

CLAIMANT CONTACT INFORMATION

Name: Fahoua Jang Address: 2213 S. 68th St. West Allis, WI 53219	Phone: 414-688-4519 Email: ppyang 0913 @ gmail.com
INSTRUCT Complete this form and sign it, and serve a hard have questions about how to fill out this form, plea you. NOTICE OF	copy upon the West Allis City Clerk. If you ase contact a private attorney who can assist
Date of incident: 02/05/2021 Location: 2200 Block of 68th Street	Time of day: 1:30 pm of West Side of Street
Describe the circumstances of your claim here. Y Some helpful information may be the police repdiagram of the location, a list of injuries, a list information for witnesses to the incident, and	ou may attach additional sheets or exhibits. Port, pictures of the incident or damage, a t of property damage, names and contact
circumstances. My Vehicle was parked in plow truck was came throther right front corner of my vehicle at the time to house after the accident plow truck stayed and the report. There was man car front bumper.	front of my home. The ough the street and hit my car. I was not in out walked out of my t. The driver of the police was called to make ninor damage to the and deocrab broken corner
Check one: Check one: I am seeking damages at this time (complete without a claim for will not be processed until I submit a claim for signed: CLAIM AMO	or damages. This claim is not complete and or damages on a later date. Date: 02/24/202
To complete this claim, attach an itemized statemer for repair to property, include at least 2 estimates fo	
The total amount sought is: \$	

WEST ALLIS POLICE DEPARTMENT DRIVER EXCHANGE AND INFORMATION SHEET

To be completed by drivers ONLY Pursuant to Section 346.67 Wis. Stats.

DATE: 2/5/2/ TIME: 1330	LOCATION: 200 SUI S.GT
TOWING COMPANY:	
DRIVER'S NAME:	PHONE #:
ADDRESS:	CITY/STATE/ZIP:
VEHICLE (MAKE):	(MODEL):YEAR:
LICENSE PLATE #:	(MODEL):YEAR: _ACCIDENT OR CALL #:
INSURANCE CARRIER/PHONE:	
POLICY #:	
requirement of Section 346.67 Wis. Stats. It is i	e purpose of facilitating the exchange of information intended only to assist those involved in a crash and facilitate assist with any insurance claim, personal reimbursement or
I hereby consent to the release of my personal info	ormation to(other driver)
Your Signature	

West Allis Police Department

11301 West Lincoln Avenue West Allis, WI 53227 414-302-3030

Receipt # 341647 Receipt Date: 02/24/2021 Register: 6 - PD-CASHREG2 Cashler: Jc2953 Pay Method: Cash

Payer:

ilom Photo Copies - PE	51.25	Pald T1.25
		\$1.25
Tendered		\$1.25
Course		\$0.00

Please gave this receipt:

1SL0SVWDS3 21-003940

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Overri	de	Primary Crash [Document #	Agency	Crash Number			icer/Deputy OR R. TUS		
53	Crash Date 02/05/2021		Crash Time 01:30 PM		Date A		Time Arriv				
MD	Date Notified 02/05/2021		Time Notified 01:30 PM		Total U	nits	Total Injui	ed	Total Kills	ed	-
SLOSVWDS	On Emergency	Hit	t and Run	Lane Clos	ure	Work Zone	Trail	er or	Towed		Reporting Threshold
	Government Property		Active Sc	hool Zone	School NO	Bus Related	Tags				
~	Reportable		Crash Type DT4000 (STA	NDARD CRASH	H)		Ame	nded			Secondary Crash
	Description Diagram		J								
		Unit	#2 - II-	30	car park	ed		Add	otos By	rmation	
	↓ I, a sworn law enfo	rcemer	of officer, agree		t added	any C.IIS data in t	his report				

