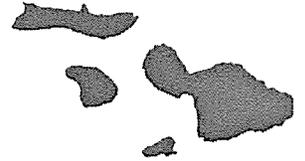
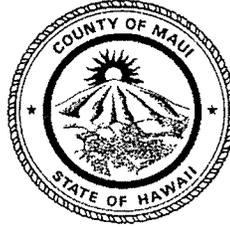


MICHAEL P. VICTORINO
Mayor

MOANA M. LUTEY
Corporation Counsel

RICHELLE M. THOMSON
First Deputy

LYDIA A. TODA
Risk Management Officer
Tel. No. (808) 270-7535
Fax No. (808) 270-1761



DEPARTMENT OF THE CORPORATION COUNSEL
COUNTY OF MAUI
200 SOUTH HIGH STREET, 3RD FLOOR
WAILUKU, MAUI, HAWAII 96793
EMAIL: CORPCOUN@MAUICOUNTY.GOV
TELEPHONE: (808) 270-7740
FACSIMILE: (808) 270-7152

February 8, 2021

MEMO TO: Michael J. Molina, Chair
Government Relations, Ethics and Transparency Committee

FROM: Caleb P. Rowe, Deputy Corporation Counsel 

SUBJECT: Litigation Matters
Settlement of Claim: Kristen Sato
John Mullen Claim No.: 4063974

Pursuant to Section 3.16.020B of the Maui County Code, our department hereby requests authorization to discuss settlement of the aforementioned claim. It is not anticipated that an executive session may be necessary to discuss questions and issues pertaining to the powers, duties, privileges, immunities, and liabilities of the County, the Council, and the Committee. There is no immediate deadline to this matter.

Copies of the claim and proposed resolution are enclosed. We request that a representative from the Maui Police Department be in attendance during discussion of this matter. If you have any questions, or concerns, please do not hesitate to contact me.

CPR:cs
Enclosures

cc: Tivoli Faaumu, Police Chief
Maui Police Department

Resolution

No. _____

AUTHORIZING SETTLEMENT OF CLAIM NO. 4063974 OF KRISTEN SATO

WHEREAS, Claimant Kristen Sato filed Claim No. 4063974 on May 22, 2020 against the County of Maui, alleging damage to her vehicle resulting from an accident with a Maui County fleet vehicle being operated by a County Employee on February 25, 2020; and

WHEREAS, the County of Maui, to avoid incurring expenses and the uncertainty of a judicial determination of the parties' respective rights and liabilities, will attempt to reach a resolution of this case by way of a negotiated settlement or Offer of Judgment; and

WHEREAS, the Department of the Corporation Counsel has requested authority to settle this case for a settlement of \$13,969.48; and

WHEREAS, having reviewed the facts and circumstances regarding this case and being advised of attempts to reach resolution of this case by way of a negotiated settlement or Offer of Judgment by the Department of the Corporation Counsel, the Council wishes to authorize the settlement; now, therefore,

BE IT RESOLVED by the Council of the County of Maui:

1. That it approves settlement of Claim No. 4063974 of Kristen Sato in the amount of \$13,969.48;
2. That it authorizes the Mayor to execute a Release and Settlement Agreement on behalf of the County in this case, under terms and conditions as

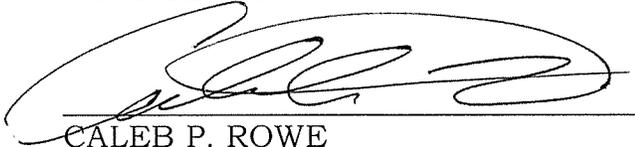
Resolution No. _____

may be imposed by the Corporation Counsel consistent with the Council's settlement approval;

3. That it authorizes the Director of Finance of the County of Maui to satisfy settlement of this case, under terms and conditions as may be imposed by the Corporation Counsel consistent with the Council's settlement approval; and

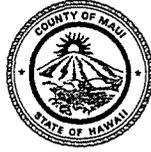
4. That certified copies of this Resolution be transmitted to the Mayor, the Director of Finance, the Chief of the Maui Police Department and the Corporation Counsel.

APPROVED AS TO FORM
AND LEGALITY:

A handwritten signature in black ink, appearing to read 'Caleb P. Rowe', is written over a horizontal line.

CALEB P. ROWE
Deputy Corporation Counsel
County of Maui
RISK 2020-0114

KATHY L. KAOHU
County Clerk



JAMES G.M. KRUEGER
Deputy County Clerk

OFFICE OF THE COUNTY CLERK

COUNTY OF MAUI
200 SOUTH HIGH STREET
WAILUKU, MAUI, HAWAII 96793
www.mauicounty.gov/county/clerk

May 22, 2020

John Mullen & Company, Inc. (JMC)
Via email: claims@johnmullen.com

Attn: Unit Code 99

Respectfully transmitted is a copy of a claim against the County of Maui filed by Allstate, a/s/o Kristen Sato, of P.O. Box 660636, Dallas, which was received by our office on May 22, 2020.

Respectfully,

A handwritten signature in cursive script that reads "Kathy L. KaoHu".

KATHY L. KAOHU
County Clerk

Attachment

cc: Mayor
Corporation Counsel
Council Chair

/djy

COUNTY OF MAUI

CLAIM FOR DAMAGE OR INJURY

RECEIVED

2020 MAY 22 PM 2:16

PLEASE PRINT CLEARLY

- 1. Claimant: Mr. Mrs. Ms. Allstate A/S/O Kristen Sato
- 2. Address: PO Box 660636 Dallas, TX 75265
- 3. Telephone No.: Business 540-725-7077 Residence 540-725-7077
- 4. Date of Accident: 2/25/2020
- 5. Location of Accident: KAAHUMANU AVE
- 6. Amount of Claim: Property Damage \$ _____ Personal Injury \$ _____

7. Describe the accident in detail. Indicate all the facts, causes, persons involved, witnesses, extent of damage, etc., and why you think the County is responsible. You may write on the back if needed.

Insd was stopped in traffic for red light. Was stopped for less than 5 minutes.
She was hit in the rear and was pushed into the car in frt. She was hit once in the rear and was pushed once
into the Honda. After the ax the drvr of the SUV came to chk on her. She didn't get out because
she hit her knee. A/B did not deploy. IV has heavy rear dmg, frt had less dmg.
Honda had rear dmg, she did not see the frt. She did not look at the frt car. SUV had heavy frt end dmg. Police and amb on the scene.

- 8. If you carry insurance applicable to this claim, please provide the name and address of the insurance company and your policy number.
Allstate Insurance - address is listed on section 2.
_____ Policy No. 000087269097
- A. Did you file a claim with your insurance company? Yes
If yes, amount claimed \$ _____ Deductible amount \$ _____
- B. If a claim was filed with your insurance company, what action do they intend to take?
Allstate is subrogating for vehicular property damage

I HEREBY DECLARE THAT THE FOREGOING STATEMENTS ARE TRUE AND CORRECT.

Rachel Grinnell
(Signature of Claimant)

5/12/2020
(Date)

(Rev. 05/11/95)



0579455452

RISK 2020-0114

RELEASE OF PROPERTY DAMAGE CLAIM

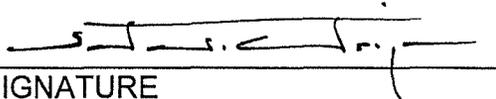
Allstate Insurance (as subrogee of Kristen Sato), their heirs, assigns and successors, thereby release and forever discharge the County of Maui, its officers, employees and agents, from all causes of action, and agree to withdraw, dismiss or refrain from filing any claim, complaint, charge or appeal against the County of Maui with any court, government board, agency, department or entity concerning the incidents, occurrences or losses involving a 2007 Toyota Tacoma with LP #MRL382 and VIN 5TEJU62N97Z4404569 at Kaahumanu Avenue 175' west of Wahine Pio Avenue in Kahului, in the State of Hawaii.

In consideration of this release of property damage claim, County of Maui agrees to pay **thirteen thousand nine hundred sixty-nine and 48/100 dollars** (\$13,969.48) as full and final release and satisfaction of the property damage claim brought by Allstate Insurance (as subrogee of Kristen Sato) against the County of Maui.

It is hereby expressly understood and agreed that the payment or granting of the consideration described above is not an admission of liability or fault of any kind, but compromises and settles all property damage disputes between the parties for the purpose of avoiding further litigation or expense. Said payment is the final consideration of this Property Damage Release, and no other payment or consideration has been promised or will be paid for this property damage claim. This release is for property damage only and does not waive or release claims for bodily injury.

This release is non-binding pending County of Maui approval. Each party to this agreement agrees to bear their own costs and attorney's fees.

Signed this 18th day of January 2021.


SIGNATURE

Scotte Castrique CLAIMS SPECIALIST
PRINTED NAME OF SIGNER & TITLE

STATE OF HAWAII MOTOR VEHICLE ACCIDENT REPORT

(1) Crime Code		(2) County	(3) District	(4) Beat	(5) Watch	(6) Date/Time/Day Occurred			(7) Date/Time/Day Reported																				
		MAU	1	20	2	02/25/2020	07:34	TU	02/25/2020	07:34	TU																		
(8) Report Type		(9) Total Involved			(10) Number Of			(11) Tow	(12) Hit & Run	(13) Fire	(14) Photo	(15) Select One																	
<input checked="" type="radio"/> Major (01) <input type="radio"/> Minor (02)		MV	MC	MOP	BC	PED	WITN	KILLED	INJ	<input type="radio"/> No (01) <input checked="" type="radio"/> Yes (02)	<input type="radio"/> No (01) <input checked="" type="radio"/> Yes (02)	<input type="radio"/> No (01) <input checked="" type="radio"/> Yes (02)	<input type="radio"/> No (01) <input checked="" type="radio"/> Yes (02)	<input type="radio"/> None (00) <input type="radio"/> Bridge (01)	<input type="radio"/> Tunnel (02) <input type="radio"/> Ramp (03)														
(16) Times Police		(18) Weather Conditions (Select up to 2)					(19) Light/Lighting																						
Sent: 07:34 Arrive: 07:36 (17) Times EMS Sent: 07:35 Arrive: 07:40		<input checked="" type="radio"/> Clear (01) <input type="radio"/> Hazy, Fog, Smoke (04) <input type="radio"/> Snow (07) <input type="radio"/> Cloudy (02) <input type="radio"/> Windy, Severe Crosswind (05) <input type="radio"/> Rain (03) <input type="radio"/> Sleet/Hail (06)					<input type="radio"/> Dawn (02) <input type="radio"/> Continuous Lighting (05) <input type="radio"/> Dusk (03) <input type="radio"/> Spot Illumination (04) <input type="radio"/> Dark/Lights off (06) <input type="radio"/> Dark /No Lights (07) <input type="radio"/> Dark/Unknown (08) <input type="radio"/> Unknown (09)																						
(20) Location			(21) Traffic Level		(22) Trafficway Description				(23) GPS Location																				
<input type="radio"/> School (01) <input type="radio"/> Business (02) <input checked="" type="radio"/> Residential (03) <input type="radio"/> Industrial (04)			<input type="radio"/> Recreational (05) <input type="radio"/> Farm/Fields (06) <input type="radio"/> No Development (07) <input type="radio"/> Other (08)		<input checked="" type="radio"/> Light (01) <input type="radio"/> Medium (02) <input type="radio"/> Heavy (03)		<input type="radio"/> 2-Way Undivided (01) <input type="radio"/> 2-Way, Undivided with Cont., Left Turn Lane (02) <input type="radio"/> 2-Way, Divided, Unprotected Median (03) <input checked="" type="radio"/> 2-Way, Divided, Median Barrier (04) <input type="radio"/> 1-Way Trafficway (05) <input type="radio"/> Other (06)				Latitude: 20:53:19.7567 Longitude: 156:28:59.8752																		
(24) Name of Street or Highway						(25) City/Town		(26) Work Zone																					
KAAHUMANU AVE						KAHULUI		<input checked="" type="radio"/> No (01) <input type="radio"/> Yes (02)																					
(27) Route No.		(28) Mile Post Marker		(29) Distance and Direction		(30) Refer (Mile Marker, Intersection, Etc.)																							
32				175 (1600') WEST OF		WAHINE PIO AVE (WAKEA AVE)																							
(31A) Location of First Harmful Event						(31B) Action																							
Intersection 01 Intersection Area 02 Driveway Access On Roadway - Not at intersection 10 Left or Inner Lane 11 Right or Outer Lane 12 Other Main Lane 13 Merge/Transition Lane 14 Acceleration Lane 15 Deceleration Lane 16 Left Turn Lane 17 Right Turn Lane 18 Bikeway 19 Bus/HOV/Zipper Lane Off Roadway 20 Left Shoulder 21 Right Shoulder 22 Left Roadside 23 Right Roadside 24 Median						Off Roadway (Cont.) 25 Median Crossover 26 Outside ROW (Trafficway) Off Roadway - Other 30 Driveway 31 Private Road 32 Parking Lot Other Roadway 40 Entrance/Exit Ramp 41 Railway Crossing 42 Midblock Crosswalk 43 HOV Crossover Lane 44 Gore 45 Separator 46 Parking Lane 47 Emergency Escape Ramp 48 Other (Specify in Synopsis Block)						Non-Collision 01 Overtum/Rollover on Roadway 02 Overtum/Rollover off Roadway 03 Submersion 04 Fire/Explosion 05 Jackknife 06 Ran off Roadway 07 Cargo/Equipment Loss or Shift 08 Fell/Jumped from Motor Vehicle 09 Downhill Runaway 10 Separation of Units 11 Cross Median/Centerline 12 Equipment Failure 13 Thrown or Falling Objects 14 Other Non-Collision (Specify in the Synopsis Block) Collision with Object/Animal 20 Overhead Cables 21 Guardrail Face 22 Guardrail End 23 Culvert 24 Ditch 25 Bridge Overhead Structure 26 Bridge Pier or Support 27 Bridge Rail 28 Building 29 Tunnel						Collision with Object/Animal (Cont.) 30 Curb 31 Embankment/Retaining Wall 32 Fence 33 Utility Pole/Light Support 34 Traffic Signal/Sign Post 35 Other Post/Pole/Support 36 Impact Attenuator/Crash Cushion 37 Concrete Traffic Barrier 38 Other Traffic Barrier 39 Tree (Standing) 40 Hydrant 41 Mailbox 42 Animal 43 Other (Specify in the Synopsis Block) Collision with Person 50 Unknown 51 Crossing in Crosswalk 52 Crossing Outside Crosswalk 53 Crossing no Crosswalk 54 Darting Out 55 Walking in Roadway 56 Playing/Exercising in Roadway 57 Directing Traffic 58 Pushing/Working on Vehicle 59 Getting On/Off Vehicle 60 Roadwork 61 Other (Specify in Synopsis Block)						Collision with Bicycle or Moped 70 Unknown 71 Riding in Bikeway 72 Riding Outside of Bikeway 73 Riding in Road/No Bikeway 74 Riding off Roadway 75 Crossing Roadway 76 Fell In/On Roadway 77 Other (Specify in Synopsis Block) Collision with MV in Transport (Except Moped) 80 Head On 81 Rear End 82 Sideswipe - Same Direction 83 Sideswipe - Opposite Direction 84 Angle - Same Direction 85 Angle - Opposite Direction 86 Angle - Not Specified 87 Broadside 88 Rear to Side 89 Rear to Rear 90 Other (Specify in Synopsis Block) Collision with MV - Other 100 MV in Other Roadway 101 Railway Vehicle (Train/Engine) 102 Parked MV 103 Work Zone/Maintenance Equip.					
Enter the Location of the FIRST HARMFUL EVENT (31A)						Enter the Sequence number of the FIRST HARMFUL EVENT (31C)																							
Enter the Location of the MOST HARMFUL EVENT (31A)						Enter the Sequence number of the MOST HARMFUL EVENT (31D)																							
Officer's Rank and Name		Officer's ID Number		Date/Time		Supervisor's Rank and Name		Supervisor's ID Number		Date/Time																			
PO2 TENGAN, RYAN S		15322		3/3/20 14:16		SGTD1 CORPUZ, DALE R		1637		3/3/20 14:16																			

This report is prepared for the State of Hawaii Department of Transportation federally mandated 23 USC148, Highway Safety Improvement Program



Unit No. 01		UNIT INFORMATION (Cont.)			
(89) Citations		(90) Est. Damages	(91) Extent of Damage		(92) Is this a CMV or Other QUALIFYING Vehicle?
Citation Number	Offense Code (H.R.S./R.O. Section No.)	<input type="radio"/> \$3,000 or Greater (01) <input type="radio"/> Less than \$3,000 (02)	<input type="radio"/> None (00) <input type="radio"/> Minor (01)	<input type="radio"/> Functional (02) <input type="radio"/> Disabling (03)	<input type="radio"/> No (01) <input type="radio"/> Yes (02) If yes, go to CMV SUPPLEMENT
		(95A) Object (1) Struck/Damage Description	(96A) Object (2) Struck/Damage Description		
		(95B) (Object 1) Owner's Name	(95E) (Object 2) Owner's Name		
		(95C) (Object 1) Owner's Phone Number	(95D) (Object 2) Owner's Phone Number		
		(95D) Estimated Damages to Object 1	(95E) Estimated Damages to Object 2		
		<input type="radio"/> \$3,000 or Greater (01) <input type="radio"/> Less than \$3,000 (02)	<input type="radio"/> \$3,000 or Greater (01) <input type="radio"/> Less than \$3,000 (02)		
(93) Using the Diagram to the Right, Indicate Initial Impact Point in block below:		(94) Direction			
		From	To		
<input checked="" type="checkbox"/> 1 Circle Damaged Areas		3	7		
(97) Motor Vehicle Maneuver/Action		(98) Reason for Maneuver		(99) Traffic Control Device Type	
<input type="radio"/> Straight Ahead (01) <input type="radio"/> Changing Lanes (02) <input type="radio"/> Merging (03) <input type="radio"/> Overtaking/ Passing (04) <input type="radio"/> Slowing/Stopping (05) <input type="radio"/> Backing (06)		<input type="radio"/> Intended Maneuver (01) <input type="radio"/> Traffic Controls (02) <input type="radio"/> Mechanical Failure (03) <input type="radio"/> Avoid Other Vehicle (04)		<input type="radio"/> No Controls (00) <input type="radio"/> Traffic Signal (01) <input type="radio"/> Stop Sign (02) <input type="radio"/> Yield Sign (03) <input type="radio"/> Flashing Red (04) <input type="radio"/> Flashing Amber (05) <input type="radio"/> Person (06)	
<input type="radio"/> Parking (07) <input type="radio"/> Parked (08) <input type="radio"/> Start from Parked (09) <input type="radio"/> Stopped in Traffic (10) <input type="radio"/> Start in Traffic (11) <input type="radio"/> Right Turn on Red (12) <input type="radio"/> Turning Right (13)		<input type="radio"/> Avoid Pedestrian (05) <input type="radio"/> Avoid Bicycle (06) <input type="radio"/> Avoid Obj./ Animal (07) <input type="radio"/> Avoid Prior MVA (08) <input type="radio"/> Other (09)		<input type="radio"/> School Zone Sign/ Device (07) <input type="radio"/> Warning Sign (08) <input type="radio"/> Railway X-ing Device (09) <input type="radio"/> Other (10)	
(100) Traffic Control Condition		(101) Guidance/Pavement Markings		(102) Delineator Present	(103) Bikeway
<input type="radio"/> Functioning Properly (01) <input type="radio"/> Knocked Down (02) <input type="radio"/> Obscured (03) <input type="radio"/> Red Malfunction (04) <input type="radio"/> Yellow Malfunction (05)		Lft Rgt <input type="radio"/> None (00) <input type="radio"/> Solid Yellow (01) <input type="radio"/> Skip-Dash Yellow (02) <input type="radio"/> Solid White (03) <input type="radio"/> Skip-Dash White (04) <input type="radio"/> Solid Double Yellow (05)		<input type="radio"/> None (00) <input type="radio"/> Right (01) <input type="radio"/> Left (02) <input type="radio"/> Both Sides (03)	<input type="radio"/> None (00) <input type="radio"/> Bike Route [Signed] (01) <input type="radio"/> Bike Lane Stripe (02) <input type="radio"/> Separate Path/ Lane (03)
(104) Vehicle Factors (Select up to 2)		(105) Vision Obstruction (Select up to 2)	(106) Human Factors (Select up to 2)	(107) Driver Distracted By	
<input type="radio"/> None (00) <input type="radio"/> Worn Tires (01) <input type="radio"/> Tire Failure (02) <input type="radio"/> Brakes (03) <input type="radio"/> Headlights (04) <input type="radio"/> Taillights (05) <input type="radio"/> Signals (06) <input type="radio"/> Steering (07)		<input type="radio"/> None (00) <input type="radio"/> Trees/Brush/Fence (01) <input type="radio"/> Embankment (02) <input type="radio"/> Building (03) <input type="radio"/> Moving Vehicle (04) <input type="radio"/> Parked/Stopped Vehicle (05)	<input type="radio"/> None (00) <input type="radio"/> Inattention (01) <input type="radio"/> Misjudgment (02) <input type="radio"/> Fatigue (03) <input type="radio"/> Alcohol (04) <input type="radio"/> Illegal Drugs (05)	<input type="radio"/> Not Distracted (00) <input type="radio"/> Cellular Phone (01) <input type="radio"/> Other Elect. Comm. Device (02) <input type="radio"/> Other Electronic Device (03) <input type="radio"/> Other Inside Vehicle (04) <input type="radio"/> Other Outside Vehicle (05) <input type="radio"/> Other Occupant (06)	
(108) Other Factors (Select up to 4)		(109) Roadway Comp.		(110) Roadway Surface	
<input type="radio"/> No Improper Action (00) <input type="radio"/> Drove too Fast for Conditions (01) <input type="radio"/> Exceed Posted Speed Limit (02) <input type="radio"/> Disregard Traffic Signals (03) <input type="radio"/> Disregard Red Light (04) <input type="radio"/> Disregard Other Trfc. Ctr. Dev. (05)		<input type="radio"/> Concrete (01) <input type="radio"/> Asphalt (02) <input type="radio"/> Gravel (03) <input type="radio"/> Dirt (04) <input type="radio"/> Other (05)		<input type="radio"/> Dry (01) <input type="radio"/> Wet (02) <input type="radio"/> Mud, Dirt, Gravel (03) <input type="radio"/> Debris (04) <input type="radio"/> Oil (05) <input type="radio"/> Snow (06)	
<input type="radio"/> Failure to Yield (06) <input type="radio"/> Wrong Side/Way (07) <input type="radio"/> Crossed Centerline (08) <input type="radio"/> Ran off Road (09) <input type="radio"/> Failure to Keep in Proper Lane (10) <input type="radio"/> Improper Turn (11) <input type="radio"/> Improper Passing (12)		<input type="radio"/> Illegally in Roadway (19) <input type="radio"/> Improper Crossing (20) <input type="radio"/> Pedestrian Viol. (21) <input type="radio"/> Inattention [Talking, Etc.] (22) <input type="radio"/> Bicycle Violation (23) <input type="radio"/> Clothing not Visible (24)		<input type="radio"/> Level (01) <input type="radio"/> Hillcrest (02) <input type="radio"/> Uphill (03)	
(111) Other Roadway Conditions		(112) Roadway Alignment (Horizontal)		(113) Roadway Alignment (Vertical)	
<input type="radio"/> None (00) <input type="radio"/> Ruts, Holes, Etc. (01) <input type="radio"/> No Shoulder (02)		<input type="radio"/> Straight (01) <input type="radio"/> Curve Left (02) <input type="radio"/> Curve Right (03)		<input type="radio"/> Downhill (04) <input type="radio"/> Sag (05)	
<input type="radio"/> Low Shoulder (03) <input type="radio"/> Soft Shoulder (04) <input type="radio"/> High Shoulder (05)		<input type="radio"/> Loose Material (06) <input type="radio"/> Worn, Polished (07) <input type="radio"/> Other (08)			
Officer's Rank and Name		Officer's ID Number		Date/Time	
PO2 TENGAN, RYAN S		15322		3/3/20 14:16	
Supervisor's Rank and Name		Supervisor's ID Number		Date/Time	
SGTD1 CORPUZ, DALE R		1637		3/3/20 14:16	



