

**CITY OF GAUTIER
MEMORANDUM**

To: Samantha Abell, City Manager
From: Patty Huffman, Grants & Projects Manager
Through: Chandra Nicholson, Director of Economic Development and Planning
Date: April 28, 2014
Subject: Letter of Support for Gautier Mullet & Music Fest's Tourism Development Grant Application

REQUEST:

The Economic Development and Planning Department requests City Council's support for the Gautier Mullet & Music Fest Committee's Tourism Development Grant application to the Mississippi Development Authority's (MDA) Tourism Division.

BACKGROUND:

The Tourism Development Grant Program, in its second year, supports small community events which promote Mississippi's heritage, culture and unique assets. The program encourages regional partnerships in the development and promotion of Mississippi's historic and diverse story. The primary use of grant funds is for advertising and marketing for events that attract overnight visitation. The Gautier Music & Mullet Fest received a \$4,000 grant last year. Requests for funding are limited to three consecutive years per event, and organizations must reapply each year.

DISCUSSION:

Events that occur from July 1, 2014 - June 30, 2015 are eligible. Events must have local support and provide a letter of support with the application from either the local tourism entity or unit of local government. The maximum award amount is \$5,000 per event. If funded, payment will be made after the event and upon full completion of the Project Clearance Report.

RECOMMENDATION:

The Economic Development and Planning Department recommends that City Council support the Gautier Mullet & Music Fest Committee's grant application to MDA for a Tourism Development Grant for the 2014 Gautier Mullet & Music Fest scheduled for October 2014.

The City Council may:

1. authorize submission of the attached letter of support for the Gautier Mullet & Music Fest's Tourism Development Grant application;
2. authorize submission of the attached letter of support with revisions; or
3. decline to offer a letter of support.

ATTACHMENT(S):

Letter of Support for Gautier Mullet & Music Fest Grant Application (draft)

*Mayor
Gordon F. Gollott*

*City of Gautier
Gautier, Mississippi*

*City Manager
Samantha D. Abell*

*City Clerk
Cynthia Russell*

*Council
At Large Mary F. Martin
Ward 1 Johnny Jones
Ward 2 Hurley Ray Guillotte
Ward 3 Casey C. Vaughan
Ward 4 Charles "Rusty"
Anderson*



*3330 Highway 90
Gautier, MS 39553
Phone: (228) 497-8000
Fax: (228) 497-8028
Email: gautier@gautier-ms.gov*

April 25, 2014

MDA Tourism Division
Tourism Development Grant
Post Office Box 849
Jackson, Mississippi 39205-0849
Attn: Leigh Portwood

Re: Gautier Mullet & Music Fest Grant application

Dear Ms. Portwood:

On behalf of the Gautier City Council, I would like to offer this letter of support for the Gautier Mullet & Music Fest's Tourism Development Grant application for the 2015 fiscal year. For many years, the Gautier City Council has approved a financial contribution to the festival as well as in-kind support services. This year's event marks the 24th Annual Gautier Mullet & Music Fest. The festival is one of our city's signature events and combines music, art contests, crafts, and games in a fun-filled two day event.

The event is held on the 3rd weekend of October and is scheduled this year for October 18th and 19th. Attendees enjoy the free admission, free parking, and free children's events as well as live music on two stages. The theme of the festival is "Celebrating Gautier as Nature's Playground". If awarded, grant funds would be used to expand the reach of the festival's current marketing and advertising to bring more tourists and people from outside the local area to the festival. The festival received \$4,000 in grant funding last year and benefitted from the increased advertising.

The City of Gautier and the Gautier Mullet & Music Fest Committee would appreciate consideration of this grant request again this year. Advertising and marketing provided through this grant funding will enable even more people to enjoy our community's hospitality.

Sincerely,

Gordon T. Gollott
Mayor

There came for consideration of the Mayor and Members of the Council of the City of Gautier, Mississippi, the following:

ORDER NUMBER 105-2014

IT IS HEREBY ORDERED by the Mayor and Members of the Council of the City of Gautier, Mississippi, that the City of Gautier is hereby authorized to accept a Samsung ST72 Digital Camera, S/N A6V6CN0D2001G4 from Secure Networks, LLC.

IT IS FURTHER ORDERED that the Samsung ST72 Digital Camera is in the best interest of the City of Gautier.

IT IS FURTHER ORDERED that the City Manager or City Clerk is authorized to execute any and all documents necessary.

Motion was made by **Councilwoman Martin**, seconded by **Councilman Jones** and the following vote was recorded:

AYES: Gordon Gollott
 Mary Martin
 Johnny Jones
 Hurley Ray Guillotte
 Casey Vaughan
 Rusty Anderson
 Adam Colledge

NAYS: None

MAYOR

ATTEST:

CITY CLERK

Passed and Adopted by Mayor and Members of the Council of the City of Gautier, Mississippi, at the meeting of May 6, 2014.

