

CITY OF WAUWATOSA
7725 W. North Avenue
Wauwatosa, WI 53213

NOTICE OF CIRCUMSTANCES OF CLAIM

Name: Kavion jefferson
Address: 3429 N 53rd st Milwaukee WI

Phone: 4147920568
Email: kavionjeff@live.com

Incident/Accident Information

Date: November 9,2023
Time:8:30pm
Place: Mayfair rd

CIRCUMSTANCES OF CLAIM

In the space below briefly describe the circumstances of your claim. (Attach additional sheets, if necessary.)
For auto damages, attach a copy of police report, if any, and a diagram of the accident scene indicating north, south, east or west corners if the accident occurred at an intersection. For bodily injury, indicate nature of injury, whether or not medical attention was given and the name of the treatment provider. Identify any witnesses to the incident/accident.

Car damages.
Front end damage

Signed: *Kavion Jefferson*

Date: 12/12/23

CLAIM

NOTE: You are not required to make a claim at this time. As long as you have filed the above Notice of Circumstances of Claim you may file a claim with the City at any time consistent with the applicable statute of limitations. However, in order for the City to formally accept or deny your claim at this time, the following claim must be completed and signed.

The undersigned hereby makes a claim against the City arising out of the circumstances described above in the amount of \$3,255.

To process this claim it is necessary to detail all damages being sought.

Signed: *Kavion Jefferson*

Date: 12/7/2023

Address: 3429 N 53rd st

1RL1H0LHJS

23-030491

WISCONSIN MOTOR VEHICLE CRASH REPORT

WAUWATOSA POLICE DEPARTMENT
1700 NORTH 116TH STREET
WAUWATOSA, WI 53226
(414) 471-8430

1RL1H0LHJS

Document Number Override		Primary Crash Document #		Agency Crash Number		Investigating Officer/Deputy SERGEANT KURT SVATEK	
Crash Date 11/09/2023		Crash Time 08:31 PM		Date Arrived 11/09/2023		Time Arrived 08:31 PM	
Date Notified 11/09/2023		Time Notified 08:31 PM		Total Units 02		Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input checked="" 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	
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

<p>Diagram</p>	Reconstruction By
	Photos By SGT SVATEK
	Additional Information PHOTOS

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

UNIT #1 WAS N/B ON N MAYFAIR RD IN LANE #2. UNIT #2 WAS S/B ON N MAYFAIR RD IN THE LEFT TURN LANE TO ENTER MAYFAIR MALL AT THE 2600 ENTRANCE - ONE BLOCK SOUTH OF W CENTER ST. UNIT #2 ENTERED THE N/B LANES TO CONDUCT A U-TURN, NOT SEEING UNIT #1 AND UNIT #1 COLLIDED INTO THE REAR OF UNIT #2.

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Location

ON STH100 NB 1010 FT N OF MEINECKE AVE IN THE CITY OF WAUWATOSA IN MILWAUKEE COUNTY	Latitude 43.065024179	Longitude -88.047634027
	X Coordinate 414698.84375	Y Coordinate 4768568
	Structure Type	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 01 - ANGLE		Light Condition DARK/LIGHTED	
Road Surface Condition(s) DRY		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 CROSSOVER-RELATED	Intersection Type NOT AN INTERSECTION	
Closure Type LANE CLOSURE		Reasons for Closure	
Date Initial Lane/Rd Closed 11/09/2023	Time Initial Lane/Rd Closed 08:31 PM	LAW ENFORCEMENT	
Date All Lanes Open 11/09/2023	Time All Lanes Open 09:00 PM	Date Scene Cleared 11/09/2023	Time Scene Cleared 09:05 PM

Unit Summary

UNIT 01	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? NO	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 40	Total Lanes 3	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, DIVIDED, UNPROTECTED (PAINTED > 4		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					
01	Vehicle					
	License Plate Number [REDACTED]		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number [REDACTED]		Make MAZDA	Year 2017	Model 6	

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UNIT VEHICLE	Color WHI - WHITE	Body Style SD - SEDAN	Bus Use
	Initial Contact Point 01 - RIGHT FRONT CORNER	Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 12 - FRONT	
	Extent Of Damage FUNCTIONAL DAMAGE		
	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR	
	What Driver Was Doing GOING STRAIGHT	Vehicle Factors NOT APPLICABLE	
UNIT VEHICLE	Driver Prior Action Other		
	Driver Actions NO CONTRIBUTING ACTION		
	Owner Name KAVION LYNDELL JEFFERSON	Owner Address	
01 01	Sequence Of Events		
	Event MOTOR VEH IN TRANSPORT		
	Event		
	Event		
	Event		
UNIT INDIVIDUAL	Individual		
	Driver KAVION LYNDELL JEFFERSON	Citations Issued 0	Sex MALE
		Date of Birth	Race BLACK/AFRICAN AMERICAN
	Address	STATE: WISCONSIN COUNTRY: UNITED STATES	
01 001	Safety Equipment		On Duty Crash
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	Safety Equipment SHOULDER & LAP BELT
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	Injury	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

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UNIT INDIVIDUAL 01 001	Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)	
	Distracted By Action NOT DISTRACTED			
	Non Motorist		Striking Unit #	Location
	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 EMOTIONAL (DEPRESSED, ANGRY, DISTURBED, ETC)				

Unit Summary

UNIT 02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type (SPORT) UTILITY VEHICLE				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel SOUTHBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 40	Total Lanes 3	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function POLICE		Emergency Motor Vehicle Use NON-EMERGENCY, NON-TRANSPORT	
	Traffic Way TWO-WAY, DIVIDED, UNPROTECTED (PAINTED > 4		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

02 02	Vehicle				
	License Plate Number F1744		Plate Type OFF - MUNICIPAL OFFICI	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1FM5K8AB1PGA62308		Make FORD	Year 2023	Model EXPLORER
	Color BLK - BLACK		Body Style UT - SPORT UTILITY VEHICLE		Bus Use
	Initial Contact Point 06 - REAR				

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UNIT INDIVIDUAL 02 002	Distracted By		Distracted By Source EXTERNAL (TO VEHICLE/NON-MOTORIST AREA)	
	Distracted By Action OTHER ACTION (LOOKING AWAY FROM TASK ETC)			
	Non Motorist	Striking Unit #	Location	
	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				