STATE OF HAWAII MOTOR VEHICLE ACCIDENT REPORT

Report Number: **20-007614**

(32) Unit No. (33) No. of Occ.		UNIT INFORMATION											
02	1	(34) Unit Class				(35) Race							
<input type="radio"/> Passenger Car (01) <input type="radio"/> Passenger Van (02) <input checked="" type="radio"/> Pickup Truck (03) <input type="radio"/> SUV/MPVH(04) <input type="radio"/> Cargo Van < 10,001 lbs. (05) <input type="radio"/> Other Truck < 10,001 lbs. (06) <input type="radio"/> Truck > 10,000 lbs. (07) <input type="radio"/> Transit Bus (08)		<input type="radio"/> School Bus (09) <input type="radio"/> Other Bus (10) <input type="radio"/> Motorcycle (11) <input type="radio"/> Motor Scooter (12) <input type="radio"/> Moped (13) <input type="radio"/> Bicycle (14) <input type="radio"/> Pedestrian (15) <input type="radio"/> Maint./Construct. Equipment (16)		<input type="radio"/> Farm Vehicle/Equipment (17) <input type="radio"/> Motor Coach (18) <input type="radio"/> Motor Home (19) <input type="radio"/> Recreational Vehicle (20) <input type="radio"/> Other (21) <input type="radio"/> Unknown (22)		<input type="radio"/> White (01) <input type="radio"/> Black (02) <input type="radio"/> American Indian (03) <input type="radio"/> Chinese (04) <input checked="" type="radio"/> Japanese (05) <input type="radio"/> Korean (06) <input type="radio"/> Puerto Rican (07)		<input type="radio"/> Hawaiian (08) <input type="radio"/> Samoan (09) <input type="radio"/> Tongan (10) <input type="radio"/> Vietnamese (11) <input type="radio"/> Filipino (12) <input type="radio"/> Unknown (13) <input type="radio"/> Other (14)					
(36) Last Name		(37) First Name		(38) MI	(39) Sex		(40) DOB						
SATO		KRISTEN			<input type="radio"/> M (01) <input checked="" type="radio"/> F (02)		06/16/1983						
(41) Street No.		(42) Street Name			(43) St., Pl., Blvd., Etc.		(44) Apt/Suite Number						
420		MAALO			ST								
(45) City		(46) State		(47) Zip Code		(48) Home Phone Number							
KAHULUI		HI		96732		(808) 269-7479							
(49) Occupation				(50) Employer/Company Name									
<input type="radio"/> Unemployed (00) <input type="radio"/> U.S. Army (01) <input type="radio"/> U.S. Navy (02) <input type="radio"/> U.S. Air Force (03) <input type="radio"/> U.S. Marines (04) <input type="radio"/> U.S. Coast Guard (05) <input type="radio"/> Other Military (06)				<input type="radio"/> Fed. Govt. Civ. (07) <input type="radio"/> State Govt. (08) <input type="radio"/> County Govt. (09) <input type="radio"/> Foreign Govt./Civ. (10) <input type="radio"/> Retired (11) <input type="radio"/> Student - Elem (12) <input type="radio"/> Student - Inter. (13)		<input type="radio"/> Student - H.S. (14) <input type="radio"/> Student - Col. (15) <input type="radio"/> U.S. Tourist (16) <input type="radio"/> Foreign Tourist (17) <input type="radio"/> Police Officer (18) <input type="radio"/> Other (19) <input type="radio"/> Not Stated (20)		MEO					
				(51) Work Phone Number		(52) Other Phone/Pager Number							
(53) Driver's License Number		(54) St./Juris	(55) Class	(56) Restrict.	(57) Endorse.								
H00139398		HI	3	NONE	NONE								
(58) CDL Type		(59) Driver's License Status											
<input checked="" type="radio"/> Non-CDL (01) <input type="radio"/> Non-CDL/Restricted (02) <input type="radio"/> CDL (03)		<input checked="" type="radio"/> Valid (01) <input type="radio"/> Not Licensed (02) <input type="radio"/> Canceled (03) <input type="radio"/> Denied (04)		<input type="radio"/> Expired (05) <input type="radio"/> Revoked (06) <input type="radio"/> Suspended (07) <input type="radio"/> Provisional (08)		<input type="radio"/> Permit (09) <input type="radio"/> Disqualified [CDL] (10)							
(60) Insurance Policy Number		(61) Exp. Date		(62) Insurance Carrier									
087269097		04/2020		ALLSTATE INS									
(63) Registered Owner Name				(64) Phone Number									
STAL, JOHN E				(808) 385-2514									
(65) Str. No.		(66) Street Name			(67) St. Pl.		(68) Ste.#						
554		HALALAI			ST								
(69) City				(70) State		(71) Zip Code							
KIHAI				HI		96753							
(72) Vehicle Body Type													
<input type="radio"/> 2-DSD (01) <input type="radio"/> 4-DSD (02) <input type="radio"/> 2-DCV (03)		<input type="radio"/> 2-DSW (04) <input type="radio"/> 4-DSW (05) <input checked="" type="radio"/> P/U Truck (06)		<input type="radio"/> SUV/MPVH (07) <input type="radio"/> Van (08) <input type="radio"/> Truck (09)		<input type="radio"/> Bus (10) <input type="radio"/> PCMC (11) <input type="radio"/> M-Scooter (12)		<input type="radio"/> Moped (13) <input type="radio"/> Bicycle (14) <input type="radio"/> Other (15)					
(73) Vehicle Year		(74) Veh. Color (Top/Bottom)		(75) Vehicle Make		(76) Vehicle Model		(77) Lic. Plate No.		(78) Trailer Plate		(79) Lic. Plate St.	
2007		WHI WHI		TOYOTA MOTOR		TACOMA		MRL382				HI	
(80) Vehicle VIN Number										(81) Emer. Veh. In Use		(82) Vehicle Stolen	
5 T E J U 6 2 N 9 7 Z 4 4 0 5 6 9										<input checked="" type="radio"/> No (01) <input type="radio"/> Yes (02)		<input checked="" type="radio"/> No (01) <input type="radio"/> Yes (02)	
(83) Special Use						(84) Trailer/Cargo Type							
<input checked="" type="radio"/> None (00) <input type="radio"/> Driver Trng. (01) <input type="radio"/> Construction/Maintenance (02) <input type="radio"/> Taxi (03)		<input type="radio"/> Fire Truck (04) <input type="radio"/> Tow Truck (05) <input type="radio"/> Ambulance (06) <input type="radio"/> Police-On Duty (07)		<input type="radio"/> Police-Off Duty (08) <input type="radio"/> Military (09) <input type="radio"/> Government (10) <input type="radio"/> Farm Use (11)		<input type="radio"/> U-Drive (12) <input type="radio"/> School Bus (13) <input type="radio"/> Other Bus (14) <input type="radio"/> Other (15)		<input checked="" type="radio"/> None (00) <input type="radio"/> Boat (01) <input type="radio"/> Flatbed (02) <input type="radio"/> Horse (03)		<input type="radio"/> Livestock (04) <input type="radio"/> House (05) <input type="radio"/> Van/Encl. Box (06) <input type="radio"/> Dump (07)		<input type="radio"/> Veh. Tow Veh. (08) <input type="radio"/> Other (09) <input type="radio"/> N/A (10)	

Officer's Initials: **RST**

Supervisor's Initials: **DRC**



(32) Unit No.		(33) No. of Occ.		UNIT INFORMATION														
03		1		(34) Unit Class				(35) Race										
<input checked="" type="radio"/> Passenger Car (01)		<input type="radio"/> School Bus (09)		<input type="radio"/> Farm Vehicle/Equipment (17)		<input type="radio"/> White (01)		<input type="radio"/> Hawaiian (08)										
<input type="radio"/> Passenger Van (02)		<input type="radio"/> Other Bus (10)		<input type="radio"/> Motor Coach (18)		<input type="radio"/> Black (02)		<input type="radio"/> Samoan (09)										
<input type="radio"/> Pickup Truck (03)		<input type="radio"/> Motorcycle (11)		<input type="radio"/> Motor Home (19)		<input type="radio"/> American Indian (03)		<input type="radio"/> Tongan (10)										
<input type="radio"/> SUV/MPVH(04)		<input type="radio"/> Motor Scooter (12)		<input type="radio"/> Recreational Vehicle (20)		<input type="radio"/> Chinese (04)		<input type="radio"/> Vietnamese (11)										
<input type="radio"/> Cargo Van < 10,001 lbs. (05)		<input type="radio"/> Moped (13)		<input type="radio"/> Other (21)		<input type="radio"/> Japanese (05)		<input checked="" type="radio"/> Filipino (12)										
<input type="radio"/> Other Truck < 10,001 lbs. (06)		<input type="radio"/> Bicycle (14)		<input type="radio"/> Unknown (22)		<input type="radio"/> Korean (06)		<input type="radio"/> Unknown (13)										
<input type="radio"/> Truck > 10,000 lbs. (07)		<input type="radio"/> Pedestrian (15)				<input type="radio"/> Puerto Rican (07)		<input type="radio"/> Other (14)										
<input type="radio"/> Transit Bus (08)		<input type="radio"/> Maint./Construct. Equipment (16)																
(36) Last Name			(37) First Name			(38) MI	(39) Sex		(40) DOB									
DELLA			TYRON				<input checked="" type="radio"/> M (01) <input type="radio"/> F (02)		09/26/1967									
(41) Street No.		(42) Street Name				(43) St. Pl. Blvd., Etc.		(44) Apt/Suite Number										
140		ANI				ST												
(45) City			(46) State		(47) Zip Code		(48) Home Phone Number											
KAHULUI			HI		96732		(808) 205-8347											
(49) Occupation				(50) Employer/Company Name														
<input type="radio"/> Unemployed (00) <input type="radio"/> Fed. Govt. Civ. (07) <input type="radio"/> Student - H.S. (14) <input type="radio"/> U.S. Army (01) <input type="radio"/> State Govt. (08) <input type="radio"/> Student - Col. (15) <input type="radio"/> U.S. Navy (02) <input checked="" type="radio"/> County Govt. (09) <input type="radio"/> U.S. Tourist (16) <input type="radio"/> U.S. Air Force (03) <input type="radio"/> Foreign Govt./Civ. (10) <input type="radio"/> Foreign Tourist (17) <input type="radio"/> U.S. Marines (04) <input type="radio"/> Retired (11) <input type="radio"/> Police Officer (18) <input type="radio"/> U.S. Coast Guard (05) <input type="radio"/> Student - Elem. (12) <input type="radio"/> Other (19) <input type="radio"/> Other Military (06) <input type="radio"/> Student - Inter. (13) <input type="radio"/> Not Stated (20)				LIQUOR COM.														
				(51) Work Phone Number			(52) Other Phone/Pager Number											
							(808) 633-1834											
(53) Driver's License Number		(54) St./Juris.	(55) Class	(56) Restrict.	(57) Endorse													
H00239818		HI	3	N	N													
(58) CDL Type				(59) Driver's License Status														
<input type="radio"/> Non-CDL (01) <input type="radio"/> Non-CDL/Restricted (02) <input type="radio"/> CDL (03)				<input type="radio"/> Valid (01) <input type="radio"/> Expired (05) <input type="radio"/> Permit (09) <input type="radio"/> Not Licensed (02) <input type="radio"/> Revoked (06) <input type="radio"/> Disqualified [CDL] (10) <input type="radio"/> Canceled (03) <input type="radio"/> Suspended (07) <input type="radio"/> Denied (04) <input type="radio"/> Provisional (08)														
(60) Insurance Policy Number			(61) Exp. Date	(62) Insurance Carrier														
076-100-456			04/30/20	ALLSTATE														
(63) Registered Owner Name				(64) Phone Number														
DELLA, TYRON				(808) 205-8347														
(65) Str. No.	(66) Street Name				(67) St. Pl.	(68) Ste. #												
140	ANI				ST													
(69) City			(70) State	(71) Zip Code														
KAHULUI			HI	96732														
(72) Vehicle Body Type																		
<input type="radio"/> 2-DSD (01)		<input type="radio"/> 2-DSW (04)		<input type="radio"/> SUV/MPVH (07)		<input type="radio"/> Bus (10)		<input type="radio"/> Moped (13)										
<input checked="" type="radio"/> 4-DSD (02)		<input type="radio"/> 4-DSW (05)		<input type="radio"/> Van (08)		<input type="radio"/> PCMC (11)		<input type="radio"/> Bicycle (14)										
<input type="radio"/> 2-DCV (03)		<input type="radio"/> P/U Truck (06)		<input type="radio"/> Truck (09)		<input type="radio"/> M-Scooter (12)		<input type="radio"/> Other (15)										
(73) Vehicle Year	(74) Veh. Color (Top/Bottom)	(75) Vehicle Make			(76) Vehicle Model	(77) Lic. Plate No.	(78) Trailer Plate	(79) Lic. Plate St.										
2001	BLK	HONDA			CIVIC (AND CRX)	PG1281	NONE	HI										
(90) Vehicle VIN Number						(81) Emer. Veh. In Use	(82) Vehicle Stolen											
J	H	M	C	G	5	6	4	5	1	C	0	2	9	5	8	7	<input checked="" type="radio"/> No (01) <input type="radio"/> Yes (02)	<input checked="" type="radio"/> No (01) <input type="radio"/> Yes (02)
(83) Special Use						(84) Trailer/Cargo Type												
<input type="radio"/> None (00) <input type="radio"/> Fire Truck (04) <input type="radio"/> Police-Off Duty (08) <input type="radio"/> U-Drive (12) <input type="radio"/> Driver Trng. (01) <input type="radio"/> Tow Truck (05) <input type="radio"/> Military (09) <input type="radio"/> School Bus (13) <input type="radio"/> Construction/Maintenance (02) <input type="radio"/> Ambulance (06) <input type="radio"/> Government (10) <input type="radio"/> Other Bus (14) <input type="radio"/> Taxi (03) <input type="radio"/> Police-On Duty (07) <input type="radio"/> Farm Use (11) <input type="radio"/> Other (15)						<input type="radio"/> None (00) <input type="radio"/> Livestock (04) <input type="radio"/> Veh. Tow Veh. (08) <input type="radio"/> Boat (01) <input type="radio"/> House (05) <input type="radio"/> Other (09) <input type="radio"/> Flatbed (02) <input type="radio"/> Van/Encl. Box (06) <input type="radio"/> N/A (10) <input type="radio"/> Horse (03) <input type="radio"/> Dump (07)												