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n Ann					

1SL0SVWDS3 21-003940

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Location •							
ON 2200BLK S 68TH	IST		Latitude			Longitu	
225 FT S OF W GRANT ST			43.004	143048		-87.99	8000267
(OTHER 2200BLK)				X Coordinate			
IN THE CITY OF WES			Structure OTHER				
Crash Scene							
First Harmful Event		-	First Har	mful Event	Location		
PARKED MOTOR VE	HICLE			ADWAY	Location		
Manner of Collision			Light Co				
00 - NO COLLISION	W/VEHICLE IN TRANSPORT		DAYLK	SHT			
Road Surface Condition(s)		Roadwa	y Factor(s)		-	
SNOW							
Environment Factor(s)							
NONE			NONE				
Weather Condition(s)							
CLEAR							
Animal Type				To Trafficw	•		
Crash Classification - Loc	cation		Crash Cl	assification	- Jurisdiction		
PUBLIC PROPERTY			NO SPI	ECIAL JU	RISDICTION		
Tribal Land			Access 0				Special Study
Within Interchange Area	Junction Location		Intersection Type				
William micromange mica							
NO	NON-JUNCTION		NOT AN INTERS	ECTION			
L	NON-JUNCTION		NOT AN INTERS	ECTION			
Unit Summary	NONJUNCTION	Vehicle Ope	NOT AN INTERS		Unit Type		
Unit Summary	NONJUNCTION	Vehicle Ope			Unit Type TRUCK		
Unit Summary Unit Status	NONJUNCTION					s Endorse	ments
Unit Summary Unit Status IN TRANSIT				n	TRUCK Operating A		
Unit Summary Unit Status IN TRANSIT Vehicle Type	Train/Bus # Recorded		rating As Classificatio		TRUCK Operating A		ments Mat Types
Unit Summary Unit Status IN TRANSIT Vehicle Type SNOW PLOW Total Occs		B CLASS Total # Citat 0	rating As Classificatio	n Total Tra	TRUCK Operating A	Total Haz	Mat Types
Unit Summary Unit Status IN TRANSIT Vehicle Type SNOW PLOW Total Occs 1	Train/Bus # Recorded	Total # Citat 0 Pre	ions Issued CrashTire Mark	Total Tra	TRUCK Operating A	Total Haz 0 Total Lan 2	Mat Types
Unit Summary Unit Status IN TRANSIT Vehicle Type SNOW PLOW Total Occs 1 Insurance? YES Most Harmful Event: Coll	Train/Bus # Recorded Direction Of Travel NORTHBOUND ision With	Total # Citat 0 Pre 0 Special Func	ions Issued CrashTire Mark ction	Total Tra	TRUCK Operating A sillers mit Emergency	Total Haz 0 Total Lan 2 Motor Veh	Mat Types es icle Use
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Unit Summary Unit Status IN TRANSIT Vehicle Type SNOW PLOW Total Occs 1 Insurance? YES Most Harmful Event: Coll PARKED MOTOR VE Traffic Way ONE-WAY TRAFFIC	Train/Bus # Recorded Direction Of Travel NORTHBOUND ision With	Total # Citat 0 Pre 0 Special Fun NO SPECI Traffic Contr	ions Issued CrashTire Mark ction IAL FUNCTION rol ROL	Total Tra	TRUCK Operating A silers mit Emergency NOT APPI Traffic Contr	Total Haz 0 Total Lan 2 Motor Veh LICABLE	es icle Use
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Unit Summary Unit Status IN TRANSIT Vehicle Type SNOW PLOW Total Occs 1 Insurance? YES Most Harmful Event: Coll PARKED MOTOR VE Traffic Way ONE-WAY TRAFFIC	Train/Bus # Recorded Direction Of Travel NORTHBOUND ision With CHICLE	Total # Citat 0 Pre 0 Special Function NO SPECI Traffic Contr NO CONTI	ions Issued CrashTire Mark ction IAL FUNCTION rol ROL	Total Tra	TRUCK Operating A silers mit Emergency NOT APPI Traffic Contr	Total Haz 0 Total Lan 2 Motor Veh LICABLE	es icle Use
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Unit Summary Unit Status IN TRANSIT Vehicle Type SNOW PLOW Total Occs 1 Insurance? YES Most Harmful Event: Coll PARKED MOTOR VE Traffic Way ONE-WAY TRAFFIC Surface Type BLACKTOP (BITUMII Truck Bus or HazMat TRUCK OR TRUCK C Vehicle License Plate Numb 81165 Color	Train/Bus # Recorded Direction Of Travel NORTHBOUND ision With CHICLE NOUS) COMBINATION > 10,000LBS (Total # Citat 0 Pre 0 Special Funch NO SPECI Traffic Contr NO CONTI Road Curvat STRAIGHT GVWR/GCWR Plate Type MUN - ML Make PETERBII Body Style	ions Issued CrashTire Mark ction IAL FUNCTION rol ROL ture T	Total Tra 0 Speed Li 25	TRUCK Operating A silers mit Emergency NOT APPI Traffic Contr NO Road Grade LEVEL Country of Iss UNITED ST Model	Total Haz 0 Total Lan 2 Motor Veh LICABLE of Inopera	es icle Use
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21-003940

