**WAMC** 

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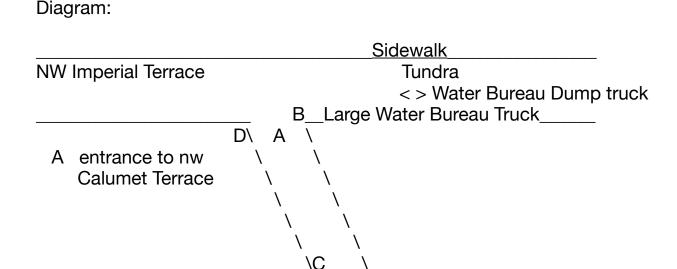
## AUTO LIABILITY CLAIM AGAINST THE CITY OF PORTLAND

- 1. **CLAIMANT** (Circle: **Mr.** Mrs. Ms. Miss). *Mr Jeff S. Triplett* **Date of Birth**
- a. Address <u>2807 NW Calumet Terrace</u> City <u>Portland State Or Zip</u> <u>97210</u>
- b. Home phone  $\underline{503-223-8090}$  Business\_Telephone  $\underline{NA}$  Cell phone  $\underline{503-223-8090}$ 
  - c. Occupation <u>Retired</u> Martial Status: <u>Single</u> If married, name of spouse <u>NA</u>
  - d. Email address
- 2. If claim involves a vehicle: 2006 Toyota Trundra 4-door
  - b. License Plates Number <u>269CWD</u> Driver's license Number State <u>Oregon</u>
  - c. At time of accident, were you: Owner
  - d. Name and address of owner if different from claimant NA
- e. Names & address of driver if different from claimant <u>NA my</u> tundra was parked.
- f. Names/address/phone #'s of all occupants of vehicle at the time of the accident: <u>Vehicle was stationary and unoccupied at the time</u> of the incident
- 3. **Insurance: What company insures the damaged vehicle?** *Farmer's Direct Property and Casualty Insurance Company* 
  - b. Policy number Claim number NA
- c. Name and address of your insurance agent or adjuster: <u>NA at</u> the moment.
- 4. Occurrence or event from which the claim arises:
- a. Date of incident <u>1/27/25</u> Exact location <u>By the intersection of NW Imperial Terrace and NW Calumet Terrace</u>
- c. Were you injured?  $\underline{NO}$  Was anyone else injured  $\underline{NO}$  (If there was no injury, please state "No Injuries"  $\underline{NO\ INJURIES}$ 
  - d. NO INJURIES NA

- e. No injuries/*no Dr*
- f. No injuries, therefore **no SSN, Medicare/Medicaid needed:** <u>NA</u>
- g. Were you on the job at the time <u>NA retired</u>
- h. Name of City of Portland Driver <u>Birkley Ramberg Please</u>
  <a href="mailto:confirm name by checking ODL">confirm name by checking ODL</a>

  \*\*City vehicle license <u>EZ99445</u>

Names/address/phone numbers of witnesses: <u>Daniel I don't have a last name</u> (<u>Portland Water Bureau employee onsite at time of the incident.</u> <u>phone #503-823-6549 please confirm his last name by either city records or calling the above and Jeff S. Triplett vehicle owner 2807 NW Calumet Terrace Portland, Oregon 97210, 503-223-8090.</u>



- B large hole dug to replace faulty valve
- C. large hole dug to replace fire hydrant
- D. Backhoe parked

5. **Description of Incident: Full account/what happened...:** <u>I happened to look out my window and saw a large Water Bureau dump truck backing down the road. The driver was attempting to back down Imperial Terrace. My vehicle (the Tundra) was parked in a location approved by Daniel. The</u>

Tundra was parked between two orange cones. I asked Daniel if I could park between the two cones, he said yes. The cones were to stop vehicles from parking on top of the metal plate/access points to water valves. Parking between the cones, per Danial was OK.

The driver of the city dump truck was moving very slowly jockeying up and down the street while passing very close to my Tundra. Daniel commented that he saw the dump truck moving very slowly back and forth while being very close to my truck. Daniel noted he was surprised that the driver was having so much trouble

I didn't continue watching the dump truck so wasn't aware of the damage until later.

## 6. Damages Claimed

- a. Amount claimed as of this date: <u>No claim nor estimates have been submitted/acquired</u>. It was my understanding I should wait to hear from the Risk Management from the City of Portland before doing either.
- b. **Estimated amount of future costs:** *NA at this time see 6.a. above for explanation*
- c. **Total amount claimed:** *NA at this time see 6.a. and 6.b. above for explanation*

## WARNING: IT IS A CRIMINAL OFFENSE TO FILE A FALSE CLAIM! (ORS 162.085)

I have carefully read the statements made in this claim, including any attached sheets, and they are true. I understand and acknowledge that all statements made in this claim are made to a public servant of the City of Portland, and that the statements are in connection with an application for benefits from the City of Portland.

3/5/25

date

Jeff S Triplett
CLAIMANT'S SIGNATURE