Officer's Initials: RST

Supervisor's Initials: DRC



STATE OF HAWAII MOTOR VEHICLE ACCIDENT REPORT

Report Number: **20-007614**

UNIT INFORMATION (Cont.)																																	
Unit No 03																																	
(89) Citations		(90) Est. Damages		(91) Extent of Damage																													
Citation Number	Offense Code (H.R.S./R.O. Section No.)	<input type="radio"/> \$3,000 or Greater (01) <input checked="" type="radio"/> Less than \$3,000 (02)		<input type="radio"/> None (00) <input checked="" type="radio"/> Functional (02) <input type="radio"/> Minor (01) <input type="radio"/> Disabling (03)																													
				(92) Is this a CMV or Other QUALIFYING Vehicle? <input checked="" type="radio"/> No (01) <input type="radio"/> Yes (02) If yes, go to CMV SUPPLEMENT																													
		(95A) Object (1) Struck/Damage Description		(95A) Object (2) Struck/Damage Description																													
		(95B) (Object 1) Owner's Name		(95B) (Object 2) Owner's Name																													
		(95C) (Object 1) Owner's Phone Number		(95C) (Object 2) Owner's Phone Number																													
		(95D) Estimated Damages to Object 1		(95D) Estimated Damages to Object 2																													
		<input type="radio"/> \$3,000 or Greater (01) <input checked="" type="radio"/> Less than \$3,000 (02)		<input type="radio"/> \$3,000 or Greater (01) <input checked="" type="radio"/> Less than \$3,000 (02)																													
(93) Using the Diagram to the Right, Indicate Initial Impact Point in block below:																																	
		(94) Direction																															
<div style="border: 1px solid black; padding: 2px; display: inline-block;">5</div> Circle Damaged Areas		From		To																													
		3		7																													
(97) Motor Vehicle Maneuver/Action		(98) Reason for Maneuver		(99) Traffic Control Device Type																													
<input type="radio"/> Straight Ahead (01) <input type="radio"/> Parking (07) <input type="radio"/> Turning Left (14) <input type="radio"/> Changing Lanes (02) <input type="radio"/> Parked (08) <input type="radio"/> U-Turn (15) <input type="radio"/> Merging (03) <input type="radio"/> Start from Parked (09) <input type="radio"/> Entering Traffic (16) <input type="radio"/> Overtaking/ Passing (04) <input checked="" type="radio"/> Stopped in Traffic (10) <input type="radio"/> Negotiating a Curve (17) <input type="radio"/> Slowing/Stopping (05) <input type="radio"/> Start in Traffic (11) <input type="radio"/> Other (18) <input type="radio"/> Backing (06) <input type="radio"/> Right Turn on Red (12) <input type="radio"/> Turning Right (13)		<input checked="" type="radio"/> Intended Maneuver (01) <input type="radio"/> Avoid Pedestrian (05) <input type="radio"/> Traffic Controls (02) <input type="radio"/> Avoid Bicycle (06) <input type="radio"/> Mechanical Failure (03) <input type="radio"/> Avoid Obj./ Animal (07) <input type="radio"/> Avoid Other Vehicle (04) <input type="radio"/> Avoid Prior MVA (08) <input type="radio"/> Other (09)		<input type="radio"/> No Controls (00) <input type="radio"/> School Zone Sign/ Device (07) <input checked="" type="radio"/> Traffic Signal (01) <input type="radio"/> Stop Sign (02) <input type="radio"/> Warning Sign (08) <input type="radio"/> Yield Sign (03) <input type="radio"/> Railway X-ing Device (09) <input type="radio"/> Flashing Red (04) <input type="radio"/> Flashing Amber (05) <input type="radio"/> Other (10) <input type="radio"/> Person (06)																													
(100) Traffic Control Condition		(101) Guidance/Pavement Markings		(102) Delineator Present																													
<input checked="" type="radio"/> Functioning Properly (01) <input type="radio"/> Green Malfunction (06) <input type="radio"/> Knocked Down (02) <input type="radio"/> Arrow Malfunction (07) <input type="radio"/> Obscured (03) <input type="radio"/> Lights Not Changing (08) <input type="radio"/> Red Malfunction (04) <input type="radio"/> Other Malfunction (09) <input type="radio"/> Yellow Malfunction (05)		<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">Lft</td> <td style="width: 50%; text-align: center;">Rgt</td> <td style="width: 50%; text-align: center;">Lft</td> <td style="width: 50%; text-align: center;">Rgt</td> </tr> <tr> <td style="text-align: center;">None (00) <input type="radio"/></td> <td style="text-align: center;">None (00) <input type="radio"/></td> <td style="text-align: center;">No Passing, Yellow (06) <input type="radio"/></td> <td style="text-align: center;">No Passing, Yellow (06) <input type="radio"/></td> </tr> <tr> <td style="text-align: center;">Solid Yellow (01) <input type="radio"/></td> <td style="text-align: center;">Solid Yellow (01) <input type="radio"/></td> <td style="text-align: center;">Curb/Median, Etc. (07) <input type="radio"/></td> <td style="text-align: center;">Curb/Median, Etc. (07) <input type="radio"/></td> </tr> <tr> <td style="text-align: center;">Skip-Dash Yellow (02) <input type="radio"/></td> <td style="text-align: center;">Skip-Dash Yellow (02) <input type="radio"/></td> <td style="text-align: center;">Bikeway Marking (08) <input type="radio"/></td> <td style="text-align: center;">Bikeway Marking (08) <input type="radio"/></td> </tr> <tr> <td style="text-align: center;">Solid White (03) <input type="radio"/></td> <td style="text-align: center;">Solid White (03) <input type="radio"/></td> <td style="text-align: center;">Crosswalk Marking (09) <input type="radio"/></td> <td style="text-align: center;">Crosswalk Marking (09) <input type="radio"/></td> </tr> <tr> <td style="text-align: center;">Skip-Dash White (04) <input type="radio"/></td> <td style="text-align: center;">Skip-Dash White (04) <input type="radio"/></td> <td style="text-align: center;">Turn Lane (10) <input type="radio"/></td> <td style="text-align: center;">Turn Lane (10) <input type="radio"/></td> </tr> <tr> <td style="text-align: center;">Solid Double Yellow (05) <input type="radio"/></td> <td style="text-align: center;">Solid Double Yellow (05) <input type="radio"/></td> <td></td> <td></td> </tr> </table>		Lft	Rgt	Lft	Rgt	None (00) <input type="radio"/>	None (00) <input type="radio"/>	No Passing, Yellow (06) <input type="radio"/>	No Passing, Yellow (06) <input type="radio"/>	Solid Yellow (01) <input type="radio"/>	Solid Yellow (01) <input type="radio"/>	Curb/Median, Etc. (07) <input type="radio"/>	Curb/Median, Etc. (07) <input type="radio"/>	Skip-Dash Yellow (02) <input type="radio"/>	Skip-Dash Yellow (02) <input type="radio"/>	Bikeway Marking (08) <input type="radio"/>	Bikeway Marking (08) <input type="radio"/>	Solid White (03) <input type="radio"/>	Solid White (03) <input type="radio"/>	Crosswalk Marking (09) <input type="radio"/>	Crosswalk Marking (09) <input type="radio"/>	Skip-Dash White (04) <input type="radio"/>	Skip-Dash White (04) <input type="radio"/>	Turn Lane (10) <input type="radio"/>	Turn Lane (10) <input type="radio"/>	Solid Double Yellow (05) <input type="radio"/>	Solid Double Yellow (05) <input type="radio"/>			<input checked="" type="radio"/> None (00) <input type="radio"/> None (00) <input type="radio"/> Right (01) <input type="radio"/> Bike Route [Signed] (01) <input type="radio"/> Left (02) <input type="radio"/> Bike Lane Stripe (02) <input type="radio"/> Both Sides (03) <input checked="" type="radio"/> Separate Path/ Lane (03)	
Lft	Rgt	Lft	Rgt																														
None (00) <input type="radio"/>	None (00) <input type="radio"/>	No Passing, Yellow (06) <input type="radio"/>	No Passing, Yellow (06) <input type="radio"/>																														
Solid Yellow (01) <input type="radio"/>	Solid Yellow (01) <input type="radio"/>	Curb/Median, Etc. (07) <input type="radio"/>	Curb/Median, Etc. (07) <input type="radio"/>																														
Skip-Dash Yellow (02) <input type="radio"/>	Skip-Dash Yellow (02) <input type="radio"/>	Bikeway Marking (08) <input type="radio"/>	Bikeway Marking (08) <input type="radio"/>																														
Solid White (03) <input type="radio"/>	Solid White (03) <input type="radio"/>	Crosswalk Marking (09) <input type="radio"/>	Crosswalk Marking (09) <input type="radio"/>																														
Skip-Dash White (04) <input type="radio"/>	Skip-Dash White (04) <input type="radio"/>	Turn Lane (10) <input type="radio"/>	Turn Lane (10) <input type="radio"/>																														
Solid Double Yellow (05) <input type="radio"/>	Solid Double Yellow (05) <input type="radio"/>																																
(104) Vehicle Factors (Select Up to 2)		(105) Vision Obstruction (Select up to 2)		(106) Human Factors (Select up to 2)																													
<input checked="" type="radio"/> None (00) <input type="radio"/> Suspension (08) <input type="radio"/> Worn Tires (01) <input type="radio"/> Wheels (09) <input type="radio"/> Tire Failure (02) <input type="radio"/> Power Train (10) <input type="radio"/> Brakes (03) <input type="radio"/> Window/Windshield (11) <input type="radio"/> Headlights (04) <input type="radio"/> Mirrors (12) <input type="radio"/> Taillights (05) <input type="radio"/> Wipers (13) <input type="radio"/> Signals (06) <input type="radio"/> Trailer Coupling (14) <input type="radio"/> Steering (07) <input type="radio"/> Other (15)		<input checked="" type="radio"/> None (00) <input type="radio"/> Glare (06) <input type="radio"/> Trees/Brush/Fence (01) <input type="radio"/> Weather Condition (07) <input type="radio"/> Embankment (02) <input type="radio"/> Pedestrian (08) <input type="radio"/> Building (03) <input type="radio"/> Animal(s) in Road (09) <input type="radio"/> Moving Vehicle (04) <input type="radio"/> Other (10) <input type="radio"/> Parked/Stopped Vehicle (05)		<input checked="" type="radio"/> None (00) <input type="radio"/> Illness (06) <input type="radio"/> Inattention (01) <input type="radio"/> Legal Meds. (07) <input type="radio"/> Misjudgment (02) <input type="radio"/> Emotional (08) <input type="radio"/> Fatigue (03) <input type="radio"/> Phys. Impaired (09) <input type="radio"/> Alcohol (04) <input type="radio"/> Other (10) <input type="radio"/> Illegal Drugs (05)																													
(107) Driver Distracted By		(108) Other Factors (Select up to 4)		(109) Roadway Comp																													
<input checked="" type="radio"/> Not Distracted (00) <input type="radio"/> Cellular Phone (01) <input type="radio"/> Other Elect. Comm. Device (02) <input type="radio"/> Other Electronic Device (03) <input type="radio"/> Other Inside Vehicle (04) <input type="radio"/> Other Outside Vehicle (05) <input type="radio"/> Other Occupant (06)		<input checked="" type="radio"/> No Improper Action (00) <input type="radio"/> Failure to Yield (06) <input type="radio"/> Improper Backing (13) <input type="radio"/> Other Improper Action (18) <input type="radio"/> Drove too Fast for Conditions (01) <input type="radio"/> Wrong Side/Way (07) <input type="radio"/> Followed too Closely (14) <input type="radio"/> Illegally in Roadway (19) <input type="radio"/> Exceed Posted Speed Limit (02) <input type="radio"/> Crossed Centerline (08) <input type="radio"/> Aggressive, Reckless Driving (15) <input type="radio"/> Improper Crossing (20) <input type="radio"/> Disregard Traffic Signals (03) <input type="radio"/> Ran off Road (09) <input type="radio"/> Swerved to Avoid Obstacle (16) <input type="radio"/> Pedestrian Viol. (21) <input type="radio"/> Disregard Red Light (04) <input type="radio"/> Failure to Keep in Proper Lane (10) <input type="radio"/> Inattention [Talking, Etc.] (22) <input type="radio"/> Disregard Other Trfc. Ctr. Dev. (05) <input type="radio"/> Improper Turn (11) <input type="radio"/> Over Correcting or Over Steering (17) <input type="radio"/> Bicycle Violation (23) <input type="radio"/> <input type="radio"/> Improper Passing (12) <input type="radio"/> Clothing not Visible (24)		<input type="radio"/> Concrete (01) <input checked="" type="radio"/> Dry (01) <input type="radio"/> Slush (07) <input type="radio"/> Asphalt (02) <input type="radio"/> Wet (02) <input type="radio"/> Ice/Frost (08) <input type="radio"/> Gravel (03) <input type="radio"/> Mud, Dirt, Gravel (03) <input type="radio"/> Water (09) <input type="radio"/> Dirt (04) <input type="radio"/> Debris (04) <input type="radio"/> Sand (10) <input type="radio"/> Other (05) <input type="radio"/> Oil (05) <input type="radio"/> Snow (06)																													
(111) Other Roadway Conditions		(112) Roadway Alignment (Horizontal)		(113) Roadway Alignment (Vertical)																													
<input checked="" type="radio"/> None (00) <input type="radio"/> Low Shoulder (03) <input type="radio"/> Loose Material (06) <input type="radio"/> Ruts, Holes, Etc. (01) <input type="radio"/> Soft Shoulder (04) <input type="radio"/> Worn, Polished (07) <input type="radio"/> No Shoulder (02) <input type="radio"/> High Shoulder (05) <input type="radio"/> Other (08)		<input checked="" type="radio"/> Straight (01) <input type="radio"/> Curve Left (02) <input type="radio"/> Curve Right (03)		<input checked="" type="radio"/> Level (01) <input type="radio"/> Downhill (04) <input type="radio"/> Hillcrest (02) <input type="radio"/> Sag (05) <input type="radio"/> Uphill (03)																													
Officer's Rank and Name		Officer's ID Number		Date/Time																													
PO2 TENGAN, RYAN S		15322		3/3/20 14:16																													
Supervisor's Rank and Name		Supervisor's ID Number		Date/Time																													
SGTD1 CORPUZ, DALE R		1637		3/3/20 14:16																													



STATE OF HAWAII MOTOR VEHICLE ACCIDENT REPORT

Report Number: **20-007614**

(32) Unit No. 04		(33) No. of Occ. 2		UNIT INFORMATION															
(34) Unit Class						(35) Race													
<input type="radio"/> Passenger Car (01)		<input type="radio"/> School Bus (09)		<input type="radio"/> Farm Vehicle/Equipment (17)		<input type="radio"/> White (01)		<input type="radio"/> Hawaiian (08)											
<input type="radio"/> Passenger Van (02)		<input type="radio"/> Other Bus (10)		<input type="radio"/> Motor Coach (18)		<input type="radio"/> Black (02)		<input type="radio"/> Samoan (09)											
<input type="radio"/> Pickup Truck (03)		<input type="radio"/> Motorcycle (11)		<input type="radio"/> Motor Home (19)		<input type="radio"/> American Indian (03)		<input type="radio"/> Tongan (10)											
<input checked="" type="radio"/> SUV/MPVH(04)		<input type="radio"/> Motor Scooter (12)		<input type="radio"/> Recreational Vehicle (20)		<input type="radio"/> Chinese (04)		<input type="radio"/> Vietnamese (11)											
<input type="radio"/> Cargo Van < 10,001 lbs. (05)		<input type="radio"/> Moped (13)		<input type="radio"/> Other (21)		<input type="radio"/> Japanese (05)		<input type="radio"/> Filipino (12)											
<input type="radio"/> Other Truck < 10,001 lbs. (06)		<input type="radio"/> Bicycle (14)		<input type="radio"/> Unknown (22)		<input type="radio"/> Korean (06)		<input checked="" type="radio"/> Unknown (13)											
<input type="radio"/> Truck > 10,000 lbs. (07)		<input type="radio"/> Pedestrian (15)				<input type="radio"/> Puerto Rican (07)		<input type="radio"/> Other (14)											
<input type="radio"/> Transit Bus (08)		<input type="radio"/> Maint./Construct. Equipment (16)																	
(36) Last Name AGAPAY			(37) First Name WILLINA ANTHOLYNN			(38) MI KAKAU	(39) Sex <input type="radio"/> M (01) <input checked="" type="radio"/> F (02)		(40) DOB 10/04/1984										
(41) Street No. 282		(42) Street Name SOUTH MAKAPU STREET						(43) St. Pl. Blvd. Etc.		(44) Apt./Suite Number									
(45) City KAHULUI			(46) State HI			(47) Zip Code 96732		(48) Home Phone Number (808) 463-5844											
(49) Occupation						(50) Employer/Company Name													
<input checked="" type="radio"/> Unemployed (00) <input type="radio"/> Fed. Govt. Civ. (07) <input type="radio"/> Student - H.S. (14) <input type="radio"/> U.S. Army (01) <input type="radio"/> State Govt. (08) <input type="radio"/> Student - Col. (15) <input type="radio"/> U.S. Navy (02) <input type="radio"/> County Govt. (09) <input type="radio"/> U.S. Tourist (16) <input type="radio"/> U.S. Air Force (03) <input type="radio"/> Foreign Govt./Civ. (10) <input type="radio"/> Foreign Tourist (17) <input type="radio"/> U.S. Marines (04) <input type="radio"/> Retired (11) <input type="radio"/> Police Officer (18) <input type="radio"/> U.S. Coast Guard (05) <input type="radio"/> Student - Elem. (12) <input type="radio"/> Other (19) <input type="radio"/> Other Military (06) <input type="radio"/> Student - Inter. (13) <input type="radio"/> Not Stated (20)						UNEMPLOYED													
(51) Work Phone Number (000) 000-0000					(52) Other Phone/Pager Number														
(53) Driver's License Number H00394807			(54) St./Juris. HI	(55) Class 3	(56) Restrict. NONE		(57) Endorse NONE												
(58) CDL Type			(59) Driver's License Status																
<input checked="" type="radio"/> Non-CDL (01) <input type="radio"/> Non-CDL/Restricted (02) <input type="radio"/> CDL (03)			<input type="radio"/> Valid (01) <input type="radio"/> Not Licensed (02) <input type="radio"/> Canceled (03) <input type="radio"/> Denied (04)		<input type="radio"/> Expired (05) <input type="radio"/> Revoked (06) <input type="radio"/> Suspended (07) <input type="radio"/> Provisional (08)		<input type="radio"/> Permit (09) <input type="radio"/> Disqualified (CDL) (10)												
(60) Insurance Policy Number 4582-37-88-59			(61) Exp. Date 02/27/2020		(62) Insurance Carrier GEICO														
(63) Registered Owner Name AGAPAY, WILLINA ANTHOLYNN KAKAU						(64) Phone Number (808) 463-5844													
(65) Str. No. 282		(66) Street Name SOUTH MAKAPU STREET						(67) St. Pl.	(68) Ste.#										
(69) City KAHULUI			(70) State HI			(71) Zip Code 96732													
(72) Vehicle Body Type																			
<input type="radio"/> 2-DSD (01)		<input type="radio"/> 2-DSW (04)		<input checked="" type="radio"/> SUV/MPVH (07)		<input type="radio"/> Bus (10)		<input type="radio"/> Moped (13)											
<input type="radio"/> 4-DSD (02)		<input type="radio"/> 4-DSW (05)		<input type="radio"/> Van (08)		<input type="radio"/> PCMC (11)		<input type="radio"/> Bicycle (14)											
<input type="radio"/> 2-DCV (03)		<input type="radio"/> P/U Truck (06)		<input type="radio"/> Truck (09)		<input type="radio"/> M-Scooter (12)		<input type="radio"/> Other (15)											
(73) Vehicle Year 2016		(74) Veh. Color (Top/Bottom) WHI		(75) Vehicle Make DODGE		(76) Vehicle Model LGE231		(77) Lic. Plate No. HI	(78) Trailer Plate	(79) Lic. Plate St.									
(80) Vehicle VIN Number																			
3	C	4	P	D	C	A	B	6	G	T	1	0	S	0	5	7	(81) Emer. Veh. In Use <input checked="" type="radio"/> No (01) <input type="radio"/> Yes (02)		(82) Vehicle Stolen <input checked="" type="radio"/> No (01) <input type="radio"/> Yes (02)
(83) Special Use						(84) Trailer/Cargo Type													
<input checked="" type="radio"/> None (00)		<input type="radio"/> Fire Truck (04)		<input type="radio"/> Police-Off Duty (08)		<input type="radio"/> U-Drive (12)		<input checked="" type="radio"/> None (00)		<input type="radio"/> Livestock (04)		<input type="radio"/> Veh. Tow Veh. (08)							
<input type="radio"/> Driver Trng. (01)		<input type="radio"/> Tow Truck (05)		<input type="radio"/> Military (09)		<input type="radio"/> School Bus (13)		<input type="radio"/> Boat (01)		<input type="radio"/> House (05)		<input type="radio"/> Other (09)							
<input type="radio"/> Construction/Maintenance (02)		<input type="radio"/> Ambulance (06)		<input type="radio"/> Government (10)		<input type="radio"/> Other Bus (14)		<input type="radio"/> Flatbed (02)		<input type="radio"/> Van/Encl. Box (06)		<input type="radio"/> N/A (10)							
<input type="radio"/> Taxi (03)		<input type="radio"/> Police-On Duty (07)		<input type="radio"/> Farm Use (11)		<input type="radio"/> Other (15)		<input type="radio"/> Horse (03)		<input type="radio"/> Dump (07)									

