

March 30, 2016

RECEIVED

MAY 06 2016

CITY OF WEST ALLIS
CITY CLERK

City of West Allis
7525 W. Greenfield Ave.
West Allis, WI 53214

Common Council,

On February, 10th, 2016 @ 7:47am. I was in my car with my son waiting for the school bus. We were parked at 2104 w.92nd(Becher St. and 92nd) when a plow truck(#717) came by and hit my drivers' side mirror. We wasn't aware that he hit us. I went home after the school bus picked up my son and called the City Public Works and they transferred me over to another women who then told me that the manager was on his way and said that someone have called it in and another person also have a video tape of it. I told her I was at home and that the manager could stop by at 2180 south 92nd street. The manager had taken pickers and had the police department stop by . They made notes and I got the Accident/Call number 16-005089. I waited a month and didn't hear anything from the city so I called back and a woman told me that I needed to send in a letter with a signature to the Common Council for review. No one had mentioned this to me. I've attached a copy of the accident report and a picture of my mirror.

You can contact via phone 414-545-3031 or by mail 2180 So. 92nd street, West Allis if you should have any questions.

Thank you,


Anita Steinhagen Bernard



POLICE # 16-005089

ACCIDENT #

GENERAL INFORMATION

<input checked="" type="checkbox"/> Reportable Accident		<input type="checkbox"/> On Emergency		<input type="checkbox"/> Amended		DOT Document Number BRTF17J		Document Override Number	
Agency Accident Number				Police Number 16-005089					
4 - Accident Date 02/10/2016		5 - Time of Accident (Military Time) 0803		6 - Total Units 02		7 - Total Injured 00		8 - Total Killed 00	
2 - County MILWAUKEE - 40		3 - Municipality WEST ALLIS - 60, CITY				11 - Accident Location NON-INTERSECTION			
14 - On Hwy No.		14 - On Street Name S 92ND ST		14 - Bus/Fmt/Rmp		15 - Est. Distance 45 FT		15 - Hwy. Dir SOUTH	
16 - Fr/At Hwy No.		16 - From/At Street Name W BECHER ST		16 - Business/Frontage/Ramp					
17 - Structure Type OTHER #		17 - Structure Number 2100BLK		12 - Latitude 43.006341		13 - Longitude -88.027135			
80 - First Harmful Event PARKED MOTOR VEHICLE				93 - Manner of Collision NO COLLISION WITH MOTOR VEHICLE IN TRANSPORT					
112 - Access Control NO CONTROL		113 - Road Curvature STRAIGHT		113 - Road Terrain LEVEL/FLAT		Surface Type CONCRETE - 1			
115 - Traffic Way NOT-PHYSICALLY-DIVIDED-(2-WAY TRAFFIC)									
117 - Relation To Roadway ON-ROADWAY									
114 - Light Condition DAYLIGHT		116 - Road Surface Condition WET		118 - Weather CLOUDY					
9 <input type="checkbox"/> Hit and Run		9 <input type="checkbox"/> Government Property		9 <input type="checkbox"/> Fire		9 <input type="checkbox"/> Photos Taken		9 <input type="checkbox"/> Trailer or Towed	
9 <input checked="" type="checkbox"/> Truck, Bus, or Hazardous Materials		9 <input type="checkbox"/> Load Spillage		9 <input type="checkbox"/> Construction Zone		9 <input checked="" type="checkbox"/> Names Exchanged			
101 <input type="checkbox"/> Supplemental Reports		102 <input type="checkbox"/> Witness Statements		103 <input type="checkbox"/> Measurements Taken		79 - E M S Number			

