 2018	Model SPG	
	Color		Body Style UT - SPORT UTILITY VEHICLE		Bus Use	
	Initial Contact Point 06 - REAR		Vehicle Damage			
	Extent Of Damage FUNCTIONAL DAMAGE		07 - LEFT REAR CORNER			
	Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER			
	What Driver Was Doing LEGALLY PARKED					

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UNIT	VEHICLE	Vehicle Factors	
		Driver Prior Action Other	NOT APPLICABLE
02	02	Driver Actions NO CONTRIBUTING ACTION	
		Owner Name ALANIS PASTOR [REDACTED]	Owner Address 2363 S 92 ST WEST ALLIS, WI 53227 , US
Sequence Of Events			
UNIT	01	Event OTHER OBJECT - NOT FIXED	
	02	Event	
	03	Event	
	04	Event	
Policy Holder			
Insurance Company ERIE-INS-CO		Individual ALANIS PASTOR	