Officer's Initials: **RST**

Supervisor's Initials: **DRC**



STATE OF HAWAII MOTOR VEHICLE ACCIDENT REPORT

Report Number: 20-007614

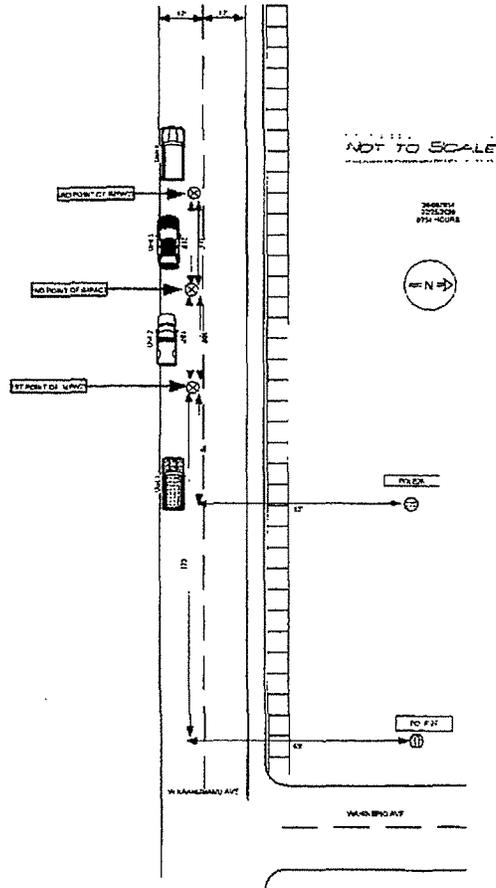
Unit No. 04		UNIT INFORMATION (Cont.)																																															
(89) Citations		(90) Est. Damages		(91) Extent of Damage		(92) Is this a CMV or Other QUALIFYING Vehicle? If yes, go to CMV SUPPLEMENT																																											
Citation Number	Offense Code (H.R.S./R.O. Section No.)	<input type="radio"/> \$3,000 or Greater (01) <input checked="" type="radio"/> Less than \$3,000 (02)		<input type="radio"/> None (00) <input type="radio"/> Functional (02) <input checked="" type="radio"/> Minor (01) <input type="radio"/> Disabling (03)		<input checked="" type="radio"/> No (01) <input type="radio"/> Yes (02)																																											
		(95A) Object (1) Struck/Damage Description			(95B) Object (2) Struck/Damage Description																																												
		(95B) (Object 1) Owner's Name			(95B) (Object 2) Owner's Name																																												
		(95C) (Object 1) Owner's Phone Number			(95C) (Object 2) Owner's Phone Number																																												
		(95D) Estimated Damages to Object 1			(95D) Estimated Damages to Object 2																																												
		<input type="radio"/> \$3,000 or Greater (01) <input type="radio"/> Less than \$3,000 (02)		<input type="radio"/> \$3,000 or Greater (01) <input type="radio"/> Less than \$3,000 (02)																																													
(93) Using the Diagram to the Right, Indicate Initial Impact Point in block below:		(94) Direction From To																																															
		3 7																																															
<input checked="" type="checkbox"/> 5 Circle Damaged Areas																																																	
(97) Motor Vehicle Maneuver/Action			(98) Reason for Maneuver		(99) Traffic Control Device Type																																												
<input type="radio"/> Straight Ahead (01) <input type="radio"/> Parking (07) <input type="radio"/> Turning Left (14) <input type="radio"/> Changing Lanes (02) <input type="radio"/> Parked (08) <input type="radio"/> U-Turn (15) <input type="radio"/> Merging (03) <input type="radio"/> Start from Parked (09) <input type="radio"/> Entering Traffic (16) <input type="radio"/> Overtaking/ Passing (04) <input checked="" type="radio"/> Stopped in Traffic (10) <input type="radio"/> Negotiating a Curve (17) <input type="radio"/> Slowing/Stopping (05) <input type="radio"/> Start in Traffic (11) <input type="radio"/> Other (18) <input type="radio"/> Backing (06) <input type="radio"/> Right Turn on Red (12) <input type="radio"/> Turning Right (13)			<input checked="" type="radio"/> Intended Maneuver (01) <input type="radio"/> Avoid Pedestrian (05) <input type="radio"/> Traffic Controls (02) <input type="radio"/> Avoid Bicycle (06) <input type="radio"/> Mechanical Failure (03) <input type="radio"/> Avoid Obj./ Animal (07) <input type="radio"/> Avoid Other Vehicle (04) <input type="radio"/> Avoid Prior MVA (08) <input type="radio"/> Other (09)		<input type="radio"/> No Controls (00) <input type="radio"/> School Zone Sign/ Device (07) <input checked="" type="radio"/> Traffic Signal (01) <input type="radio"/> Stop Sign (02) <input type="radio"/> Warning Sign (08) <input type="radio"/> Yield Sign (03) <input type="radio"/> Railway X-ing Device (09) <input type="radio"/> Flashing Red (04) <input type="radio"/> Flashing Amber (05) <input type="radio"/> Other (10) <input type="radio"/> Person (06)																																												
(100) Traffic Control Condition			(101) Guidance/Pavement Markings			(102) Delinicator Present	(103) Bikeway																																										
<input checked="" type="radio"/> Functioning Properly (01) <input type="radio"/> Green Malfunction (06) <input type="radio"/> Knocked Down (02) <input type="radio"/> Arrow Malfunction (07) <input type="radio"/> Obscured (03) <input type="radio"/> Lights Not Changing (08) <input type="radio"/> Red Malfunction (04) <input type="radio"/> Other Malfunction (09) <input type="radio"/> Yellow Malfunction (05)			<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Lft</th> <th>Rgt</th> <th></th> <th>Lft</th> <th>Rgt</th> </tr> </thead> <tbody> <tr> <td>None (00)</td> <td><input type="radio"/></td> <td><input type="radio"/></td> <td>No Passing, Yellow (06)</td> <td><input type="radio"/></td> <td><input type="radio"/></td> </tr> <tr> <td>Solid Yellow (01)</td> <td><input type="radio"/></td> <td><input type="radio"/></td> <td>Curbs/Median, Etc. (07)</td> <td><input type="radio"/></td> <td><input type="radio"/></td> </tr> <tr> <td>Skip-Dash Yellow (02)</td> <td><input type="radio"/></td> <td><input type="radio"/></td> <td>Bikeway Marking (08)</td> <td><input type="radio"/></td> <td><input type="radio"/></td> </tr> <tr> <td>Solid White (03)</td> <td><input type="radio"/></td> <td><input type="radio"/></td> <td>Crosswalk Marking (09)</td> <td><input type="radio"/></td> <td><input type="radio"/></td> </tr> <tr> <td>Skip-Dash White (04)</td> <td><input type="radio"/></td> <td><input type="radio"/></td> <td>Turn Lane (10)</td> <td><input type="radio"/></td> <td><input type="radio"/></td> </tr> <tr> <td>Solid Double Yellow (05)</td> <td><input type="radio"/></td> <td><input type="radio"/></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Lft	Rgt		Lft	Rgt	None (00)	<input type="radio"/>	<input type="radio"/>	No Passing, Yellow (06)	<input type="radio"/>	<input type="radio"/>	Solid Yellow (01)	<input type="radio"/>	<input type="radio"/>	Curbs/Median, Etc. (07)	<input type="radio"/>	<input type="radio"/>	Skip-Dash Yellow (02)	<input type="radio"/>	<input type="radio"/>	Bikeway Marking (08)	<input type="radio"/>	<input type="radio"/>	Solid White (03)	<input type="radio"/>	<input type="radio"/>	Crosswalk Marking (09)	<input type="radio"/>	<input type="radio"/>	Skip-Dash White (04)	<input type="radio"/>	<input type="radio"/>	Turn Lane (10)	<input type="radio"/>	<input type="radio"/>	Solid Double Yellow (05)	<input type="radio"/>	<input type="radio"/>				<input checked="" type="radio"/> None (00) <input type="radio"/> Right (01) <input type="radio"/> Left (02) <input type="radio"/> Both Sides (03)	<input type="radio"/> None (00) <input checked="" type="radio"/> Bike Route [Signed] (01) <input type="radio"/> Bike Lane Stripe (02) <input type="radio"/> Separate Path/ Lane (03)
	Lft	Rgt		Lft	Rgt																																												
None (00)	<input type="radio"/>	<input type="radio"/>	No Passing, Yellow (06)	<input type="radio"/>	<input type="radio"/>																																												
Solid Yellow (01)	<input type="radio"/>	<input type="radio"/>	Curbs/Median, Etc. (07)	<input type="radio"/>	<input type="radio"/>																																												
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Skip-Dash White (04)	<input type="radio"/>	<input type="radio"/>	Turn Lane (10)	<input type="radio"/>	<input type="radio"/>																																												
Solid Double Yellow (05)	<input type="radio"/>	<input type="radio"/>																																															
(104) Vehicle Factors (Select up to 2)		(105) Vision Obstruction (Select up to 2)		(106) Human Factors (Select up to 2)		(107) Driver Distracted By																																											
<input checked="" type="radio"/> None (00) <input type="radio"/> Suspension (08) <input type="radio"/> Worn Tires (01) <input type="radio"/> Wheels (09) <input type="radio"/> Tire Failure (02) <input type="radio"/> Power Train (10) <input type="radio"/> Brakes (03) <input type="radio"/> Window/Windshield (11) <input type="radio"/> Headlights (04) <input type="radio"/> Mirrors (12) <input type="radio"/> Taillights (05) <input type="radio"/> Wipers (13) <input type="radio"/> Signals (06) <input type="radio"/> Trailer Coupling (14) <input type="radio"/> Steering (07) <input type="radio"/> Other (15)		<input checked="" type="radio"/> None (00) <input type="radio"/> Glare (06) <input type="radio"/> Trees/Brush/Fence (01) <input type="radio"/> Weather Condition (07) <input type="radio"/> Embankment (02) <input type="radio"/> Pedestrian (08) <input type="radio"/> Building (03) <input type="radio"/> Animal(s) in Road (09) <input type="radio"/> Moving Vehicle (04) <input type="radio"/> Other (10) <input type="radio"/> Parked/Stopped Vehicle (05)		<input checked="" type="radio"/> None (00) <input type="radio"/> Illness (06) <input type="radio"/> Inattention (01) <input type="radio"/> Legal Meds. (07) <input type="radio"/> Misjudgment (02) <input type="radio"/> Emotional (08) <input type="radio"/> Fatigue (03) <input type="radio"/> Phys. Impaired (09) <input type="radio"/> Alcohol (04) <input type="radio"/> Other (10) <input type="radio"/> Illegal Drugs (05)		<input checked="" type="radio"/> Not Distracted (00) <input type="radio"/> Cellular Phone (01) <input type="radio"/> Other Elect. Comm. Device (02) <input type="radio"/> Other Electronic Device (03) <input type="radio"/> Other Inside Vehicle (04) <input type="radio"/> Other Outside Vehicle (05) <input type="radio"/> Other Occupant (06)																																											
(108) Other Factors (Select up to 4)				(109) Roadway Comp.		(110) Roadway Surface																																											
<input checked="" type="radio"/> No Improper Action (00) <input type="radio"/> Failure to Yield (06) <input type="radio"/> Improper Backing (13) <input type="radio"/> Other Improper Action (18) <input type="radio"/> Drove too Fast for Conditions (01) <input type="radio"/> Wrong Side/Way (07) <input type="radio"/> Followed too Closely (14) <input type="radio"/> Illegally in Roadway (19) <input type="radio"/> Exceed Posted Speed Limit (02) <input type="radio"/> Crossed Centerline (08) <input type="radio"/> Aggressive, Reckless Driving (15) <input type="radio"/> Improper Crossing (20) <input type="radio"/> Disregard Traffic Signals (03) <input type="radio"/> Ran off Road (09) <input type="radio"/> Swerved to Avoid Obstacle (16) <input type="radio"/> Pedestrian Viol. (21) <input type="radio"/> Disregard Red Light (04) <input type="radio"/> Failure to Keep in Proper Lane (10) <input type="radio"/> Inattention [Talking, Etc.] (22) <input type="radio"/> Disregard Other Trfc. Ctr. Dev. (05) <input type="radio"/> Improper Turn (11) <input type="radio"/> Over Correcting or Over Steering (17) <input type="radio"/> Bicycle Violation (23) <input type="radio"/> <input type="radio"/> Improper Passing (12) <input type="radio"/> Clothing not Visible (24)				<input type="radio"/> Concrete (01) <input checked="" type="radio"/> Asphalt (02) <input type="radio"/> Gravel (03) <input type="radio"/> Dirt (04) <input type="radio"/> Other (05)		<input checked="" type="radio"/> Dry (01) <input type="radio"/> Slush (07) <input type="radio"/> Wet (02) <input type="radio"/> Ice/Frost (08) <input type="radio"/> Mud, Dirt, Gravel (03) <input type="radio"/> Debris (04) <input type="radio"/> Oil (05) <input type="radio"/> Snow (06)																																											
(111) Other Roadway Conditions			(112) Roadway Alignment (Horizontal)		(113) Roadway Alignment (Vertical)																																												
<input checked="" type="radio"/> None (00) <input type="radio"/> Low Shoulder (03) <input type="radio"/> Loose Material (06) <input type="radio"/> Ruts, Holes, Etc. (01) <input type="radio"/> Soft Shoulder (04) <input type="radio"/> Worn, Polished (07) <input type="radio"/> No Shoulder (02) <input type="radio"/> High Shoulder (05) <input type="radio"/> Other (08)			<input checked="" type="radio"/> Straight (01) <input type="radio"/> Curve Left (02) <input type="radio"/> Curve Right (03)		<input checked="" type="radio"/> Level (01) <input type="radio"/> Downhill (04) <input type="radio"/> Hillcrest (02) <input type="radio"/> Sag (05) <input type="radio"/> Uphill (03)																																												
Officer's Rank and Name		Officer's ID Number	Date/Time	Supervisor's Rank and Name		Supervisor's ID Number	Date/Time																																										
PO2 TENGAN, RYAN S		15322	3/3/20 14:16	SGTD1 CORPUZ, DALE R		1637	3/3/20 14:16																																										



DIAGRAM

(114) Tire Skid Marks (Feet)					(115) REFERENCE POINT				
Wheel	Unit	Unit	Unit	Unit	IS _____ (feet) _____ (direction)	UTILITY POLE 27 (Object/Landmark)			
Rgt-R	0	0	0	0	ALL OBJECTS ARE MEASURED FROM POINT OF REFERENCE				
Lft-F	0	0	0	0	Object	N	S	E	W
Rgt-F	0	0	0	0					
Lft-R	0	0	0	0					
(116) Intersection Related					(119) Indicate the Type of Intersection (Check one) <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <input checked="" type="radio"/> Not at Intersection (01) <input type="radio"/> "Y" Intersection (04) <input type="radio"/> Roundabout (07) </div> <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <input type="radio"/> 4-Way Intersection (02) <input type="radio"/> Part of Interchange (05) <input type="radio"/> 5 (or more legs) Intersection (08) </div> <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <input type="radio"/> "T" Intersection (03) <input type="radio"/> Traffic Circle (06) <input type="radio"/> Other (09) </div>				
● No (01) ○ Yes (02)									
(117) Main Road									
(A) No. of Lanes		(B) Speed Limit			<div style="border: 1px solid black; width: 100px; height: 100px; margin: 0 auto;"></div> Place an arrow in the above circle to indicate North.				
2		45							
(118) Side Road									
(A) No. of Lanes		(B) Speed Limit							

Draw Object, Directions, Etc. According to Current Practices.



Synopsis (Accident Description. Refer to units by number):

On 2/25/20 at approximately 0734 hours, U-1 traveling west bound on Kaahumanu Avenue within the inner lane near the intersection of Wahine Pio Avenue, struck U-2 which was stopped in traffic also traveling west bound within the inner lane of Kaahumanu Avenue.

Officer's Rank and Name	Officer's ID Number	Date/Time	Supervisor's Rank and Name	Supervisor's ID Number	Date/Time
PO2 TENGAN, RYAN S	15322	3/3/20 14:16	SGTD1 CORPUZ, DALE R	1637	3/3/20 14:16



Synopsis (continued)

U-2 was propelled forward, striking U-3 which was propelled forward, striking U-4. As a result of the collision, U-1 suffered disabling front end damage. U-2 suffered damages to it's front and rear. U-3 suffered damages to it's front and rear. U-4 suffered scratches to it's rear bumper. U-2 operator complained of pain to her shoulder. U-3 operator complained of pain to his chest. Damages are estimated to be greater than \$3,000.00.

Officer's Rank and Name	Officer's ID Number	Date/Time	Supervisor's Rank and Name	Supervisor's ID Number	Date/Time
PO2 TENGAN, RYAN S	15322	3/3/20 14:16	SGTD1 CORPUZ, DALE R	1637	3/3/20 14:16



Narrative

Ofc. R. TENGAN, 15322
D-1, Beat 12, Wailuku
Wailuku Patrol Division

ASSIGNMENT

On 2/25/20 at approximately 0734 hours, I was assigned by Dispatch to respond to the area of Kaahumanu Avenue and Wahine Pio Avenue for a motor vehicle accident-type case. Dispatch related that there were possible injuries.

ARRIVAL

I arrived on scene at approximately 0736 hours.

OFFICER'S ACTIONS/OBSERVATIONS

Upon arrival, I observed a Maui Police Department unmarked vehicle with heavy front end damages in the median of Kaahumanu Avenue. Three other vehicles were blocking the inner west bound lane. I then made contact with the operator (later identified as Willina AGAPAY) and passenger (later identified as Bernice SHAW BURROWS-SALSIDO) of one of the involved vehicles bearing Hawaii license plate "LGE231".

WARNING AND WAIVER

On 2/25/20 at approximately 0737 hours, I verbally warned Willina AGAPAY of her rights in accordance with the Miranda Decision. AGAPAY indicated that she understood her rights, waived them and offered to provide a statement.

STATEMENT OF OPERATOR (U-4): AGAPAY, Willina
(A/Hwn/F/Cit)

Interviewed on 2/25/20 at approximately 0737 hours.

Willina AGAPAY stated that on 2/25/20 at approximately 0734 hours, she was the operator of vehicle "LGE231" and had one passenger seated in the front passenger seat with her (Bernice SHAW BURROWS-SALSIDO). AGAPAY related that she was stopped in traffic within the inner lane of Kaahumanu Avenue traveling westbound near the Wahine Pio Avenue intersection. Traffic was just beginning to flow again when she heard a loud crash and suddenly felt an impact from the rear when she was struck from behind by vehicle bearing Hawaii license plate "PG1281". AGAPAY related that she did not see what happened behind her as she had been focusing on traffic in front of her. Following the collision, she stopped her vehicle within the inner lane and awaited Police.

AGAPAY had nothing further to add.

INJURIES (U-4 OPERATOR):

AGAPAY related that she was uninjured as a result of the collision.

STATEMENT OF PASSENGER (U-4): SHAW BURROWS-SALSIDO,
Bernice (A/Hwn/F/Cit)

Interviewed on 2/25/20 at approximately 0740 hours.

Bernice SHAW BURROWS-SALSIDO stated that on 2/25/20 at approximately 0734 hours, she was

Officer's Rank and Name	Officer's ID Number	Date/Time	Supervisor's Rank and Name	Supervisor's ID Number	Date/Time
PO2 TENGAN, RYAN S	15322	3/3/20 14:16	SGTD1 CORPUZ, DALE R	1637	3/3/20 14:16



Narrative

the passenger of vehicle "LGE231". SHAW BURROWS-SALSIDO related that they were stopped in traffic within the inner lane of Kaahumanu Avenue traveling westbound near the Wahine Pio Avenue intersection. She suddenly felt an impact from the rear when they were struck from behind by vehicle bearing Hawaii license plate "PG1281". SHAW BURROWS-SALSIDO related that she did not see what happened behind her.

SHAW BURROWS-SALSIDO had nothing further to add.

INJURIES (U-4 PASSENGER):

SHAW BURROWS-SALSIDO related that she was uninjured as a result of the collision.

VEHICLE INFORMATION (U-4):

Vehicle bearing Hawaii license plate "LGE231" is described as a white 2016 Dodge Journey multipurpose vehicle. The vehicle is registered to Willina AGAPAY.

DAMAGES (U-4):

As a result of the collision, vehicle "LGE231" suffered scratches to its rear bumper. Damages are estimated to be under \$3,000.00.

TOW REQUEST (U-4):

Willina AGAPAY did not request a tow for vehicle "LGE231" and drove the vehicle off scene.

STATEMENT OF OPERATOR (U-2):

SATO, Kristen

(A/Jpn/F/Cit)

Interviewed on 2/25/20 at approximately 0745 hours.

Kristen SATO stated that on 2/25/20 at approximately 0734 hours, she was the operator and sole occupant of vehicle "MRL382". SATO related that she was stopped in traffic within the inner lane of Kaahumanu Avenue traveling westbound near the Wahine Pio Avenue intersection. She was stopped in traffic when she suddenly felt an impact from the rear when she was struck from behind by vehicle bearing Hawaii license plate "LEZ821". SATO related that she did not see what happened behind her as she had been focusing on traffic in front of her. Following the collision, she stopped her vehicle within the inner lane. She related that a Police Officer emerged from the vehicle which struck her and checked to see if she was okay. Uniformed Police arrived shortly after.

SATO had nothing further to add.

INJURIES (U-2 OPERATOR):

SATO related that as a result of the collision, she suffered pain to her right knee and neck.

VEHICLE INFORMATION (U-2):

Vehicle bearing Hawaii license plate "MRL382" is described as a white 2007 Toyota Tacoma pickup truck. The vehicle is registered to John STAI.

DAMAGES (U-2):

As a result of the collision, vehicle "MRL382" suffered heavy rear end damage and dents to its front bumper. Damages are estimated to be over \$3,000.00.

Officer's Rank and Name	Officer's ID Number	Date/Time	Supervisor's Rank and Name	Supervisor's ID Number	Date/Time
PO2 TENGAN, RYAN S	15322	3/3/20 14:16	SGTD1 CORPUZ, DALE R	1637	3/3/20 14:16



Narrative

TOW REQUEST (U-2):

Kristen SATO did not request a tow for vehicle "MRL382" and drove the vehicle off scene.

ADDITIONAL INFORMATION

Refer to all reports submitted by other Officers.

INVESTIGATION

Investigation thus far reveals, on 2/25/20 at approximately 0734 hours, U-1 traveling west bound on Kaahumanu Avenue within the inner lane near the intersection of Wahine Pio Avenue, struck U-2 which was stopped in traffic also traveling west bound within the inner lane of Kaahumanu Avenue. U-2 was propelled forward, striking U-3 which was propelled forward, striking U-4. As a result of the collision, U-1 suffered disabling front end damage. U-2 suffered damages to it's front and rear. U-3 suffered damages to it's front and rear. U-4 suffered scratches to it's rear bumper. U-2 operator complained of pain to her shoulder. U-3 operator complained of pain to his chest. Damages are estimated to be greater than \$3,000.00.

DISPOSITION

Records

Ofc. R. TENGAN, 15322
2/25/20 at 1115 hours
Wailuku Patrol Division

Officer's Rank and Name	Officer's ID Number	Date/Time	Supervisor's Rank and Name	Supervisor's ID Number	Date/Time
PO2 TENGAN, RYAN S	15322	3/3/20 14:16	SGTD1 CORPUZ, DALE R	1637	3/3/20 14:16



Narrative Supplement

Supplement type:

ASSIGNMENT:

Officer Christopher CLARK
 D-1, Beat 10, Wailuku
 Wailuku Patrol Division

On 02/25/20 at about 0734 hours, I was assigned by Dispatch to respond EMERGENCY to a Motor Vehicle Accident in the area of Kaahumanu Avenue and Wahine Pio Drive in Kahului, County of Maui.

ARRIVAL:

On 02/25/20 at about 0737 hours, I arrived at the above location.

OFFICER'S OBSERVATIONS:

Upon arrival, I observed a grey SUV (LEZ-821) in the median of Kaahumanu Avenue with front end damages. I observed three more vehicles pulled to the inner westbound shoulder of Kaahumanu Avenue. A white truck (MRL-382) had damages to the rear and was pushed up against the rear of a black sedan (PG-1281). Another white truck (LGE-231) had minor rear end damages and was pulled further ahead. I made contact with the third car in the line, persian gulf plated 1281.

UNIT 3 OPERATOR STATEMENT: DELLA, Tyron A/M/F/Cit

On 02/25/20 at about 0742 hours, I interviewed the operator of Unit 3 identified as Tyron DELLA in the media of Kaahumanu Avenue near Wahinepio drive in Kahului, County of Maui.

DELLA reported that he was stopped in traffic in the inner lane of Kaahumanu Avenue. He felt a bang from the rear and was pushed forward into the vehicle ahead of him. He related he was wearing his seatbelt and his air bags did not deploy. He related pain to chest and neck from collision.

INJURIES:

Unit 3 operator reported pain to his chest and neck from the collision. He was evaluated and released on scene by medics.

VEHICLE INVOLVED:

Unit 3 is described as a 2001 Black Honda civic bearing Persian Gulf Veteran plates 1281. Vehicle PG-1281 is registered to Tyron DELLA of Kahului. It sustained damages to the rear bumper and trunk and to the front hood. It is not reported stolen.

TOW:

Unit 3 did not require a tow and was able to be driven from the scene.

ADDITIONAL INFORMATION:

Refer to all reports under #20-007614

BODY CAMERA:

The Police issued Axon body camera was utilized in this investigation.

Officer's Rank and Name	Officer's ID Number	Date/Time	Supervisor's Rank and Name	Supervisor's ID Number	Date/Time
PO2 CLARK, CHRISTOPHER J	15427	2/25/20 21:14	SGTD1 PAGADUAN, LAWRENCE III	10218	2/25/20 21:48



Narrative Supplement

Supplement type:

DISPOSITION:

Records

Officer Christopher CLARK e#15427
 Wailuku Patrol Division, Police Officer II
 02/25/20 @ 1215 hours

Officer's Rank and Name	Officer's ID Number	Date/Time	Supervisor's Rank and Name	Supervisor's ID Number	Date/Time
PO2 CLARK, CHRISTOPHER J	15427	2/25/20 21:14	SGTD1 PAGADUAN, LAWRENCE III	10218	2/25/20 21:48



Narrative Supplement

Supplement type:

#20-007614/MVA
 Date: 02/25/20
 Location: Kaahumanu Avenue, Kahului.