Operator/Pedestrian

Unit Status		81 - Most Harmful Event: Collision With PARKED MOTOR VEHICLE		23 - Dir Of Travel NORTH		24 - Speed Limit 25	
36 - Operating as Classified B CLASS		37 - Endorsements		35 <input checked="" type="checkbox"/> Operating Commercial Motor Vehicle			
29 - Driver's License Number J5257217108801		30 - State WI		31 - Expiration Year 2022		34 - On Duty Accident WINTER-HWY-MAINTENANCE	
25 - Operator/Pedestrian Last Name JENSEN		25 - First Name RUSSELL		25 - Middle Initial ALAN		25 - Suffix II	
32 - Date Of Birth 03/08/1971		33 - Sex MALE					
26 - Address Street & Number 2758 AIRLINE RD						26 - PO Box	
27 - City MOUNT PLEASANT		27 - State WI		27 - Zip Code 53406		28 - Telephone Number (414) 302-8200 EXT.	
39 - Seat Position FRONT-SEAT-LEFT-SIDE-(MC/BIKE DRIVER, TRAIN CONDUCTOR)				40 - Safety Equipment SHOULDER-BELT-AND-LAP-BELT-USED			
38 - Injury Severity N - NO APPARENT INJURY		41 - Airbag NOT APPLICABLE		42 - Ejected NOT-EJECTED		44 <input type="checkbox"/> Medical Transport	
43 - Trapped/Extricated NOT-TRAPPED		92 - Pedestrian Location		92 - Pedestrian Action			
119 - What Driver Was Doing GOING-STRAIGHT		120 - Traffic Control TRAFFIC-SIGNAL-OPERATING				62 - No. of Citations Issued 0	
64 - 1st Statute No.		64 - 2nd Statute No.		64 - 3rd Statute No.		64 - 4th Statute No.	
64 - 5th Statute No.							
122 - Driver Factors FAILURE-TO-HAVE-CONTROL							
88 - Driver or Pedestrian Cond APPEARED NORMAL		89 - Substance Presence NEITHER-ALCOHOL-NOR-DRUGS-PRESENT					
90 - Alcohol Test TEST NOT GIVEN		90 - Alcohol Content		91 - Drug Test TEST NOT GIVEN			

OPERATOR/PEDESTRIAN 01

PK2012

91 - Drugs Reported

124 - Highway Factors

SNOW,-ICE,-OR-WET

Vehicle

VEHICLE 01	21 - Unit Type TRUCK		Vehicle Type SNOW-PLOW		22 - Total Occupants 1	
	56 - License Plate Number 81165		57 - Plate Type MUN	58 - State WI	59 - Exp Year	55 - Vehicle Identification Number 1FVAC3BS5BHAZ4948
	50 - Year 2011	51 - Make FRHT	52 - Model	53 - Body Style TK - TRUCK	54 - Color WHI	100 - Skidmarks to Impact (Ft) 0
	94 - Vehicle Damage OTHER					
	95 - Extent Of Damage NONE		96 <input type="checkbox"/> Vehicle Towed Due To Damage		97 - Vehicle Removed By OPERATOR	
	123 - Vehicle Factors NOT-APPLICABLE					

Vehicle Owner

VEH OWNER 01	45 <input type="checkbox"/> Vehicle Owner Same As Operator					
	46 - Vehicle Owner Last Name		46 - First Name		46 - Middle Initial	46 - Suffix
						Date Of Birth
	46 - Company Name WEST ALLIS CITY					
	47 - Address Street & Number 7525 W GREENFIELD AVE			47 - PO Box		
48 - City WEST ALLIS		48 - State WI	48 - Zip Code 53214		49 - Telephone Number (414) 302-8200 EXT.	

Insurance

INS 01	63 - Liability Insurance Company CITIES-&-VILLAGES-MUTUAL-INS-CO		60 <input checked="" type="checkbox"/> Policy Holder Same As Owner
	61 - Policy Holder Last Name		61 - Policy Holder First Name
	61 - Policy Holder Company WEST ALLIS CITY		

School Bus

BUS 01	Bus Travelling to/from <input type="radio"/> To <input type="radio"/> From	School Name	Body Make	Seating Capacity
	School District Contracted With			