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Towed Due To Damage	Vehicle Removed By				
		NOT TOWED	OPERATOR				
		What Driver Was Doing GOING STRAIGHT	Vehicle Factors				
		Driver Prior Action Other	NOT APPLICABLE				
TINO	VEHICLE	Driver Actions FAILURE TO CONTROL					
01	0.1	Owner Name WEST ALLIS CITY (414) 302-8200	Owner Address 7525 W GREENFIELD AV WEST ALLIS, WI 53214,				
		Sequence Of Events Event					
	2	PARKED MOTOR VEHICLE					
	62	Event					
	8	Event	<u> </u>				
	2	Event					
Į,		Policy Holder					
LINI		Insurance Company CITIES-&-VILLAGES-MUTUAL-INS-CO	Organization/Company WEST ALLIS CITY				
		Individual					
		Driver	Citations Issued	Sex			
		SCOTT PATRICK KABOSKEY	0	MALE			
	NAL			Race			
—	DUA		Date of Birth 09/10/1971	, reade			
LIND	INDIVIDUAL	Address 557 S OAK PARK CT MILWAUKEE, WI 53214, US					
TIND		557 S OAK PARK CT MILWAUKEE, WI 53214 , US	09/10/1971 Driver License Number K1207957133008 STATE: WISCONSIN COUN				
LIND		557 S OAK PARK CT MILWAUKEE, WI 53214 , US	09/10/1971 Driver License Number K1207957133008 STATE: WISCONSIN COUN				
TIND		557 S OAK PARK CT MILWAUKEE, WI 53214 , US On Duty Crash WINTER-HWY-MAINTENAN Row Seat Position	09/10/1971 Driver License Number K1207957133008 STATE: WISCONSIN COUN Safety Equipment				
LIND		557 S OAK PARK CT MILWAUKEE, WI 53214 , US On Duty Crash WINTER-HWY-MAINTENAN Row 01 - FRONT ROW 07 - LEFT	09/10/1971 Driver License Number K1207957133008 STATE: WISCONSIN COUN Safety Equipment SHOULDER & LAP BELT				
	Sal	557 S OAK PARK CT MILWAUKEE, WI 53214 , US On Duty Crash WINTER-HWY-MAINTENAN Row 01 - FRONT ROW Helmet Use Eye Protection Injury Severity	09/10/1971 Driver License Number K1207957133008 STATE: WISCONSIN COUN Safety Equipment SHOULDER & LAP BELT Helmet Compliance				
UNIT UNIT	Sal	557 S OAK PARK CT MILWAUKEE, WI 53214 , US On Duty Crash WINTER-HWY-MAINTENAN Row O1 - FRONT ROW Helmet Use Eye Protection Injury Severity NO APPARENT INJURY	09/10/1971 Driver License Number K1207957133008 STATE: WISCONSIN COUN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance	TRY: UNITED STATES			
	Sal	557 S OAK PARK CT MILWAUKEE, WI 53214 , US On Duty Crash WINTER-HWY-MAINTENAN Row O1 - FRONT ROW Helmet Use Eye Protection Injury Severity NO APPARENT INJURY Ejected Ejection Path	09/10/1971 Driver License Number K1207957133008 STATE: WISCONSIN COUN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED	Trapped/Extricated			
	Sal	Sor S OAK PARK CT MILWAUKEE, WI 53214 , US On Duty Crash WINTER-HWY-MAINTENAN Row O1 - FRONT ROW Helmet Use Eye Protection Injury Severity NO APPARENT INJURY Ejected NOT EJECTED On Duty Crash WINTER-HWY-MAINTENAN O7 - LEFT Injury Severity NO APPARENT INJURY Ejected NOT EJECTED/NOT	09/10/1971 Driver License Number K1207957133008 STATE: WISCONSIN COUN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED	Trapped/Extricated NOT TRAPPED			
	Sal	557 S OAK PARK CT MILWAUKEE, WI 53214 , US On Duty Crash WINTER-HWY-MAINTENAN Row O1 - FRONT ROW Helmet Use Eye Protection Injury Severity NO APPARENT INJURY Ejected Ejection Path	09/10/1971 Driver License Number K1207957133008 STATE: WISCONSIN COUN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED	Trapped/Extricated			
	Sal	557 S OAK PARK CT MILWAUKEE, WI 53214 , US On Duty Crash WINTER-HWY-MAINTENAN Row 01 - FRONT ROW Helmet Use Eye Protection Injury Severity NO APPARENT INJURY Ejected NOT EJECTED Medical Transport	09/10/1971 Driver License Number K1207957133008 STATE: WISCONSIN COUN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED	Trapped/Extricated NOT TRAPPED			
	Sal	557 S OAK PARK CT MILWAUKEE, WI 53214 , US On Duty Crash WINTER-HWY-MAINTENAN Row 01 - FRONT ROW Helmet Use Eye Protection Injury Injury NO APPARENT INJURY Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital	09/10/1971 Driver License Number K1207957133008 STATE: WISCONSIN COUN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED TAPPLICABLE EMS Agency Identifier Date of Death	Trapped/Extricated NOT TRAPPED EMS Run #			
	Sal	Sor S OAK PARK CT MILWAUKEE, WI 53214 , US On Duty Crash WINTER-HWY-MAINTENAN Row 01 - FRONT ROW Helmet Use Eye Protection Injury Severity NO APPARENT INJURY Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital	09/10/1971 Driver License Number K1207957133008 STATE: WISCONSIN COUN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED TAPPLICABLE EMS Agency Identifier Date of Death	Trapped/Extricated NOT TRAPPED EMS Run #			