ASSIGNMENT/ARRIVAL:

On 02/25/20 at about 0734 hours, Dispatch assigned Kahului Units to respond to a 3 car motor vehicle accident. It was later discovered 4 vehicles were involved. On 02/25/20 at about 0743 hours, I was advised by Lt. ADAMS and Dispatch Supervisor that an MPD Officer was involved in the accident and I arrived on scene at 0756 hours.

OFFICER'S OBSERVATIONS:

Upon arrival, I observed Officer Martin MARFIL on scene, his issued, unmarked vehicle, a gray-in-color, Ford, SUV bearing Hawaii plates (LEZ821) on the median with heavy front damages.

I observed a white Toyota pick-up truck bearing Hawaii plates (MRL382) with rear tailgate, bumper damages, and its front bumper had collided into the rear of a black-in-color, Honda four-door sedan bearing Hawaii plates (Persian Gulf Veteran 1281). I also noticed a white-in-color, SUV bearing Hawaii plates (LGE231) parked in front of (Persian Gulf Veteran 1281). After checking on Officer MARFIL and other occupants, I was advised (LGE231) had left the scene due to the operator needed to leave. On scene, I met with Officer MARFIL's Supervisor, Sgt. M. KAYA.

OFFICER'S NOTE:

A view of the scene revealed the following:

- Unit 1: (LEZ821),
- Unit 2: (MRL382)
- Unit 3: (Persian Gulf Veteran 1281)
- Unit 4: (LGE231)

WARNING OF RIGHTS:

On 02/25/20 at about 0820 hours, I verbally advised Officer MARFIL of his Constitutional Rights. Officer MARFIL stated he understood his Rights and he was willing to make a statement regarding this incident.

STATEMENT OF: MARFIL, Martin (A/HAWN/M/C)

On 02/25/20 at about 0822 hours, Officer MARFIL stated he was operating vehicle (LEZ821), traveling westbound, within the inner lane of Kaahumanu Avenue, at an approximate speed of 40 miles per hour. Stated while on Kaahumanu Avenue, just prior to Wakea Avenue, he was on his cell talking to a Scott FISHER regarding SPEED Training, and hung up the phone between Wakea Avenue and Wahine Pio Avenue.

Stated he placed his cell phone on his visor, the cell phone fell onto his lap, then fell onto the floorboard. Stated he looked down to grab his cell phone, looked up, then saw a white truck in front of him, he was unable to brake, and collided into the rear of the white truck. Stated his airbags deployed, he drove his vehicle onto the center median, jumped out, and immediately checked on the female operator "Kristian" within the white truck. He also checked on the other occupants and immediately contacted his Sergeant M. KAYA to inform him of the incident. Officer MARFIL stated he was not injured from the accident and he was wearing his seatbelt. Nothing further to add.

Officer's Rank and Name	Officer's ID Number	Date/Time	Supervisor's Rank and Name	Supervisor's ID Number	Date/Time
SGTD4 SAGAWINIT, MARY-LEE T	10861	2/26/20 20:04	SGTD4 SAGAWINIT, MARY-LEE T	10861	2/26/20 20:04



Narrative Supplement

Supplement type:

PHOTOS OF SCENE:

- PHOTO #1: view of front bumper damage LEZ821
- PHOTO #2: view of front driver's side panel damage LEZ821
- PHOTO #3: view of rear bumper LEZ821
- PHOTO #4: view of rear passenger side LEZ821
- PHOTO #5: view of front passenger's side panel damage LEZ821
- PHOTO #6: view of rear bumper damage MRL382
- PHOTO #7: view of rear passenger side damage MRL382
- PHOTO #8: view of rear driver's side damage MRL382
- PHOTO #9: view of front passenger side panel MRL382
- PHOTO #10: view of vehicle MRL382 from passenger side, collision into the rear of Persian Gulf Veteran 1281
- PHOTO #11: view of front bumper damage Persian Gulf Veteran 1281
- PHOTO #12: view of front side panel damage Persian Gulf Veteran 1281
- PHOTO #13: view of rear driver's side panel damage Persian Gulf Veteran 1281
- PHOTO #14: view of vehicle MRL382 collision into the rear of Persian Gulf Veteran 1281
- PHOTO #15: view of interior with both driver and passenger airbag deployed LEZ821
- PHOTO #16: view of front bumper LGE231 - taken by Sgt. M. KAYA
- PHOTO #17: view of rear bumper LGE231 - taken by Sgt. M. KAYA

CONNECT-UP REPORT:

#20-007863/PERSONAL ASSISTANCE

EVIDENCE FOR #20-007863/PERSONAL ASSISTANCE:

PCN#:138802-746285 - (1) compact disc containing (17) digital photos of vehicles involved in motor vehicle accident

TOW REQUEST:

On 02/25/20, Trent MATSUMOTO, Police Motorpool Supervisor was notified and Maui Tow was requested for MPD vehicle LEZ821.

ADDITIONAL INFORMATION:

Please refer to reports submitted under #20-007614/Motor Vehicle Accident.

SUBMITTED BY:

Sergeant Mary-Lee T. SAGAWINIT, #10861
 02/26/20 @ 2000 hours

Officer's Rank and Name	Officer's ID Number	Date/Time	Supervisor's Rank and Name	Supervisor's ID Number	Date/Time
SGTD4 SAGAWINIT, MARY-LEE T	10861	2/26/20 20:04	SGTD4 SAGAWINIT, MARY-LEE T	10861	2/26/20 20:04





Allstate

You're in good hands.

Roanoke Subrogation MCO
P.O. BOX 660636
DALLAS TX 75266



COUNTY OF MAUI
200 S HIGH ST RM 708
WAILUKU HI 967932155

September 14, 2020

CLAIM NUMBER: 0579455452 F7I
DATE OF LOSS: February 25, 2020
OUR INSURED: ROGER SAPLA
YOUR FILE NUMBER:
YOUR INSURED:
ADDRESS:

PHONE NUMBER: 800-776-2615
FAX NUMBER: 866-361-9742
OFFICE HOURS: Mon - Fri 7:30 am - 6:00 pm

CITY STATE ZIP: , ,
LOSS LOCATION: KAAHUMANU AVE, WAILUKU, , HI
AMOUNT OF LOSS: \$14,207.48

Re: Subrogation Claim Notice

Dear COUNTY OF MAUI,

Our investigation indicates your insured was responsible for the loss referenced above.

Please accept this letter as notice of our subrogation claim. Enclosed, you will find copies of the supporting documents for which we are seeking reimbursement. To assist you in your review, the following is a breakdown of our subrogation demand:

Auto Damage (Company Paid):	\$17,079.48
Rental:	\$
Towing:	\$
Other:	\$
Deductible (Customer Paid):	\$
Salvage Recovery:	\$2,878.00
Insured Out of Pocket (please send directly to our Insured):	\$

Please forward your payment with our claim number to:

**Allstate Payment Processing Center
P.O. BOX 650271
Dallas, TX 75265 0271**

Be advised that any amounts received from you for less than the amount demanded will be considered an undisputed partial payment amount only, and we retain the right to pursue full payment.

We ask that you direct any future correspondence to the address listed at the top of this letter.

If corresponding by e-mail, please send to claims@claims.allstate.com and refer to the Allstate claim number on the subject line. Thank you.

0579455452 F7I

Sincerely,

RACHEL GRINNELL

RACHEL GRINNELL
800-776-2615 Ext. 7257077
Allstate Insurance Company

Report Date: 05/13/2020

Payment Ledger

Policy Holder:	ROGER A SAPLA &KRISTEN SATO	Total Amount Paid	\$14,201.48
Participant:	ROGER SAPLA	Medical Deductible:	\$0.00
Date of Loss:	02/25/2020	Co-payment Amount	\$0.00
Claim Number:	0579455452		

Payment/Credit Date	Payee/Payor	Check#		Amount
03/20/2020	ROGER A. SAPLA	101990475	\$	16,029.00
03/27/2020	STUDIO AUTO BODY INC	105895618	\$	372.62
04/16/2020	ROGER A SAPLA &KRISTEN SATO	115921514	\$	677.86
05/05/2020	COPART INC	3344744020050506	\$	-2,878.00



ALLSTATE INSURANCE COMPANY

Northwest Auto
P.O. Box 3036
Bothell, WA 98041

Claim #: 000579455452D01
Workfile ID: 81cdf0e6

Supplement of Record 1 Summary

Written By: LIONEL RAMOS, 3/11/2020 7:29:53 AM
Adjuster: RAMOS, LIONEL, (808) 265-6714 Evening

Insured: ROGER SAPLA Owner Policy #: 000087269097 Claim #: 000579455452D01
Type of Loss: Collision Date of Loss: 02/25/2020 12:00 PM Days to Repair: 18
Point of Impact: 06 Rear Deductible: 500.00

Owner (Insured):

ROGER SAPLA
936 KUIALUA PL
LAHAINA, HI 96761-2133
(808) 276-8242 Other
RSAPLA55@YAHOO.COM

Inspection Location:

VA
HI 96761
Virtual

Appraiser Information:

lionel.ramos@allstate.com
(808) 265-6714

Repair Facility:

OWNERS CHOICE

VEHICLE

2007 TOYO Tacoma PreRunner Doublecab 128" WB Automatic 4D P/U 6-4.0L Gasoline EFI WHITE TRICOAT

VIN: STEJU62N97Z440569 Production Date: 05/2007 Interior Color:
License: MRL 382 Odometer: 100672 Exterior Color: WHITE TRICOAT
State: HI Condition:

TRANSMISSION

Automatic Transmission
Overdrive

POWER

Power Steering
Power Brakes
Power Windows
Power Locks
Power Mirrors

DECOR

Dual Mirrors
Privacy Glass
Console/Storage

Overhead Console

CONVENIENCE

Air Conditioning
Intermittent Wipers
Tilt Wheel
Cruise Control
Keyless Entry
Telescopic Wheel

RADIO

AM Radio
FM Radio
Stereo
Search/Seek

CD Player

Auxiliary Audio Connection

SAFETY

Drivers Side Air Bag
Passenger Air Bag
Anti-Lock Brakes (4)
Hands Free Device
Positraction

SEATS

Cloth Seats
Bucket Seats
Reclining/Lounge Seats

WHEELS

Aluminum/Alloy Wheels

PAINT

Clear Coat Paint

OTHER

Fog Lamps
California Emissions

TRUCK

Rear Step Bumper
Rear Sliding Window
Running Boards/Side Steps

Supplement of Record 1 Summary

2007 TOYO Tacoma PreRunner Doublecab 128" WB Automatic 4D P/U 6-4.0L Gasoline EFI WHITE TRICOAT

Line	Oper	Description	Part Number	Qty	Extended Price \$	Labor	Paint
1	#	S01	ghrn estimate	1	12,692.46 X	0.0	0.0
SUBTOTALS					12,692.46	0.0	0.0

ESTIMATE TOTALS

Category	Basis	Rate	Cost \$
Parts			0.00
Miscellaneous			12,692.46
Subtotal			12,692.46
Total Cost of Repairs			12,692.46
Deductible			500.00
Deductible Credit			0.00
Total Adjustments			500.00
Net Cost of Repairs			12,192.46

Supplement of Record 1 Summary

2007 TOYO Tacoma PreRunner Doublecab 128" WB Automatic 4D P/U 6-4.0L Gasoline EFI WHITE TRICOAT

SUPPLEMENT SUMMARY

Line	Oper	Description	Part Number	Qty	Extended Price \$	Labor	Paint
Deleted Items							
1	#	*** NON DRIVABLE ***		1	0.00	0.0	0.0
2	#	*** OEM ONLY ***		1	0.00	0.0	0.0
3	#			0	0.00	0.0	0.0
4	FRONT BUMPER						
5	R&I	R&I bumper assy		0	0.00	-1.6	0.0
6	* <>	Rpr Bumper cover w/o SR5 package w/fog lamp NOTE: 2 SMALL AREAS OF DAMAGE		0	0.00	<u>-2.0</u>	-3.0
7		Add for Three Stage		0	0.00	0.0	-2.1
8	#	Refn Partial Refinish w/ Full Clear30% of base		0	0.00	0.0	0.9
9	#	R&I license plate		0	0.00	-0.2	0.0
10		R&I RT Bumper filler white NOTE: part is loose please check for damage		0	0.00	-0.3	0.0
11		R&I LT Bumper filler white		0	0.00	-0.3	0.0
12	GRILLE						
13	*	Repl RCY Grille unpainted w/o SR5 pkg +25%	~247073584	1	-178.75	<u>-0.4</u>	0.0
14	FRONT LAMPS						
15	R&I	RT Fog lamp assy		0	0.00	-0.2	0.0
16	R&I	RT Headlamp assy NOTE: headlamp is moved, please check for damage		0	0.00	-0.3	0.0
17	R&I	LT Fog lamp assy		0	0.00	-0.2	0.0
18	RADIATOR SUPPORT						
19	*	Rpr Radiator support NOTE: possible damage, hood gap are wide on either side to fenders		0	0.00 s	0.0	<u>0.0</u>
20	CAB						
21	*	Rpr RT Side panel NOTE: bed pushed back into pillar		0	0.00	<u>-2.0</u>	-1.5
22		Overlap Major Non-Adj. Panel		0	0.00	0.0	0.2
23		Add for Three Stage		0	0.00	0.0	-0.5
24	*	Rpr LT Side panel NOTE: bed pushed back into pillar		0	0.00	<u>-2.0</u>	-1.5
25		Overlap Major Non-Adj. Panel		0	0.00	0.0	0.2
26		Add for Three Stage		0	0.00	0.0	-0.5
27		Repl RT Protector	5874304010	1	-14.65	-0.3	0.0
28		Repl LT Protector	5874404010	1	-14.65	-0.3	0.0
29		Blnd Back panel Double Cab		0	0.00	0.0	-2.1
30		R&I RT Drip molding		0	0.00	-0.5	0.0

Supplement of Record 1 Summary

2007 TOYO Tacoma PreRunner Doublecab 128" WB Automatic 4D P/U 6-4.0L Gasoline EFI WHITE TRICOAT

31		R&I	LT Drip molding		0	0.00	-0.5	0.0	
32	REAR DOOR								
33	*	R&I	<u>RT Door w'strip drop for refinish</u>		0	0.00	<u>-0.2</u>	0.0	
34	*	R&I	<u>LT Door w'strip drop for refinish</u>		0	0.00	<u>-0.2</u>	0.0	
35	BACK GLASS								
36	*	Rpr	<u>Back glass Toyota privacy MASK</u>		0	0.00	<u>-0.3</u>	0.0	
37	PICK UP BOX								
38	*	Rpr	RT Side panel w/o longbed NOTE: damage in tail lamp pocket and buckles on side		0	0.00	<u>-6.0</u>	-3.1	
39			Overlap Major Non-Adj. Panel		0	0.00	0.0	0.2	
40			Add for Three Stage		0	0.00	0.0	-1.2	
41	#	Refn	Partial Refinish w/ Full Clear 50% of base		0	0.00	0.0	1.3	
42	*	Rpr	LT Side panel w/o longbed NOTE: buckles on side		0	0.00	<u>-6.0</u>	-3.1	
43			Overlap Major Adj. Panel		0	0.00	0.0	0.4	
44			Add for Three Stage		0	0.00	0.0	-1.1	
45	#	Refn	Partial Refinish w/ Full Clear 50% of base		0	0.00	0.0	1.3	
46		R&I	RT Protector w/o longbed		0	0.00	-0.4	0.0	
47		R&I	LT Protector w/o longbed		0	0.00	-0.4	0.0	
48	*	R&I	<u>RT Wheelhouse liner w/o longbed loosen</u>		0	0.00	<u>-0.2</u>	0.0	
49	*	R&I	<u>LT Wheelhouse liner w/o longbed loosen</u>		0	0.00	<u>-0.2</u>	0.0	
50	*	Repl	RCY tailgate assy +25%	~245781679	1	-668.75	-0.4	-2.4	
51			Overlap Major Adj. Panel		0	0.00	0.0	0.4	
52			Add for Three Stage		0	0.00	0.0	-0.8	
53	*	Repl	RCY Protector	6571704020	1	<u>Incl.</u>	<u>-0.2</u>	0.0	
54		R&I	Handle		0	0.00	-0.5	0.0	
55		R&I	RT Lock assy		0	0.00	-0.1	0.0	
56		R&I	LT Lock assy		0	0.00	-0.1	0.0	
57	*	Repl	RCY Inner panel	6575904060	1	<u>Incl.</u>	<u>Incl.</u>	<u>-1.0</u>	
58			Add for Three Stage		0	0.00	0.0	-0.4	
59		R&I	RT Mud guard 2WD		0	0.00	-0.2	0.0	
60		R&I	LT Mud guard 2WD		0	0.00	-0.2	0.0	
61		R&I	RT Flare w/o longbed		0	0.00	-0.5	0.0	
62		R&I	LT Flare w/o longbed		0	0.00	-0.5	0.0	
63		Repl	RT Decal "TRD OFF ROAD" red	7599604050D0	1	-94.99	-0.3	0.0	
64		Repl	LT Decal "TRD OFF ROAD" red	7599604050D0	1	-94.99	-0.3	0.0	
65		Repl	Nameplate "TACOMA"	7542704010	1	-44.48	-0.2	0.0	
66		Repl	Set back box assy		1	0.00	-1.5	0.0	
67	REAR LAMPS								
68	*	Repl	RCY RT Tail lamp assy +25%	~246217186	1	-127.50	<u>-0.2</u>	0.0	
69	*	Repl	RCY LT Tail lamp assy +25%	~241628817	1	-146.25	<u>-0.2</u>	0.0	

Supplement of Record 1 Summary

2007 TOYO Tacoma PreRunner Doublecab 128" WB Automatic 4D P/U 6-4.0L Gasoline EFI WHITE TRICOAT

70	REAR BUMPER						
71		O/H rear bumper		0	0.00	-1.8	0.0
72	*	Repl RCY Bumper w/o SR5 package w/o X-Runner +25%	5215104051	1	<u>-437.50</u>	<u>Incl.</u>	0.0
		NOTE: entire assy					
		Discount Auto Parts USA-HI(Kapolei) E-mail 808-682-1996					
73	*	Repl RCY Step pad	5216204011	1	<u>Incl.</u>	<u>Incl.</u>	0.0
74	*	Repl RCY Cover	5215904020	1	<u>Incl.</u>	<u>Incl.</u>	0.0
75	MISCELLANEOUS OPERATIONS						
76	**	Repl A/M Corrosion Protection		1	-5.00	-0.2	0.0
77	**	Repl A/M Cover Car		1	-5.00	-0.2	0.0
78	#	Rpr Full Frame Pull		0	0.00	-2.0 F	0.0
79	#	Rpr Set Up & Measure		0	0.00	-2.0	0.0
Added Items							
1	#	S01 ghrn estimate		1	12,692.46 X	0.0	0.0
OTHER CHARGES							
Deleted Items							
	#	S01 E.P.C.		1	-5.00		
				SUBTOTALS	10,854.95	-36.6	-19.4

TOTALS SUMMARY

Category	Basis	Rate	Cost \$
Parts			-1,832.51
Parts Markup	\$ -263.76	40.0 %	-105.50
Paint Labor	-19.4 hrs @	\$ 56.00 /hr	-1,086.40
Frame Labor	-2.0 hrs @	\$ 56.00 /hr	-112.00
Additional Supplement Labor			-1,937.60
Paint Supplies	-19.4 hrs @	\$ 36.00 /hr	-698.40
Additional Supplement Materials/Supplies			148.40
Miscellaneous			12,692.46
Other Charges			-5.00
Subtotal			7,063.45
Sales Tax	\$ -5,629.01 @	4.1660 %	-234.73
Additional Supplement Taxes			0.23
Total Supplement Amount			6,828.95
NET COST OF SUPPLEMENT			6,828.95

Supplement of Record 1 Summary

2007 TOYO Tacoma PreRunner Doublecab 128" WB Automatic 4D P/U 6-4.0L Gasoline EFI WHITE TRICOAT

CUMULATIVE EFFECTS OF SUPPLEMENT(S)

Estimate	5,863.51	KIMBERLEE MCCABE
Supplement S01	6,828.95	LIONEL RAMOS
Workfile Total:	\$ 12,692.46	
TOTAL ADJUSTMENTS:	\$ 500.00	
NET COST OF REPAIRS:	\$ 12,192.46	

***SUPPLEMENT REQUEST PROCESS INSTRUCTIONS:**

VIRTUAL ASSIST SUPPLEMENT PROCESS:

Any additional damages must be inspected by an Allstate technician while the vehicle is at the shop and torn down, prior to the repairs being completed.

Please follow the Virtual Assist App process for all future supplement requests.

Failure to notify Allstate of any supplemental damage may result in denial of payment for these damages. Review of all invoices will be requested.

The Virtual Assist App can be downloaded at no charge by visiting the Apple App store or the Google Play store. Search, download and install: Virtual Assist Arity

FOR SHOPS NOT PARTICIPATING IN VIRTUAL ASSIST:

email supplement request, invoice(s) and supporting photo(s) to:
AUTOSUPPLEMENTS@ALLSTATE.COM. CLAIM NUMBER MUST BE INCLUDED IN THE SUBJECT LINE OF THE EMAIL.

*Updated 9/28/2017 (EB)

FOR YOUR PROTECTION, HAWAII LAW REQUIRES YOU TO BE INFORMED THAT PRESENTING A FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT IS A CRIME PUNISHABLE BY FINES OR IMPRISONMENT, OR BOTH.