Operator/Pedestrian

Unit Status L - LEGALLY PARKED		81 - Most Harmful Event: Collision With MOTOR VEHICLE IN TRANSPORT		23 - Dir Of Travel	24 - Speed Limit 25
36 - Operating as Classified D CLASS	37 - Endorsements		35 <input type="checkbox"/> Operating Commercial Motor Vehicle		
29 - Driver's License Number		30 - State	31 - Expiration Year	34 - On Duty Accident	
25 - Operator/Pedestrian Last Name		25 - First Name		25 - Middle Initial	25 - Suffix
32 - Date Of Birth	33 - Sex				

PK2012

OPERATOR/PEDESTRIAN 02	26 - Address Street & Number				26 - PO Box	
	27 - City		27 - State	27 - Zip Code		28 - Telephone Number
	39 - Seat Position				40 - Safety Equipment NOT-APPLICABLE-NONMOTORIST	
	38 - Injury Severity		41 - Airbag NOT APPLICABLE		42 - Ejected NOT-APPLICABLE	
					44 <input type="checkbox"/> Medical Transport	
	43 - Trapped/Extricated NOT-APPLICABLE		92 - Pedestrian Location		92 - Pedestrian Action	
	119 - What Driver Was Doing LEGALLY-PARKED		120 - Traffic Control NO-CONTROL		62 - No. of Citations Issued	
	64 - 1st Statute No.	64 - 2nd Statute No.	64 - 3rd Statute No.	64 - 4th Statute No.	64 - 5th Statute No.	
	122 - Driver Factors NOT-APPLICABLE					
	88 - Driver or Pedestrian Cond		89 - Substance Presence			
90 - Alcohol Test		90 - Alcohol Content		91 - Drug Test		
91 - Drugs Reported						
124 - Highway Factors SNOW,-ICE,-OR-WET						

Vehicle

VEHICLE 02	21 - Unit Type AUTOMOBILE		Vehicle Type PASSENGER-CAR			22 - Total Occupants 1
	56 - License Plate Number 689EBT		57 - Plate Type AUT	58 - State WI	59 - Exp Year 2016	55 - Vehicle Identification Number 5NPET46FX9H460976
	50 - Year 2009	51 - Make HYUN	52 - Model SONATA GLS	53 - Body Style 4D - 4DR	54 - Color BLU	100 - Skidmarks to Impact (Ft)
	94 - Vehicle Damage OTHER					
	95 - Extent Of Damage MINOR		96 <input type="checkbox"/> Vehicle Towed Due To Damage		97 - Vehicle Removed By OWNER	
	123 - Vehicle Factors NOT-APPLICABLE					

Vehicle Owner

VEH OWNER 02	45 <input type="checkbox"/> Vehicle Owner Same As Operator					
	46 - Vehicle Owner Last Name STEINHAGEN BERNARD		46 - First Name ANITA		46 - Middle Initial M	46 - Suffix
					Date Of Birth 05/25/1962	
	46 - Company Name					
	47 - Address Street & Number 2180 S 92 ST				47 - PO Box	
48 - City WEST ALLIS		48 - State WI	48 - Zip Code 53227		49 - Telephone Number (414) 545-3031 EXT.	

Insurance

INS 02	63 - Liability Insurance Company NOT-REQUIRED		60 <input checked="" type="checkbox"/> Policy Holder Same As Owner
	61 - Policy Holder Last Name		61 - Policy Holder First Name
	61 - Policy Holder Company		

PK2012

School Bus

BUS 02	Bus Travelling to/from <input type="radio"/> To <input type="radio"/> From	School Name	Body Make	Seating Capacity
	School District Contracted With			