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

i G												
		Non Motorist	Striking I	Jnit #	Location							
		Prior Action	-									
UNIT	INDIVIDUAL	Action										
		Action Other									To/From School	
			Suenante	ed Alcohol U	50	Suppo	cted Drug Use					
i	1	Drug & Alcohol	NO	A AICCITOR O	36	NO	oted Didg Ose					
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test	Туре				Alcohol Test	Results	
	*	Drug Test Given TEST NOT GIVEN			Drug Test Ty	pe .		Drug 7	Test Resu	lts		
0.1	000	Drug Type										
		Individual Condition										
		APPEARED NORMAL										
		Carrier										
		Use Vehicle Owner Same as Carrie					Source DRIVER					
10	10	WEST ALLIS OUSDOT# 00000				Address 7525 W GREENFIELD AVE WEST ALLIS, WI 53214 , US						
	BUS	GVWR		Vehicle Co					Car	go Body Type		
LINI	m	WORE THAN 26,00	00 LB	Carrier Typ		K (3 OR MORE AXLES) DUN Perm				MP nitted Load		
⊃	RUCK	000000		NOT IN C						T APPLICABLE		
	TRU	OS/OW Load	WI Permit	Number	P	ermitted Ve Permitted		Es		icle Required Permit	Escort Vehicle Present	
		Measured Height		Measur	ed Length		Measured Wid	th		Measured We	ight	
		Summary =		'								
		Status ALLY PARKED				Vehicle Op	perating As Clas	sification		Unit Type AUTOMOB	II F	
02	Vehic	cle Туре				D GEAGG				I	Endorsements	
0		ORT) UTILITY VEHIO		n/Bus # Rec	orded	Total # Cit	ations Issued		Total Tra	ilers [Total HazMat Types	
	0		Dire	ction Of Tra	ual	0			0	- 1	0	
⊢	YES	ance?		RTHBOUN		Pre	CrashTire Mark		Speed Li 25		Total Lanes 2	
LINO		Harmful Event: Collisio				Special Fu NO SPEC	nction CIAL FUNCTION	DN		Emergency M NOT APPLI	lotor Vehicle Use CABLE	
		Way -WAY TRAFFIC				Traffic Con				Traffic Contro	I Inoperative/Missing	
		ce Type CRETE				Road Curv				Road Grade		
	CONTONETE					1						

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21-003940

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 02/05/2021

Crash Time 01:30 PM

	Tru NO	ck Bus or HazMat			
		Vehicle			
			Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
02	02		Make TOYOTA	Year 2013	Model HIGHLANDER
		Color GRY - GRAY	Body Style UT - SPORT UTILITY VE	HICLE	Bus Use
LIND	VEHICLE	Initial Contact Point 01 - RIGHT FRONT CORNER Extent Of Damage MINOR DAMAGE			
		Towed Due To Damage NOT TOWED	Vehicle Removed By OWNER	-	
		What Driver Was Doing LEGALLY PARKED	Vehicle Factors		
		Driver Prior Action Other	NOT APPLICABLE		
UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTION			
02	02	Owner Name PAHOUA YANG (414) 688-4515	Owner Address 2213 S 68TH ST WEST ALLIS, WI 532	19 , US	
		Sequence Of Events			
	5	Event MOTOR VEH IN TRANSPORT			
	05	Event			
	03	Event			
	3	Event			
⊢		Policy Holder			
LINO		Insurance Company PROGRESSIVE-CLASSIC-INS-CO	Individual PAHOUA YANG		