Supplement of Record 1 Summary

2007 TOYO Tacoma PreRunner Doublecab 128" WB Automatic 4D P/U 6-4.0L Gasoline EFI WHITE TRICOAT

Estimate based on MOTOR CRASH ESTIMATING GUIDE and potentially other third party sources of data. Unless otherwise noted, (a) all items are derived from the Guide ARM8512, CCC Data Date 11/1/2019, and potentially other third party sources of data; and (b) the parts presented are OEM-parts. OEM parts are manufactured by or for the vehicle's Original Equipment Manufacturer (OEM) according to OEM's specifications for U.S. distribution. OEM parts are available at OE/Vehicle dealerships or the specified supplier. OPT OEM (Optional OEM) or ALT OEM (Alternative OEM) parts are OEM parts that may be provided by or through alternate sources other than the OEM vehicle dealerships with discounted pricing. Asterisk (*) or Double Asterisk (**) indicates that the parts and/or labor data provided by third party sources of data may have been modified or may have come from an alternate data source. Tilde sign (~) items indicate MOTOR Not-Included Labor operations. The symbol (<>) indicates the refinish operation WILL NOT be performed as a separate procedure from the other panels in the estimate. Non-Original Equipment Manufacturer aftermarket parts are described as Non OEM, A/M or NAGS. Used parts are described as LKQ, RCY, or USED. Reconditioned parts are described as Recond. Recored parts are described as Recore. NAGS Part Numbers and Benchmark Prices are provided by National Auto Glass Specifications. Labor operation times listed on the line with the NAGS information are MOTOR suggested labor operation times. NAGS labor operation times are not included. Pound sign (#) items indicate manual entries.

Some 2020 vehicles contain minor changes from the previous year. For those vehicles, prior to receiving updated data from the vehicle manufacturer, labor and parts data from the previous year may be used. The CCC ONE estimator has a list of applicable vehicles. Parts numbers and prices should be confirmed with the local dealership.

The following is a list of additional abbreviations or symbols that may be used to describe work to be done or parts to be repaired or replaced:

SYMBOLS FOLLOWING PART PRICE:

m=MOTOR Mechanical component. s=MOTOR Structural component. T=Miscellaneous Taxed charge category. X=Miscellaneous Non-Taxed charge category.

SYMBOLS FOLLOWING LABOR:

D=Diagnostic labor category. E=Electrical labor category. F=Frame labor category. G=Glass labor category. M=Mechanical labor category. S=Structural labor category. (numbers) 1 through 4=User Defined Labor Categories.

OTHER SYMBOLS AND ABBREVIATIONS:

Adj.=Adjacent. Algn.=Align. ALU=Aluminum. A/M=Aftermarket part. Blnd=Blend. BOR=Boron steel. CAPA=Certified Automotive Parts Association. D&R=Disconnect and Reconnect. HSS=High Strength Steel. HYD=Hydroformed Steel. Incl.=Included. LKQ=Like Kind and Quality. LT=Left. MAG=Magnesium. Non-Adj.=Non Adjacent. NSF=NSF International Certified Part. O/H=Overhaul. Qty=Quantity. Refn=Refinish. Repl=Replace. R&I=Remove and Install. R&R=Remove and Replace. Rpr=Repair. RT=Right. SAS=Sandwiched Steel. Sect=Section. Subl=Sublet. UHS=Ultra High Strength Steel. N=Note(s) associated with the estimate line.

CCC ONE Estimating - A product of CCC Information Services Inc.

The following is a list of abbreviations that may be used in CCC ONE Estimating that are not part of the MOTOR CRASH ESTIMATING GUIDE:

BAR=Bureau of Automotive Repair. EPA=Environmental Protection Agency. NHTSA= National Highway Transportation and Safety Administration. PDR=Paintless Dent Repair. VIN=Vehicle Identification Number.



REPORT SUMMARY



CLAIM INFORMATION

Owner	Sapla, Roger 936 Kuialua Pl Lahaina, HI 96761-2133
Loss Vehicle	2007 Toyota Tacoma PreRunner Doublecab 128" WB Automatic
Loss Incident Date	02/25/2020
Claim Reported	03/09/2020

The CCC ONE® Market Valuation Report reflects CCC Information Services Inc.'s opinion as to the value of the loss vehicle, based on information provided to CCC by ALLSTATE INSURANCE COMPANY.

Loss vehicle has 6% fewer than average mileage of 107,500.



INSURANCE INFORMATION

Report Reference Number	96815847 -2
Claim Reference	000579455452D01
Adjuster	Ramos, Lionel
Appraiser	Mccabe, Kimberlee
Odometer	100,672
Last Updated	03/09/2020 08:36 PM



VALUATION SUMMARY

Base Vehicle Value	\$ 16,029.00
Adjusted Vehicle Value	\$ 16,029.00
Value before Deductible	\$ 16,029.00
Deductible*	- \$ 500.00
Total	\$ 15,529.00

BASE VEHICLE VALUE

This is derived per our Valuation methodology described on the next page.

ADJUSTED VEHICLE VALUE

This is determined by adjusting the Base Vehicle Value to account for the actual condition of the loss vehicle and certain other reported attributes, if any, such as refurbishments and after factory equipment.

Adjustments indicated with an Asterisk (*) have been determined by ALLSTATE INSURANCE COMPANY and have been added here for convenience.

The total may not represent the total of the settlement as other factors (e.g. license and fees) may need to be taken into account.

Inside the Report

Valuation Methodology.....	2
Vehicle Information.....	3
Vehicle Condition.....	7
Comparable Vehicles.....	8
Valuation Notes.....	10
Supplemental Information.....	11

VALUATION METHODOLOGY

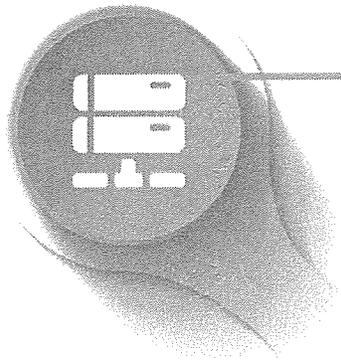
How was the valuation determined?

CLAIM INSPECTION



ALLSTATE INSURANCE COMPANY has provided CCC with the zip code where the loss vehicle is garaged, loss vehicle VIN, mileage, equipment, as well as loss vehicle condition, which is used to assist in determining the value of the loss vehicle.

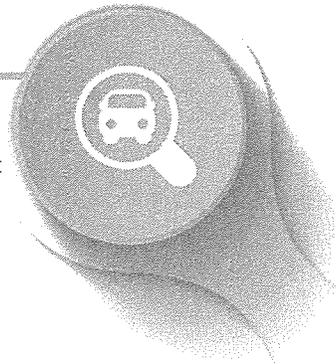
DATABASE REVIEW



CCC maintains an extensive database of vehicles that currently are or recently were available for sale in the U.S. This database includes vehicles that CCC employees have physically inspected, as well as vehicles advertised for sale by dealerships or private parties. All of these sources are updated regularly.

SEARCH FOR COMPARABLES

When a valuation is created the database is searched and comparable vehicles in the area are selected. The zip code where the loss vehicle is garaged determines the starting point for the search. Comparable vehicles are similar to the loss vehicle based on relevant factors.

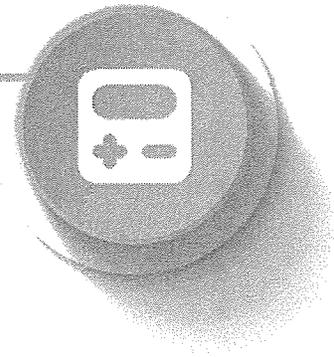


CALCULATE BASE VEHICLE VALUE

Adjustments to the price of the selected comparable vehicles are made to reflect differences in vehicle attributes, including mileage and options. Dollar adjustments are based upon market research.

Finally, the Base Vehicle Value is the weighted average of the adjusted values of the comparable vehicles based on the following factors:

- Source of the data (such as inspected versus advertised)
- Similarity (such as equipment, mileage, and year)
- Proximity to the loss vehicle's primary garage location
- Recency of information



 VEHICLE INFORMATION

VEHICLE DETAILS

Location	LAHAINA, HI 96761-2133
VIN	5TEJU62N97Z440569
Year	2007
Make	Toyota
Model	Tacoma
Trim	PreRunner
Body Style	Doublecab 128" WB Automatic
Body Type	Pickup
Engine -	
Cylinders	6
Displacement	4.0L
Fuel Type	Gasoline
Carburation	EFI
Transmission	Automatic Transmission Overdrive
Curb Weight	3810 lbs

Vehicles sold in the United States are required to have a manufacturer assigned Vehicle Identification Number(VIN). This number provides certain specifications of the vehicle.

Please review the information in the Vehicle Information Section to confirm the reported mileage and to verify that the information accurately reflects the options, additional equipment or other aspects of the loss vehicle that may impact the value.

VEHICLE ALLOWANCES

Odometer	100,672	+ 517
Options		
Cruise Control	Reported	+ 77
Auxiliary Audio Connection	Reported*	+ 83
Aluminum/Alloy Wheels	Reported	+ 153
Positraction	Reported	+ 38
Hands Free	Reported*	+ 77
Privacy Glass	Reported	+ 77
Fog Lamps	Reported	+ 75
Rear Step Bumper	Reported	+ 77
Rear Sliding Window	Reported	+ 77
Running Boards/Side Steps	Reported	+ 115

Allowances are factors influencing the value of the loss vehicle when compared to a typical vehicle. The typical vehicle is a vehicle of the same year, make, and model as the loss vehicle, including average mileage, and all standard and predominant equipment. These allowances are displayed for illustrative purposes only.

The Base Vehicle Value is calculated from the comparable vehicles with adjustments to reflect the loss vehicle configuration

Reported* Option(s) added after initial valuation

VEHICLE HISTORY SUMMARY

CCC VINguard®	1 Collision Estimate	12/03/2009
Experian AutoCheck	No Title Problem Found	

 VEHICLE INFORMATION

VEHICLE HISTORY SUMMARY

Insurance Services 3 Records Found
Organization/ National
Insurance Crime Bureau

National Highway Traffic 7 Recalls
Safety Administration

 VEHICLE INFORMATION

VEHICLE EQUIPMENT

Package 1:	Off Road	
Odometer	100,672	
Transmission	Automatic Transmission	✓
	Overdrive	✓
Power	Power Steering	✓
	Power Brakes	✓
	Power Windows	✓
	Power Locks	✓
	Power Mirrors	✓
Decor/Convenience	Air Conditioning	✓
	Tilt Wheel	✓
	Cruise Control	☐
	Intermittent Wipers	✓
	Console/Storage	✓
	Overhead Console	✓
	Keyless Entry	✓
	Telescopic Wheel	✓
Seating	Cloth Seats	✓
	Bucket Seats	✓
	Reclining/Lounge Seats	☐
Radio	AM Radio	✓
	FM Radio	✓
	Stereo	✓
	Search/Seek	✓
	CD Player	✓
	Auxiliary Audio Connection	☐
Wheels	Aluminum/Alloy Wheels	☐
Safety/Brakes	Air Bag (Driver Only)	✓
	Passenger Air Bag	✓
	Anti-lock Brakes (4)	✓
	Positraction	☐
	Hands Free	☐

To the left is the equipment of the loss vehicle that ALLSTATE INSURANCE COMPANY provided to CCC.

✓ **Standard** This equipment is included in the base configuration of the vehicle at time of purchase.

☐ **Additional** Equipment that is not Standard but was noted to be on the loss vehicle.

 VEHICLE INFORMATION

VEHICLE EQUIPMENT

Exterior/Paint/Glass	Dual Mirrors	✓
	Privacy Glass	☒
	Fog Lamps	☒
Other - Trucks	Rear Step Bumper	☒
	Rear Sliding Window	☒
	Running Boards/Side Steps	☒
	California Emissions	✓

 VEHICLE CONDITION

COMPONENT CONDITION

	Condition	Inspection Notes	Value Impact
INTERIOR			
Seats	PRIVATE OWNER	v	\$ 0
Carpets	PRIVATE OWNER	v	\$ 0
Dashboard	PRIVATE OWNER	v	\$ 0
Headliner	PRIVATE OWNER	v	\$ 0
EXTERIOR			
Sheet Metal	PRIVATE OWNER	v	\$ 0
Trim	PRIVATE OWNER	v	\$ 0
Paint	PRIVATE OWNER	v	\$ 0
Glass	PRIVATE OWNER	v	\$ 0
MECHANICAL			
Engine	PRIVATE OWNER	v	\$ 0
Transmission	PRIVATE OWNER	v	\$ 0
TIRES			
Front Tires	PRIVATE OWNER	v	\$ 0
Rear Tires	PRIVATE OWNER	v	\$ 0
Total Condition Adjustments			\$ 0

ALLSTATE INSURANCE COMPANY uses condition inspection guidelines to determine the condition of key components of the loss vehicle prior to the loss. The guidelines describe physical characteristics for these key components, for the condition selected based upon age. Inspection Notes reflect observations from the appraiser regarding the loss vehicle's condition. CCC makes dollar adjustments that reflect the impact the reported condition has on the value of the loss vehicle as compared to Private Owner condition. These dollar adjustments are based upon interviews with dealerships across the United States.

 COMPARABLE VEHICLES

Options	Loss Vehicle	Comp 1	Comp 2
Off Road	✓	x	x
Odometer	100,672	122,934	85,649
Automatic Transmission	✓	✓	✓
Overdrive	✓	✓	✓
Power Steering	✓	✓	✓
Power Brakes	✓	✓	✓
Power Windows	✓	✓	✓
Power Locks	✓	✓	✓
Power Mirrors	✓	✓	✓
Air Conditioning	✓	✓	✓
Tilt Wheel	✓	✓	✓
Cruise Control	✓	x	✓
Intermittent Wipers	✓	✓	✓
Console/Storage	✓	✓	✓
Overhead Console	✓	✓	✓
Keyless Entry	✓	✓	✓
Telescopic Wheel	✓	✓	✓
Cloth Seats	✓	✓	✓
Bucket Seats	✓	✓	✓
Reclining/Lounge Seats	✓	x	x
AM Radio	✓	✓	✓
FM Radio	✓	✓	✓
Stereo	✓	✓	✓
Search/Seek	✓	✓	✓
CD Player	✓	✓	✓
Auxiliary Audio Connection	✓	x	✓
Styled Steel Wheels	x	✓	x
Aluminum/Alloy Wheels	✓	x	✓
Drivers Side Air Bag	✓	✓	✓
Passenger Air Bag	✓	✓	✓
Anti-lock Brakes (4)	✓	✓	✓
Positraction	✓	x	x
Hands Free	✓	x	x
Traction Control	x	x	✓
Dual Mirrors	✓	✓	✓
Privacy Glass	✓	x	x
Fog Lamps	✓	x	x
Rear Step Bumper	✓	x	x
Rear Sliding Window	✓	x	x
Running Boards/Side Steps	✓	x	x

Comp 1 Updated Date: 01/09/2020
2007 Toyota Tacoma Prerunner
Doublecab 141" Wb Automatic 6 4.0l
Gasoline Efi
VIN 5TEKU72N97Z329028
Dealership Excellent Motor Group
Telephone (808) 946-8899
Source Dealer Ad
Stock # 329028
Distance from Lahaina, HI
 80 Miles - Honolulu, HI

Comp 2 Updated Date: 03/08/2020
2007 Toyota Tacoma Prerunner
Doublecab 141" Wb Automatic 6 4.0l
Gasoline Efi
VIN 5TEKU72N37Z324777
Dealership Autoland Honolulu
Telephone (808) 848-1648
Source Truecar
Stock # 12215
Distance from Lahaina, HI
 82 Miles - Honolulu, HI

Comparable vehicles used in the determination of the Base Vehicle Value are not intended to be replacement vehicles but are reflective of the market value, and may no longer be available for sale.

List Price is the sticker price of an inspected dealer vehicle and the advertised price for the advertised vehicle.

Distance is based upon a straight line between loss and comparable vehicle locations.

The Condition Adjustment sets that comparable vehicle to Private Owner condition, which the loss vehicle is also compared to in the Vehicle Condition section.

 COMPARABLE VEHICLES

Options	Loss Vehicle	Comp 1	Comp 2
California Emissions	✓	✓	✓
List Price		\$ 14,995	\$ 16,999
Adjustments:			
Package		+ \$ 918	+ \$ 918
Options		+ \$ 849	+ \$ 386
Mileage		+ \$ 1,563	- \$ 867
Condition ¹		- \$ 1,779	- \$ 1,779
Adjusted Comparable Value		\$ 16,546	\$ 15,657

 VALUATION NOTES

03/09/2020 20:36 - POADJ CHANGE REQUESTED BY: RAMOS,LIONEL

03/09/2020 20:36 - Post Valuation Adjustment entered for:

03/09/2020 20:36 - Options removed :[Bedliner,Three Stage Paint]

03/09/2020 20:36 - Options added :[Auxiliary Audio Connection,Hands Free]

03/09/2020 20:36 - Condition Comments changed after Valuation

This Market Valuation Report has been prepared exclusively for use by ALLSTATE INSURANCE COMPANY, and no other person or entity is entitled to or should rely upon this Market Valuation Report and/or any of its contents. CCC is one source of vehicle valuations, and there are other valuation sources available.

Statutes concerning vehicle value
include HRS 431:10C

SUPPLEMENTAL INFORMATION



VEHICLE HISTORY INFORMATION

VINGuard®

VINGuard® Message: VINGuard has decoded this VIN without any errors

ISO Vehicle History:

Number of times reported to ISO:	3
ISO's file number:	H0300484389
Loss date:	11/18/2009
Claim ref:	0209666870101018-04
Mileage:	0013231
ISO notified:	12/03/2009
Loss date:	02/25/2020
Phone:	4254895325
Claim ref:	0579455452
Loss date:	11/18/2009
Phone:	8008413000
Claim ref:	0209666870101018

Collision History Information:

COLLISION INCIDENT REPORTED BY GEICO ON 12/03/2009

Claim #: 0209666870101018-04 in KIHEI, HI

Repair Estimate: 1731.41 Miles: 013231

Damage Location: REAR
 UNKNOWN

SUPPLEMENTAL INFORMATION



EXPERIAN® AUTOCHECK® VEHICLE HISTORY REPORT

CCC provides ALLSTATE INSURANCE COMPANY information reported by Experian regarding the 2007 Toyota Tacoma (5TEJU62N97Z440569). This data is provided for informational purposes. Unless otherwise noted in this Valuation Detail, CCC does not adjust the value of the loss vehicle based upon this information.

LEGEND :

- ✓ No Event Found
- ⊖ Event Found
- ⊞ Information Needed

TITLE CHECK

RESULTS FOUND

Abandoned	✓	No Abandoned Record Found
Damaged	✓	No Damaged Record Found
Fire Damage	✓	No Fire Damage Record Found
Grey Market	✓	No Grey Market Record Found
Hail Damage	✓	No Hail Damage Record Found
Insurance Loss	✓	No Insurance Loss Record Found
Junk	✓	No Junk Record Found
Rebuilt	✓	No Rebuilt Record Found
Salvage	✓	No Salvage Record Found

EVENT CHECK

RESULTS FOUND

NHTSA Crash Test Vehicle	✓	No NHTSA Crash Test Vehicle Record Found
Frame Damage	✓	No Frame Damage Record Found
Major Damage Incident	✓	No Major Damage Incident Record Found
Manufacturer Buyback/Lemon	✓	No Manufacturer Buyback/Lemon Record Found
Odometer Problem	✓	No Odometer Problem Record Found
Recycled	✓	No Recycled Record Found
Water Damage	✓	No Water Damage Record Found
Salvage Auction	✓	No Salvage Auction Record Found

VEHICLE INFORMATION

RESULTS FOUND

Accident	✓	No Accident Record Found
Corrected Title	✓	No Corrected Title Record Found
Driver Education	✓	No Driver Education Record Found
Fire Damage Incident	✓	No Fire Damage Incident Record Found
Lease	✓	No Lease Record Found
Lien	✓	No Lien Record Found
Livery Use	✓	No Livery Use Record Found
Government Use	✓	No Government Use Record Found
Police Use	✓	No Police Use Record Found
Fleet	✓	No Fleet Record Found
Rental	✓	No Rental Record Found
Fleet and/or Rental	✓	No Fleet and/or Rental Record Found
Repossessed	✓	No Repossessed Record Found
Taxi use	✓	No Taxi use Record Found
Theft	✓	No Theft Record Found
Fleet and/or Lease	✓	No Fleet and/or Lease Record Found
Emissions Safety Inspection	✓	No Emissions Safety Inspection Record Found
Duplicate Title	✓	No Duplicate Title Record Found

TITLE CHECK

THIS VEHICLE CHECKS OUT

AutoCheck's result for this loss vehicle show no significant title events. When found, events often indicate automotive damage or warnings associated with the vehicle.

EVENT CHECK

THIS VEHICLE CHECKS OUT

AutoCheck's result for this loss vehicle show no historical events that indicate a significant automotive problem. These problems can indicate past previous car damage, theft, or other significant problems.

VEHICLE INFORMATION

THIS VEHICLE CHECKS OUT

AutoCheck's result for this loss vehicle show no vehicle information that indicate a significant automotive problem. These problems can indicate past previous car damage, theft, or other significant problems.

ODOMETER CHECK

THIS VEHICLE CHECKS OUT

AutoCheck's result for this loss vehicle show no indication of odometer rollback or tampering was found. AutoCheck determines odometer rollbacks by searching for records that indicate odometer readings less than a previously reported value. Other odometer events can report events of tampering, or possible odometer breakage.

SUPPLEMENTAL INFORMATION



FULL HISTORY REPORT RUN DATE: 03/10/2020

Below are the historical events for this vehicle listed in chronological order.