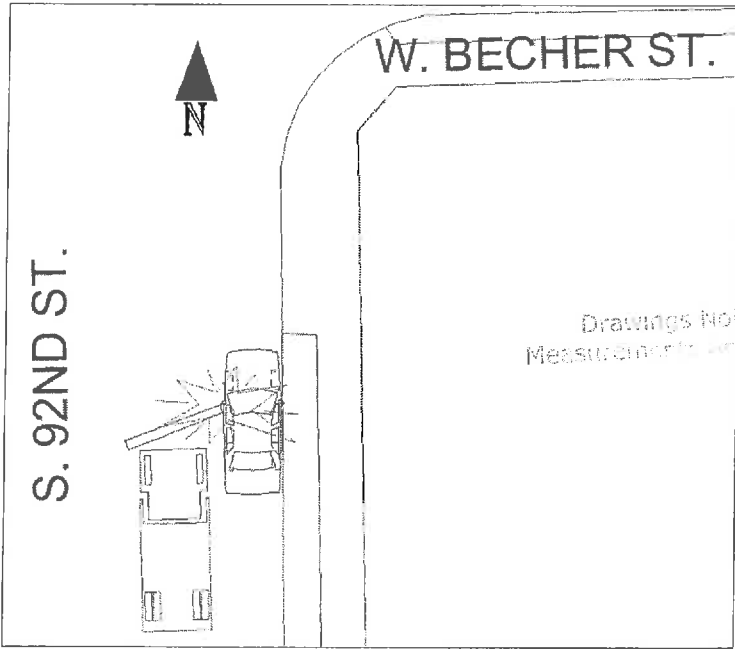
Occupant

OCCUPANT 01	<input type="checkbox"/> Address Same As Operator				
	65 - Unit No 02	66 - Occupant Last Name STEINHAGEN BERNARD	66 - First Name ANITA	66 - Middle Initial MARTHA	66 - Suffix
	68 - Address Street & Number 2180 S 92ND ST		68 - PO Box		
	68 - City WEST ALLIS		68 - State WI	68 - Zip Code 53227	
	67 - Date of Birth 05/25/1962		69 - Sex F		
	71 - Seat Position FRONT-SEAT-LEFT-SIDE-(MC/BIKE DRIVER, TRAIN CONDUCTOR)			72 - Safety Equipment SHOULDER-BELT-AND-LAP-BELT-USED	
	70 - Injury Severity N - NO APPARENT INJURY	73 - Airbag NON-DEPLOYED	75 - Ejected NOT-EJECTED	77 <input type="checkbox"/> Medical Transport	
	76 - Trapped/Extricated NOT-TRAPPED		78 - Agency Space		

Trailer

TRL 01	106 - Power Unit Number	License Plate Number	Plate Type	State	Expiration Year
	Trailer Make		Unit Type	Vehicle Identification Number	

Diagram and Narrative

DIAGRAM AND NARRATIVE	105 - Photos By
	 <p>Drawings Not To Scale Measurements are Approximate</p>
UNIT #1 WAS NORTH ON S 92 ST WHEN THE BLADE OF THE PLOW NICKED THE DRIVER SIDE MIRROR ON UNIT #2 CAUSING DAMAGE TO IT.	

Officer Information

OFFICER INFORMATION	125 - Officer Last Name KIELLEY		125 - First Name CARRIE		125 - Middle Initial		131 - Officer ID 9690	
	129 - Law Enforcement Agency No.		130 - Law Enforcement Agency Name WEST ALLIS POLICE DEPARTMENT					
	126 - Law Enforcement Agency Address Street & Number 11301 WEST LINCOLN AVENUE							
	127 - City WEST ALLIS		127 - State WI		127 - Zip Code 53227		128 - Telephone Number (414) 302-8000 EXT.	
	132 - Date Notified 02/10/2016		133 - Time Notified (Military Time) 0807		134 - Time Arrived (Military Time) 0814		135 - Date Of Report 02/10/2016	
			16-005089		19 - Special Study			
	18 - Agency Space							

May 5, 2016

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CITY OF WEST ALLIS
CITY CLERK

City of West Allis
7525 W. Greenfield Ave.
West Allis, WI 53214

Common Council,

I sent out a letter on March 30th to the Common Council, I haven't heard back so I am going to hand deliver this letter along with a copy of the original letter, police report and picture. I have a claim that I would like to get resolved as soon as possible. Please see attached. You can contact me by phone 414-545-3031 or mail 2180 So. 92nd street, West Allis, if you should have any questions.

Thank you,

Anita Steinhagen Bernard
Anita Steinhagen Bernard