**CITY OF GAUTIER
MEMORANDUM**

To: Samantha Abell, City Manager
From: Cindy Steen, Purchasing Agent
Through: Cindy Russell, City Clerk
Date: April 24, 2014
Subject: Donation of a Samsung ST72 Digital Camera

REQUEST:

City council authorization is requested to accept a donation of a Samsung ST72 Digital Camera, S/N A6V6CN0D2001G4 from Secure Networks LLC. This camera will be used in the best interest of the City.

RECOMMENDATION:

The City Council May:

- 1) May accept donation of a Samsung Digital Camera ST72.
- 2) Not to accept donation of a Samsung Digital Camera ST72.

SAMSUNG

www.samsung.com

SAMSUNG ELECTRONICS CO., LTD.



B BLACK

S/N A6V6CN0D2001G4



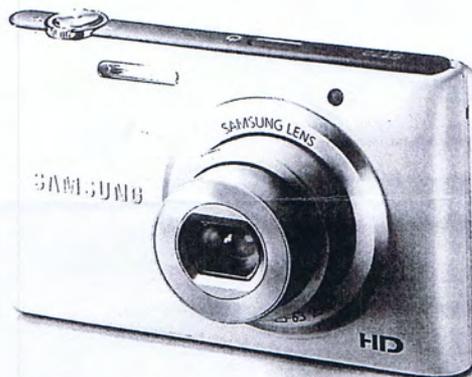
MADE IN CHINA/HERGESTELLT IN CHINA
FABRIQUE EN CHINA/HECHO EN CHINA
Сделано в Китае
EC-ST722ZBPBA

AD68-05308A

SAMSUNG

Samsung
ST72

16.2MP | 25mm | F2.5 | 5x



There came for consideration of the Mayor and Members of the Council of the City of Gautier, Mississippi, the following:

ORDER NUMBER 106-2014

IT IS HEREBY ORDERED by the Mayor and Members of the Council of the City of Gautier, Mississippi, that the City of Gautier is hereby authorized to declare a 2008 Ford Crown Victoria VIN# 2FAFP71V38X179615 surplus and remove from the Police Department inventory.

IT IS FURTHER ORDERED that the vehicle is of no value to the City of Gautier.

IT IS FURTHER ORDERED that the City Manager or City Clerk is authorized to execute any and all documents necessary.

Motion was made by **Councilwoman Martin**, seconded by **Councilman Jones** and the following vote was recorded:

AYES: Gordon Gollott
 Mary Martin
 Johnny Jones
 Hurley Ray Guillotte
 Casey Vaughan
 Rusty Anderson
 Adam Colledge

NAYS: None

MAYOR

ATTEST:

CITY CLERK

Passed and Adopted by Mayor and Members of the Council of the City of Gautier, Mississippi, at the meeting of May 6, 2014.

**CITY OF GAUTIER
MEMORANDUM**

To: Samantha Abell, City Manager
From: Cindy Steen, Purchasing Agent
Through: Cindy Russell City Clerk
Date: April 25th, 2014
Subject: Surplus Items

REQUEST:

City Council authorization is requested for the City of Gautier to declare and remove a 2008 Ford Crown Victoria from the Police Departments inventory.

BACKGROUND:

This vehicle was involved in an accident and declared to be totaled by the City's insurance company. This vehicle will be of no further use to the City of Gautier.

2008 Ford Crown Victoria 2FAFP71V38X179615

RECOMMENDATION:

Based on the attached surplus item, City staff recommends that City Council authorize declaring these vehicle to be surplus and removed from city inventory.

ATTACHMENT(S):

Email from Danny Selover requesting car to be removed

Cindy Steen

From: Danny Selover <dselover@gautier-ms.gov>
Sent: Wednesday, April 09, 2014 10:39 AM
To: csteen@gautier-ms.gov
Cc: crussell@gautier-ms.gov; vbarnett@gautier-ms.gov; delbin@gautier-ms.gov
Subject: POLICE UNIT 19615

Cindy,

The unit below needs to be taken off the police departments inventory. This vehicle was totaled. Thank you
2008 Ford Crown Victoria 2FAFP71V38X179615 19615



9800 Fredericksburg Road
San Antonio, Texas 78288

CITY OF GAUTIER
3330 HWY 90
GAUTIER MS 39553

April 8, 2014

Reference: Total Loss Information

Dear Sir or Madam,

I am writing regarding the claim referenced below.

Policyholder:	William S Des Jardins
Reference #:	002539814-19
Date of loss:	February 4, 2014
Location of loss:	Gautier, Mississippi

As discussed, here is your FedEx shipping label and sample title.