EVENT DATE	RESULTS FOUND	ODOMETER READING	DATA SOURCE	EVENT DETAIL
05/28/2007			Independent Source	VEHICLE MANUFACTURED AND SHIPPED TO DEALER
05/28/2007	HI		Independent Source	VEHICLE MANUFACTURED AND SHIPPED TO DEALER
07/19/2007	KIHEI, HI	12	Motor Vehicle Dept.	TITLE REGISTRATION EVENT/ RENEWAL
07/19/2007	KIHEI, HI		Motor Vehicle Dept.	TITLE REGISTRATION EVENT/ RENEWAL
05/28/2008	KIHEI, HI		Motor Vehicle Dept.	TITLE REGISTRATION EVENT/ RENEWAL
05/28/2008	KIHEI, HI		Motor Vehicle Dept.	TITLE REGISTRATION EVENT/ RENEWAL
05/29/2009	KIHEI, HI		Motor Vehicle Dept.	TITLE REGISTRATION EVENT/ RENEWAL
05/29/2009	KIHEI, HI		Motor Vehicle Dept.	TITLE REGISTRATION EVENT/ RENEWAL
06/02/2010	KIHEI, HI		Motor Vehicle Dept.	TITLE REGISTRATION EVENT/ RENEWAL
06/02/2010	KIHEI, HI		Motor Vehicle Dept.	TITLE REGISTRATION EVENT/ RENEWAL
06/09/2011	KIHEI, HI		Motor Vehicle Dept.	TITLE REGISTRATION EVENT/ RENEWAL
06/09/2011	KIHEI, HI		Motor Vehicle Dept.	TITLE REGISTRATION EVENT/ RENEWAL
06/14/2012	KIHEI, HI		Motor Vehicle Dept.	TITLE REGISTRATION EVENT/ RENEWAL
06/14/2012	KIHEI, HI		Motor Vehicle Dept.	TITLE REGISTRATION EVENT/ RENEWAL
05/28/2013	KIHEI, HI		Motor Vehicle Dept.	TITLE REGISTRATION EVENT/ RENEWAL
05/28/2013	KIHEI, HI		Motor Vehicle Dept.	TITLE REGISTRATION EVENT/ RENEWAL
05/30/2014	KIHEI, HI		Motor Vehicle Dept.	TITLE REGISTRATION EVENT/ RENEWAL
05/30/2014	KIHEI, HI		Motor Vehicle Dept.	TITLE REGISTRATION EVENT/ RENEWAL
08/27/2014	KAHULUI, HI	43213	Motor Vehicle Dept.	TITLE REGISTRATION EVENT/ RENEWAL
08/27/2014	KAHULUI, HI		Motor Vehicle Dept.	TITLE REGISTRATION EVENT/ RENEWAL
09/29/2014			Manufacturer	MANUFACTURER RECALL
10/01/2014	HI	43254	Motor Vehicle Dept.	TITLE REGISTRATION EVENT/ RENEWAL
10/01/2014	LAHAINA, HI		Motor Vehicle Dept.	TITLE REGISTRATION EVENT/ RENEWAL
06/19/2015	HI		Motor Vehicle Dept.	TITLE REGISTRATION EVENT/ RENEWAL

SUPPLEMENTAL INFORMATION

EVENT DATE	RESULTS FOUND	ODOMETER READING	DATA SOURCE	EVENT DETAIL
06/19/2015	LAHAINA, HI		Motor Vehicle Dept.	REGISTRATION EVENT/ RENEWAL
06/29/2016	HI		Motor Vehicle Dept.	TITLE
06/29/2016	LAHAINA, HI		Motor Vehicle Dept.	REGISTRATION EVENT/ RENEWAL
06/05/2017	HI		Motor Vehicle Dept.	TITLE
06/05/2017	LAHAINA, HI		Motor Vehicle Dept.	REGISTRATION EVENT/ RENEWAL
06/14/2018	HI		Motor Vehicle Dept.	TITLE
06/14/2018	LAHAINA, HI		Motor Vehicle Dept.	REGISTRATION EVENT/ RENEWAL
01/31/2019	LAHAINA, HI		Motor Vehicle Dept.	TITLE
01/31/2019	LAHAINA, HI		Motor Vehicle Dept.	REGISTRATION EVENT/ RENEWAL
06/10/2019	LAHAINA, HI		Motor Vehicle Dept.	TITLE
06/10/2019	LAHAINA, HI		Motor Vehicle Dept.	REGISTRATION EVENT/ RENEWAL

AUTOCHECK TERMS AND CONDITIONS:

Experian's Reports are compiled from multiple sources. It is not always possible for Experian to obtain complete discrepancy information on all vehicles; therefore, there may be other title brands, odometer readings or discrepancies that apply to a vehicle that are not reflected on that vehicle's Report. Experian searches data from additional sources where possible, but all discrepancies may not be reflected on the Report.

These Reports are based on information supplied to Experian by external sources believed to be reliable, BUT NO RESPONSIBILITY IS ASSUMED BY EXPERIAN OR ITS AGENTS FOR ERRORS, INACCURACIES OR OMISSIONS. THE REPORTS ARE PROVIDED STRICTLY ON AN "AS IS WHERE IS" BASIS, AND EXPERIAN FURTHER EXPRESSLY DISCLAIMS ALL WARRANTIES, EXPRESS OR IMPLIED, INCLUDING ANY IMPLIED WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE REGARDING THIS REPORT.

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Experian shall not be liable for any delay or failure to provide an accurate report if and to the extent which such delay or failure is caused by events beyond the reasonable control of Experian, including, without limitation, "acts of God", terrorism, or public enemies, labor disputes, equipment malfunctions, material or component shortages, supplier failures, embargoes, rationing, acts of local, state or national governments, or public agencies, utility or communication failures or delays, fire, earthquakes, flood, epidemics, riots and strikes.

These terms and the relationship between you and Experian shall be governed by the laws of the State of Illinois (USA) without regard to its conflict of law provisions. You and Experian agree to submit to the personal and exclusive jurisdiction of the courts located within the county of Cook, Illinois.

SUPPLEMENTAL INFORMATION



NHTSA VEHICLE RECALL

The National Highway Traffic Safety Administration has issued 7 safety related recall notices that may apply to the above valued vehicle.

NHTSA Campaign ID : 09V388000

Mfg's Report Date : OCT 05, 2009

Component : VEHICLE SPEED CONTROL:ACCELERATOR PEDAL

Potential Number Of Units Affected : 3800000

Summary : TOYOTA IS RECALLING CERTAIN MODEL YEAR 2004-2010 PASSENGER VEHICLES. THE ACCELERATOR PEDAL CAN GET STUCK IN THE WIDE OPEN POSITION DUE TO ITS BEING TRAPPED BY AN UNSECURED OR INCOMPATIBLE DRIVER'S FLOOR MAT.

Consequence : A STUCK OPEN ACCELERATOR PEDAL MAY RESULT IN VERY HIGH VEHICLE SPEEDS AND MAKE IT DIFFICULT TO STOP THE VEHICLE, WHICH COULD CAUSE A CRASH, SERIOUS INJURY OR DEATH.

Remedy : TOYOTA WILL NOTIFY OWNERS OF AFFECTED VEHICLES TO REMOVE ANY DRIVER'S FLOOR MAT AND NOT REPLACE IT WITH ANY OTHER FLOOR MAT PENDING THE DEVELOPMENT OF MODEL-SPECIFIC REMEDIES. TOYOTA WILL MAIL A SECOND NOTIFICATION TO OWNERS OF AFFECTED VEHICLES NOTIFYING THEM OF THE FREE REMEDY WHEN IT IS AVAILABLE. THE FIRST NOTICE IS EXPECTED TO BE MAILED DURING OCTOBER 2009 AND TOYOTA WILL ADVISE NHTSA OF THE ESTIMATED DATE WHEN THE REMEDY PARTS WILL BE AVAILABLE. OWNERS MAY CONTACT TOYOTA AT 1-800-331-4331, LEXUS AT 1-800-255-3987.

Notes : OWNERS MAY ALSO CONTACT THE NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION'S VEHICLE SAFETY HOTLINE AT 1-888-327-4236 (TTY 1-800-424-9153), OR GO TO [HTTP://WWW.SAFERCAR.GOV](http://www.safercar.gov) .

NHTSA Campaign ID : 13V337000

Mfg's Report Date : AUG 07, 2013

Component : SEAT BELTS

Potential Number Of Units Affected : 342,451

Summary : Toyota is recalling certain model year 2005-2010 Tacoma Access Cab vehicles manufactured September 14, 2004, through March 29, 2010; and model year 2011 Tacoma Access Cab vehicles manufactured July 1, 2010, through September 7, 2011. If the access doors are repeatedly and forcefully closed, the screws that attach the seat belt pre-tensioner to the seat belt retractor can loosen over time. If the screws loosen completely, the seat belt pre-tensioner and the retractor spring cover could detach from the seat belt retractor.

Consequence : If the seat belt pre-tensioner detaches from the seat belt assembly, the seat belt pre-tensioner will not perform as designed, increasing the risk of injury in a severe crash.

SUPPLEMENTAL INFORMATION

Remedy : Toyota will notify owners, and dealers will inspect the seat belt assemblies. Based on the inspection, the seat belt assembly will be replaced or new pre-tensioner screws will be installed with thread-locking sealant and a retractor spring cover with stopper ribs to prevent loosening of the screws. These services will be provided at no cost to the owner. The manufacturer has not yet provided a notification schedule. Owners may contact Toyota at 1-800-331-4331.

Notes : Owners may also contact the National Highway Traffic Safety Administration Vehicle Safety Hotline at 1-888-327-4236 or go to www.safercar.gov.

NHTSA Campaign ID : 14V604000

Mfg's Report Date : SEP 29, 2014

Potential Number Of Units Affected : 690,000

Summary : Toyota Motor Engineering & Manufacturing (Toyota) is recalling certain model year 2005-2011 Toyota Tacoma Pre-Runner and 4x4 vehicles manufactured September 14, 2009, to October 11, 2010. In the affected vehicles, one of the leaf springs may fracture due to stress or corrosion. While being driven, the broken leaf could move out of position and contact surrounding components including the fuel tank, possibly puncturing the tank and causing a fuel leak.

Consequence : If the fuel tank leaks fuel from being punctured, there is an increased risk of a fire

Remedy : The remedy for this recall is still under development. The recall is expected to begin November 28, 2014. Owners may contact Toyota customer service at 1-800-331-4331.

Notes : Owners may also contact the National Highway Traffic Safety Administration Vehicle Safety Hotline at 1-888-327-4236 (TTY 1-800-424-9153), or go to www.safercar.gov.

NHTSA Campaign ID : 10V036000

Mfg's Report Date : February 3, 2010

Component : EQUIPMENT

Potential Number Of Units Affected : 153,418

Summary : SOUTHEAST TOYOTA IS RECALLING CERTAIN MODEL YEAR 2005-2011 PASSENGER VEHICLES FOR FAILING TO COMPLY WITH THE REQUIREMENTS OF FEDERAL MOTOR VEHICLE SAFETY STANDARD NO. 110, "TIRE SELECTION AND RIMS." THESE VEHICLES WERE SOLD WITHOUT THE REQUISITE LOAD CARRYING CAPACITY MODIFICATION LABELS.

Consequence : A DRIVER MAY OVERLOAD A VEHICLE WHICH MAY INCREASE THE RISK OF A CRASH.

Remedy : DEALERS WILL MAIL TO CONSUMERS THE CORRECTED LABEL OR THE CUSTOMER WILL HAVE THE OPTION FOR DEALERS TO INSTALL THE LABEL FREE OF CHARGE. THE SAFETY RECALL BEGAN ON MAY 27, 2010. OWNERS MAY CONTACT SOUTHEAST TOYOTA AT 1-800-301-6859.

SUPPLEMENTAL INFORMATION

NHTSA Campaign ID : 10V035000

Potential Number Of Units Affected : 271,417

Summary : GULF STATES TOYOTA IS RECALLING CERTAIN MODEL YEAR 2005-2010 VEHICLES FOR FAILING TO COMPLY WITH THE REQUIREMENTS OF FEDERAL MOTOR VEHICLE SAFETY STANDARD NO. 110, "TIRE SELECTION AND RIMS." THESE VEHICLES WERE SOLD BETWEEN SEPTEMBER 1, 2005 AND JUNE 2, 2008 WITHOUT THE REQUISITE LOAD CARRYING CAPACITY MODIFICATION LABELS.

Consequence : THIS DOES NOT MEET THE STANDARD REQUIREMENTS.

Remedy : DEALERS WILL MAIL TO CONSUMERS THE CORRECTED LABEL OR THE CUSTOMER WILL HAVE THE OPTION FOR DEALERS TO INSTALL THE LABEL FREE OF CHARGE. DEALERS WILL ALSO CORRECT THE OWNER'S MANUAL. THE SAFETY RECALL BEGAN ON MAY 27, 2010. OWNERS MAY CONTACT GULF STATES TOYOTA AT 713-580-3300.

NHTSA Campaign ID : 14V743000

Mfg's Report Date : November 19, 2014

Component : SEATS

Potential Number Of Units Affected : 3,233

Summary : Southeast Toyota Distributors, LLC (SET) is recalling certain model year 2010-2011 Prius and Corolla, 2009-2011 Venza, 2006-2010 Avalon, 2007-2010 FJ Cruiser, 2005-2011 Sienna and Sequoia, 2006-2011 Tacoma 4x2 and 4x4, Camry, Highlander, Tundra 4x2 and 4x4, and 2007-2011 Rav4 and 4Runner. The affected vehicles may experience compression of the seat cushion which may damage the seat heater wiring.

Consequence : Damage to the seat heater wiring could cause the wires to short, increasing the risk of the seat burning and causing personal injury to the occupant.

Remedy : SET will notify owners, and dealers will disconnect the heaters with copper strand heating elements and refund the purchase price of the seat heater accessory, free of charge. The recall is expected to began in January 2015. Owners may contact SET customer service at 1-866-405-4226.

NHTSA Campaign ID : 16V396000

Mfg's Report Date : June 2, 2016

Potential Number Of Units Affected : 7,749

SUPPLEMENTAL INFORMATION

Summary : Southeast Toyota Distributors, LLC (SET) is recalling certain 2005-2011 4Runner, Highlander, Sequoia, and Sienna, 2005-2010 Avalon and Tundra, 2006-2008 Camry Solara, 2006-2010 Highlander hybrid, 2006-2011 Rav4 and Tacoma, 2007-2010 FJ Cruiser, 2007-2011 Camry hybrid, 2009-2010 Venza, 2010-2012 Prius, 1988-1990 and 2005-2010 Camry, and 1989 and 2009-2010 Corolla vehicles equipped with aftermarket accessory seat heaters with a copper strand heating element. The electrical wiring in the seat heaters may be damaged when the seat cushion is compressed.

Consequence : If damaged, the copper strand heating element may short circuit, increasing the risk of a fire.

Remedy : SET will notify owners, and dealers will disconnect the seat heaters, free of charge, and refund the purchase price of the seat heater accessory. The recall began on July 14, 2016. Owners may contact SET customer service at 1-866-405-4226. SET number for this recall is SET16B.

91-542 AWAKUMOKU ST
KAPOLEI, HI 96707
PHONE (808) 682-8770
TAX ID# 942867490

Visit us at www.copart.com
All Amounts are in USD

FINAL INVOICE

Copart Lot# 33447440 110 HI - HONOLULU
Loss Date 2/25/20
Called In 3/11/20
P/U Cleared 3/11/20
Pickup Date 3/11/20
Original Title 3/17/20
Trans Title 4/14/20
Sale Document 4/29/20
Loss Type COLLISION
Description 07 TOYT TACOMA DOU WHITE
Vehicle ID# 5TEJU62N97Z440569
License#/ST MRL382 HI
Mileage 100,674
Pickup From STUDIO AUTO BODY INC
251 LALO STREET
KAHULUI, HI 96732
(808) 871-6454

BI28 PIP190A
ALLSTATE INS.PAYMENT PROCESSOR
ALLSTATE INSURANCE CO.(WEST)
P.O. BOX 650271
DALLAS, TX 75265 0271

Claim# 000579455452-01-D
Policy# 000087269097
Loss Code CLS
Reference#
Insured ROGER SAPLA
Owner ROGER SAPLA

ADVANCE CHARGES PAID BY COPART

TEARDOWN/ESTIMATING FEE 232.00

TOTAL ADVANCE CHARGES 232.00

COPART SERVICE CHARGES

SUB LOT BILLING 250.00 SUBLLOT/AFFILIATE FEES
PIP PROGRAM CHARGE. 90.00

TOTAL COPART SERVICE CHARGES. 340.00

TOTAL DUE COPART 572.00
PROCEEDS FROM SALE 3450.00CR *Bid Raised By Internet*
PREVIOUS PAYMENTS FROM COPART. 2878.00

NET DUE COPART00

COPART PAYMENTS DETAIL

COPART CHECK# 02937140 05/05/20 2,878.00

SALE INFORMATION

Lot# 33447440 Sold To 647204 FH MOTORS
Sale Date 5/04/20 995 RIVERBOART DRIVE
Sale Amount 3450.00 LATHROP, CA 95330
ACV 16233.00 (209) 237-9535
Repair Es12692.46
Return 21.2% Item# 258 Invoice Date 5/05/20
Cert# SALVAGE CERTIFICATE Invoice Amount .00 USD
Payment From Buyer REMIT TO: COPART
4610 WESTAMERICA DRIVE
FAIRFIELD, CA 94534

Unrelated Prior Damage

08

PreRunner Doublecab 128" WB Automatic 4D P/U 6-4.0L Gasoline EFI WHITE

Oper	Description	Part Number	Qty	Extended Price \$	Labor	Paint
Subl	TEAR DOWN		1	232.00 X		
SUBTOTALS				232.00	0.0	0.0

ESTIMATE TOTALS

Category	Basis	Rate	Cost \$
Parts			0.00
Miscellaneous			232.00
Subtotal			232.00
Grand Total			232.00

PAID

FOR YOUR PROTECTION, HAWAII LAW REQUIRES YOU TO BE INFORMED THAT PRESENTING A FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT IS A CRIME PUNISHABLE BY FINES OR IMPRISONMENT, OR BOTH.

County of Maui - Department of Finance
 Division of Motor Vehicles & Licensing
 70 E. Kaahumanu Ave. Suite A-17, Kahului, HI 96732
 Phone: (808) 270-7353

TCJ MRL38219

07 TOYT TACOMA DOU WHITE



33447440 S 000579455452-01

110

CERTIFICATE OF SALVAGE

This Certificate of Salvage is evidence that the Ownership documents for the below described vehicle have been surrendered to the Division of Motor Vehicles and Licensing.

Make TOYT	Type TRUCK	Weight 4000	Date Title 07-14-07
Vehicle Identification No. 5TEJU62N97Z440569			Yr Model 2007

ISSUED TO:
 Name Allstate Insurance Company
 Address 91-542 Awakumoku Street
 City Kapolei State HI Zip 96707

Authorized DMV Representative

APR 23 2020
 Date

Know All Men by these presents:
 For value received, the undersigned hereby transfer this Certificate of Salvage and the vehicle described hereon to:

NEW OWNER(S):
 Name: _____
 LAST NAME, FIRST NAME, MI

Mailing Address:

 STREET OR P.O. BOX CITY, STATE, ZIP CODE

The said seller hereby warrants that he/she is the lawful owner of said vehicle; that it is free from all liens and encumbrances except lien* in favor of:

Name of Lien Holder: _____
 Address: _____

*If no liens exist write the words "No Exceptions" in the blank space.

That he/she has the right to sell the same as aforesaid, and that he/she will warrant and defend the title of same against the claims and demand of all persons whomsoever except lien holder noted above.

Signature of Seller _____ Printed Name of Seller _____

Signature of Joint Seller, if held in joint ownership _____ Printed Name of Joint Seller _____

_____ day of _____	State of Hawaii Notary Certification (Place Notary Seal Here)
Notary Public	Document Date _____ # of pages _____
State of _____	Notary Name _____
My Commission Expires _____	_____ Judicial Circuit
(Place Notary Seal Here)	Document Description _____
	Notary Signature _____ Date _____

County of Maui - Department of Finance
Division of Motor Vehicles & Licensing
70 E. Kaahumanu Avenue, Suite A-17, Kahului, HI 96732
Phone: (808) 270-7363

DMV, Office Use	
APR 23 2020 Date Clerk	<i>[Signature]</i> Written Initials

Transmittal of License Plate, Certificate of Title and Certificate of Registration for Vehicle Sold or Disposed of as Salvage
(THIS FORM MUST BE SUBMITTED IN DUPLICATE)

Part 1. Transmitted herewith are license plates, endorsed Certificate of Title, and the last issued Certificate of Registration for the motor vehicle described below:

License Plate Number MRL382 Make TOYT

Vehicle Identification Number 5TEJU62N97Z440569

07 TOYT TACOMA DOU WHITE



110

33447440 S 000579455452-01

Was the vehicle disposed of following a total loss insurance settlement?

Yes (Fill in Part 2) No (Fill in Part 3)

Part 2. (To be filled in by the insurance company. Insurance company must turn in license plates and certificates. Be sure that Certificate of Title is properly endorsed.)

Name of Insurance Company Austate Insurance Company

Address 91-542 AWAKUMOKU ST, KAPOLEI, HI, 96707

Name of Owner SAPLA ROGER Date of settlement 3/21/20

Disposition of Vehicle: (Check one of the following)

- The vehicle will be sold or disposed of as salvage
- The vehicle has been sold or disposed of as salvage to _____
- The vehicle was retained by insured.

Signature of Agent for Insurance Company *[Signature]* Date 04/14/2020

Name and Title of Agent Apolonia Devera, as Agent

Part 3. (To be filled in by the purchaser of the salvage vehicle)

The vehicle described above was sold and disposed of as salvage to:

Name of Purchaser _____

Address _____ Date of Purchase _____

Signature of Purchaser _____ Date _____

INSTRUCTIONS

The law prohibits the use of license plates, certificate of title and/or registration on any vehicle other than, that for which the plates and certificates were issued.

When an inoperable vehicle is sold or otherwise disposed of as salvage, the law requires the purchaser or new owner to turn in to the Division of Motor Vehicles & Licensing, the vehicle's license plates, endorsed Certificate of Title, and Certificate of Registration. If the vehicle is being sold or disposed of as the result of a total loss insurance settlement, this form must be completed by an authorized agent of the insurance company.

The plates and certificates must be surrendered within ten days from the date the salvage vehicle was sold or disposed of, or in the case of an insurance settlement, ten days from the date of settlement.

If the salvage vehicle is resold after its plates and certificates have been submitted, the new buyer must be issued a notarized Bill of Sale.

If the salvage vehicle is rebuilt and becomes operable, the vehicle may be registered again. The owner must provide a notarized Bill of Sale, currently issued Certificate of Safety Inspection (the issue date must be after the salvage repair is completed) and a Certification from a Licensed Salvage Repair Dealer.

808 TOWING

ROAD SERVICE

"You blow it, we tow it!"

P.O. Box 1597 KAHULUI, HI 96733-1597

877-HELP 877-4357



Like us on

808towing.com

808towing@gmail.com

DATE: 3-3-20	TIME: 12:22	A.M. P.M.	REQUESTED BY: ROGER
NAME: STUDIO BODY Co		PHONE: 808-8242	
ADDRESS: ROGER SAPLA			
CITY: KAHULUI		STATE: HI	ZIP: 96732
LOCATION OF VEHICLE: 4720 MAALO ST		COLOR: WHITE	OPERATOR: [Signature]
YEAR, MAKE, MODEL: 07 TOYOTA Tacoma			
STATE: HI	LIC PLATE: MRL-382	VIN: 5TEJG62W91Z440369	MILEAGE: 106612
EN ROUTE MILEAGE:	REASON TOW / SERVICE:	<input type="checkbox"/> REPOSSESSION	AAA OVERAGE
TOTAL	<input type="checkbox"/> ABANDONED <input type="checkbox"/> FUEL DELIVERY <input type="checkbox"/> ROLL OVER	<input type="checkbox"/> STOLEN CAR	ADMIN FEE
TOW MILEAGE:	<input checked="" type="checkbox"/> ACCIDENT <input type="checkbox"/> JUMP START	<input type="checkbox"/> TIRE CHANGE	AFTER HOURS
TOTAL	<input type="checkbox"/> BATT REPL <input type="checkbox"/> JUNK <input type="checkbox"/> LOCK OUT <input type="checkbox"/> TOW EXCHANGE	<input type="checkbox"/> UNAUTHORIZED	BATTERY
	<input type="checkbox"/> BREAK DOWN <input type="checkbox"/> MOTORCYCLE <input type="checkbox"/> EQUIPMENT <input type="checkbox"/> M.P.D. <input type="checkbox"/> WINCH-OUT		CALL OUT
TYPE: TOW/SERVICE	PER ORDER OF:	SPECIAL EQUIPMENT:	EN ROUTE CHARGE
<input checked="" type="checkbox"/> FLAT BED	<input checked="" type="checkbox"/> DEALER	<input type="checkbox"/> CRANE / HELICOPTER	FIRST TOW CHARGE 175.00
<input type="checkbox"/> HEAVY DUTY	<input type="checkbox"/> INSURANCE CO.	<input type="checkbox"/> DOLLY	FUEL
<input type="checkbox"/> MEDIUM DUTY	<input type="checkbox"/> MAUI POLICE DEPT.	<input type="checkbox"/> DUAL LINE WINCHING	HOOK UP
<input type="checkbox"/> SERVICE VEHICLE	<input type="checkbox"/> OWNER	<input type="checkbox"/> SINGLE LINE WINCHING	JUMP START
<input type="checkbox"/> WHEEL LIFT	<input type="checkbox"/> P.L.A.C. AGENCY	<input type="checkbox"/> SNATCH BLOCKS	JUNK FEE
	<input type="checkbox"/> ROADSIDE ASSIST.		LABOR CHARGE
	<input type="checkbox"/> TOWING CONTRACT		LOCK OUT
VEHICLE TOWED TO:	FIRST TOW: 251 LALO ST - KAHULUI		
VEHICLE TOWED TO:	SECOND TOW:		
STORAGE FROM:	TO _____ DAYS @ \$ _____		
PAID BY:	<input type="checkbox"/> CASH <input type="checkbox"/> CC CARD # _____		
	<input type="checkbox"/> CHECK # _____ EXP. DATE: _____ C/V# _____		
	<input type="checkbox"/> P.O. / AUTH. / CLAIM # _____		
POLICE REPORT #	OPERATOR'S SIGNATURE: [Signature]		
	TRUCK # 10	DATE: 3-3-20	
	AUTHORIZED SIGNATURE: [Signature]	DATE:	
	VEHICLE RELEASED TO:	DATE:	
			RETURN/ DEAD HEAD
			ROAD CLEANUP
			SECOND TOW CHARGE
			SPECIAL EQUIPMENT
			STORAGE
			TIRE CHANGE
			SUB-TOTAL
			CREDIT CARD FEE
			TAX 5.02
			TOTAL 140.02

39075

WAIVER: I hereby release from liability and responsibility Said Company/ or Employees for any loss or damage to vehicles or articles incurred during tow, winch or while in storage.

X Y Knater Sato

STUDIO AUTO BODY INC.

251 Lalo St. H1, Kahului, HI 96732

Phone: (808) 871-6454

FAX: (808) 871-6484

Workfile ID: 3eba3a4c

PartsShare: 5MkJw4

Federal ID: 37-1691090

Unrelated Prior Damage

RO Number: 2108

(Information Only)

Written By:

Insured: SAPLA, ROGER

Policy #:

Claim #:

Type of Loss:

Date of Loss:

Days to Repair: 0

Point of Impact: 06 Rear

Owner:

SAPLA, ROGER

(808) 276-8242 Cell

Inspection Location:

STUDIO AUTO BODY INC.

251 Lalo St. H1

Kahului, HI 96732

Repair Facility

(808) 871-6454 Business

Insurance Company:

VEHICLE

2007 TOYO Tacoma PreRunner Doublecab 128" WB Automatic 4D P/U 6-4.0L Gasoline EFI WHITE

VIN: STEJU62N97Z440569

Interior Color:

Mileage In: 100,673

Vehicle Out:

License: MRL382

Exterior Color: WHITE

Mileage Out:

State: HI

Production Date: 5/2007

Condition: Good

Job #:

TRANSMISSION

Automatic Transmission

Overdrive

POWER

Power Steering

Power Brakes

Power Windows

Power Locks

Power Mirrors

DECOR

Dual Mirrors

Console/Storage

Overhead Console

CONVENIENCE

Air Conditioning

Intermittent Wipers

Tilt Wheel

Keyless Entry

Telescopic Wheel

RADIO

AM Radio

FM Radio

Stereo

Search/Seek

CD Player

SAFETY

Drivers Side Air Bag

Passenger Air Bag

Anti-Lock Brakes (4)

SEATS

Cloth Seats

Bucket Seats

WHEELS

Styled Steel Wheels

PAINT

Clear Coat Paint

OTHER

California Emissions

Unrelated Prior Damage

RO Number: 2108

2007 TOYO Tacoma PreRunner Doublecab 128" WB Automatic 4D P/U 6-4.0L Gasoline EFI WHITE

Line	Oper	Description	Part Number	Qty	Extended Price \$	Labor	Paint
1	#	Subl	TEAR DOWN	1	232.00 X		
2	#	Subl	Tow, 808 Towing	1	140.62 X		
SUBTOTALS					372.62	0.0	0.0

ESTIMATE TOTALS

Category	Basis	Rate	Cost \$
Parts			0.00
Miscellaneous			372.62
Subtotal			372.62
Grand Total			372.62

FOR YOUR PROTECTION, HAWAII LAW REQUIRES YOU TO BE INFORMED THAT PRESENTING A FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT IS A CRIME PUNISHABLE BY FINES OR IMPRISONMENT, OR BOTH.

Unrelated Prior Damage

RO Number: 2108

2007 TOYO Tacoma PreRunner Doublecab 128" WB Automatic 4D P/U 6-4.0L Gasoline EFI WHITE

Estimate based on MOTOR CRASH ESTIMATING GUIDE and potentially other third party sources of data. Unless otherwise noted, (a) all items are derived from the Guide ARM8512, CCC Data Date 03/17/2020, and potentially other third party sources of data; and (b) the parts presented are OEM-parts. OEM parts are manufactured by or for the vehicle's Original Equipment Manufacturer (OEM) according to OEM's specifications for U.S. distribution. OEM parts are available at OE/Vehicle dealerships or the specified supplier. OPT OEM (Optional OEM) or ALT OEM (Alternative OEM) parts are OEM parts that may be provided by or through alternate sources other than the OEM vehicle dealerships with discounted pricing. Asterisk (*) or Double Asterisk (**) indicates that the parts and/or labor data provided by third party sources of data may have been modified or may have come from an alternate data source. Tilde sign (~) items indicate MOTOR Not-Included Labor operations. The symbol (<>) indicates the refinish operation WILL NOT be performed as a separate procedure from the other panels in the estimate. Non-Original Equipment Manufacturer aftermarket parts are described as Non OEM, A/M or NAGS. Used parts are described as LKQ, RCY, or USED. Reconditioned parts are described as Recond. Recored parts are described as Recore. NAGS Part Numbers and Benchmark Prices are provided by National Auto Glass Specifications. Labor operation times listed on the line with the NAGS information are MOTOR suggested labor operation times. NAGS labor operation times are not included. Pound sign (#) items indicate manual entries.

Some 2020 vehicles contain minor changes from the previous year. For those vehicles, prior to receiving updated data from the vehicle manufacturer, labor and parts data from the previous year may be used. The CCC ONE estimator has a list of applicable vehicles. Parts numbers and prices should be confirmed with the local dealership.

The following is a list of additional abbreviations or symbols that may be used to describe work to be done or parts to be repaired or replaced:

SYMBOLS FOLLOWING PART PRICE:

m=MOTOR Mechanical component. s=MOTOR Structural component. T=Miscellaneous Taxed charge category. X=Miscellaneous Non-Taxed charge category.

SYMBOLS FOLLOWING LABOR:

D=Diagnostic labor category. E=Electrical labor category. F=Frame labor category. G=Glass labor category. M=Mechanical labor category. S=Structural labor category. (numbers) 1 through 4=User Defined Labor Categories.

OTHER SYMBOLS AND ABBREVIATIONS:

Adj.=Adjacent. Algn.=Align. ALU=Aluminum. A/M=Aftermarket part. Blnd=Blend. BOR=Boron steel. CAPA=Certified Automotive Parts Association. D&R=Disconnect and Reconnect. HSS=High Strength Steel. HYD=Hydroformed Steel. Incl.=Included. LKQ=Like Kind and Quality. LT=Left. MAG=Magnesium. Non-Adj.=Non Adjacent. NSF=NSF International Certified Part. O/H=Overhaul. Qty=Quantity. Refn=Refinish. Repl=Replace. R&I=Remove and Install. R&R=Remove and Replace. Rpr=Repair. RT=Right. SAS=Sandwiched Steel. Sect=Section. Subl=Sublet. UHS=Ultra High Strength Steel. N=Note(s) associated with the estimate line.

CCC ONE Estimating - A product of CCC Information Services Inc.

The following is a list of abbreviations that may be used in CCC ONE Estimating that are not part of the MOTOR CRASH ESTIMATING GUIDE:

BAR=Bureau of Automotive Repair. EPA=Environmental Protection Agency. NHTSA= National Highway Transportation and Safety Administration. PDR=Paintless Dent Repair. VIN=Vehicle Identification Number.

19309

Date: 04/14/2020

Buyer Name and Address	Co-E
ROGER A SAPLA	KRIS
936 KUIALUA PL	936 K
LAHAINA HI 96761-2133	LAHA
Email: rsapla55@yahoo.com	Email
Phone: 808-276-8242	Phor
Cell: 808-276-8242	Cell:

THIS BUYER'S ORDER IS FOR THE FOLLOWING NEW

Year	Make	Model
2020	TOYOTA	TACOMA 4X4
TRADE IN RECORD 1		
YR	MAKE	MODEL
N/A	N/A	N/A
COLOR	TRIM	MILE/
N/A		N/A
VIN		
N/A		
TITLE NO.	PLATE NO.	EXP. I
N/A		N/A
OWNER		LOAN #
N/A		
		PHON



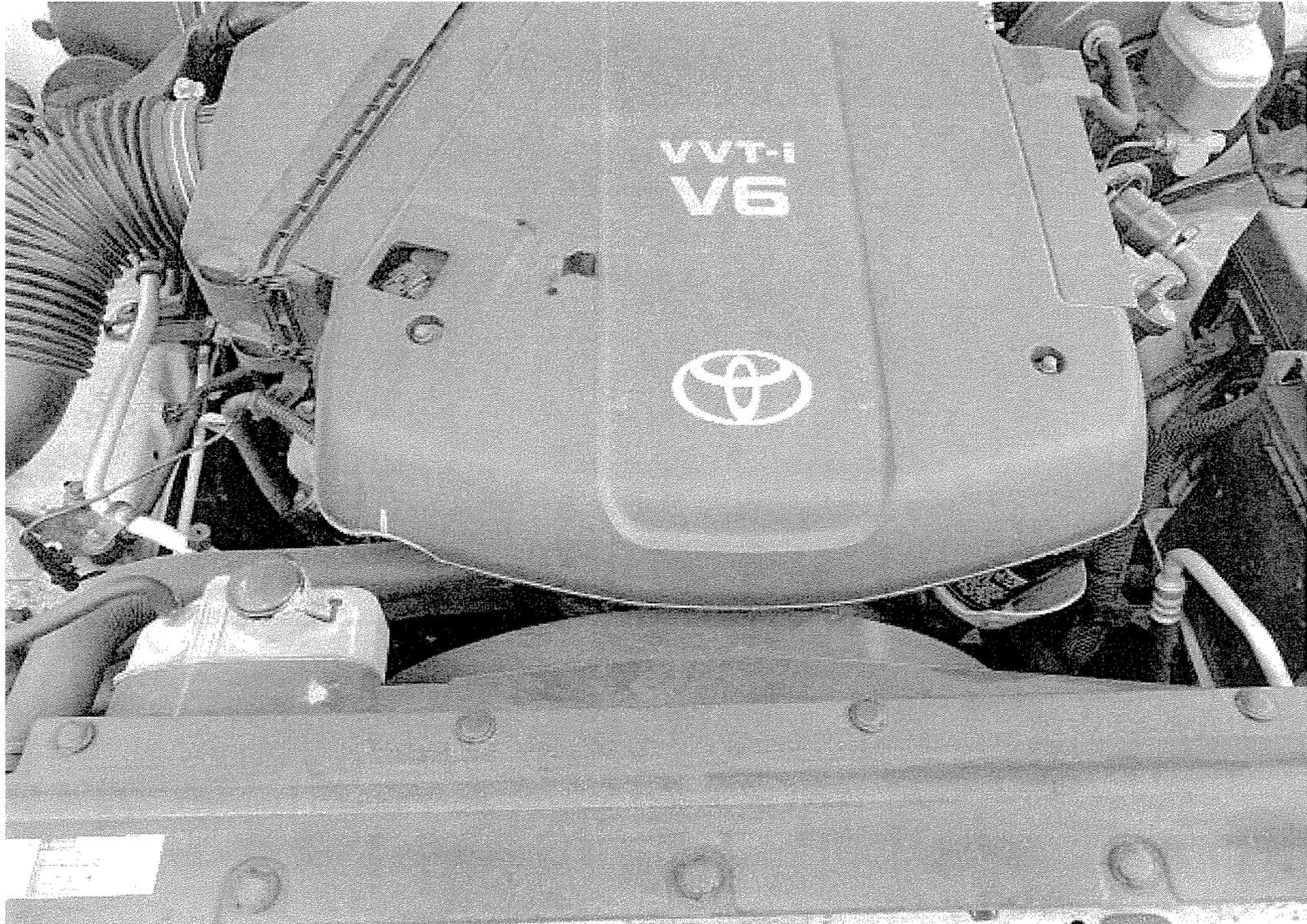


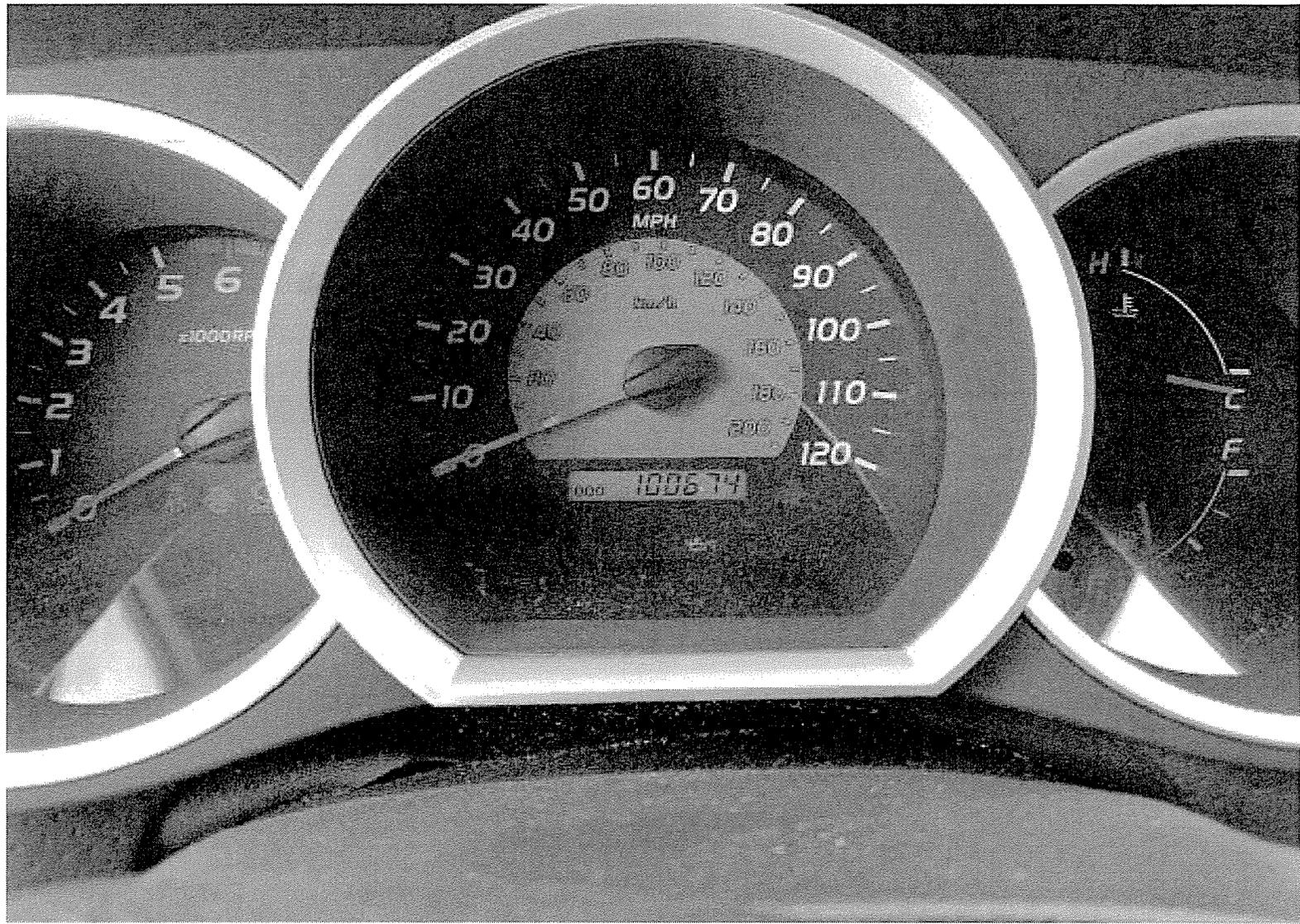












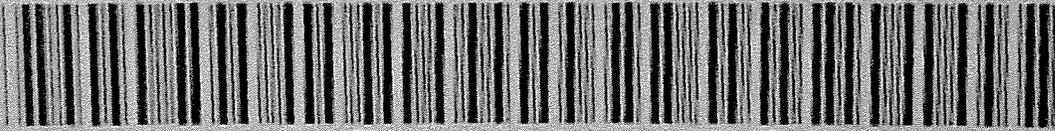
4 5 6
1000RPM

10 20 30 40 50 60 70 80 90 100 110 120
MPH
1000 18986.74

H
F



MFD. BY: TOYOTA MOTOR MANUFACTURING CALIFORNIA INC.
DATE 05 / 07 GVWR: 2426 KG (5350 LBS)
GAWR: FR. 1249 KG (2755 LBS) WITH P265/70R16 TIRES
16X7JJ RIMS AT 200 KPA (29 PSI) COLD.
RR. 1410 KG (3110 LBS) WITH P265/70R16 TIRES
16X7JJ RIMS AT 220 KPA (32 PSI) COLD.
THIS VEHICLE CONFORMS TO ALL APPLICABLE FEDERAL MOTOR
VEHICLE SAFETY AND THEFT PREVENTION STANDARDS IN
EFFECT ON THE DATE OF MANUFACTURE SHOWN ABOVE.
5TEJU62N97Z440569 GRN265L PRADKA MADE IN U.S.A.



C/TR 040/FL13 A/TM A04B/A750E TRUCK NO. 779