You may submit correspondence or questions to me. My contact information is:

Address:	ATTN: Salvage Recovery P.O. Box 659474 San Antonio, TX 78265 For overnight, use address above to ATTN: Salvage Recovery
Fax:	1-800-531-8669
Phone:	1-800-531-8722

Sincerely,

Cathleen M Nogueron
Claims-Total Loss/Salvage
USAA Casualty Insurance Company
PO Box 33490
San Antonio, TX 78265
Phone: 1-800-531-8722
Fax Phone: 1-800-531-8669

Enc: Total Loss/Salvage - FedEx Label
Total Loss/Salvage - MS Sample Title

Venice Barnett

From: USAA <USAA.Web.Services@customermail.usaa.com>
Sent: Tuesday, April 08, 2014 10:01 AM
To: VBARNETT@GAUTIER-MS.GOV
Subject: Regarding the USAA Automobile claim on 02/04/2014
Attachments: General Correspondence-S200.pdf

To ensure delivery to your inbox, please add USAA.Web.Services@customermail.usaa.com to your address book.



Regarding the USAA Automobile claim on 02/04/2014

| Privacy Promise |

USAA Reference Number: 002539814 - 19

Dear Sir or Madam,

CONFIDENTIALITY NOTICE

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No other method of delivery or communication of the attached communication will be utilized or attempted by USAA unless you specifically request an additional delivery method. If you wish to receive this communication by an additional delivery method, please call 1-800-531-USAA (8722)

USAA, 9800 Fredericksburg Road, San Antonio, Texas, 78288

[Privacy Promise](#)

Please do not reply to this e-mail. To contact USAA, visit our secure [contact page](#).

54577-0813

Veneice Barnett

From: Danny Selover <dselover@gautier-ms.gov>
Sent: Monday, March 31, 2014 2:13 PM
To: vbarnett@gautier-ms.gov
Attachments: 2011 push bumper and id cases.pdf; digital ally camera quote.pdf

Neice,
The camera in Gores crashed car, unit 19615 was a digital ally DVM500 serial number 01F440E3. HERE IS A QUOTE ON A SIMILAR CAMERA ALONG WITH A QUOTE FOR A PUSH BUMPER THAT WAS DESTROYED. I do believe everything else was salvageable

USAA CARLY CARTER ~~EQUIPMENT~~
(800) 531-8722 EXT. 74739 ~~DAMAGED IN UNIT~~
\$ 7,779.⁰⁰ PAYMENT

USAA WILL PURCHASE THE VEHICLE

(5-7 BUSINESS DAYS
FOR CHECK TO GET HERE)

IF RENTAL NEEDED WOULD BE PAID UNTIL 4/11/14.
NEED TO RELOCATE VEHICLE WILL BE PICKED-UP.
TODAY ^{WILL} CALL FIRST.

MAIL TITLE TO:
SIGN NAME AS IS ON BUSINESS CARD WITH
TITLE
INCLUDE BUSINESS CARD.
OVERNIGHT TITLE

MAIL DIRECT

03292.1B0R7.JSS840138267.01.01.68
CITY OF GAUTIER
3330 HIGHWAY 90
ATTN VENEICE BARNETT
GAUTIER, MS 395535124

USAA Casualty Insurance Company
PO Box 33490
San Antonio, TX 78265

INVOICE #: USAA-14980025319414215200
USAA #: 002539814
LOSS RPT #: 19
LOSS DATE: 02/04/2014
POLICYHOLDER:
WILLIAM S DES JARDINS

LOB: AUT
CLAIMS REP: 09019-16
CHECK #: 0007940825
CHECK DATE: 04/22/2014

EXPLANATION OF PAYMENT	TOTAL PAYMENT AMOUNT
TOTAL LOSS Payment under Property Damage Liability Coverage CITY OF GAUTIER, 2008 FORD CROWN VICTORIA 4D POLICE	***7,779.00

18433-1013

93868-1209

FACE OF DOCUMENT HAS A COLORED BACKGROUND. THE BACK CONTAINS AN ARTIFICIAL WATERMARK. HOLD AT ANGLE TO VIEW.



USAA Casualty Insurance Company
PO Box 33490
San Antonio, TX 78265

0007940825

DATE
04/22/2014

CHECK AMOUNT
***7,779.00

PAY **Seven Thousand Seven Hundred Seventy-Nine and 00/100 s**

TO CITY OF GAUTIER
THE
ORDER
OF:

USAA #: 002539814 / LR #: 19

NATURE OF PAYMENT:
TOTAL LOSS Payment under Property Damage Liability Coverage CITY OF GAUTIER, 2008 FORD CROWN VICTORIA 4D POLICE
BANK OF AMERICA - HARTFORD, CT

VOID 180 DAYS FROM ISSUE DATE

Joe Roberts Jr
AUTHORIZED SIGNATURE

Venice Barnett

From: USAA <USAA.Web.Services@customermail.usaa.com>
Sent: Tuesday, April 08, 2014 10:01 AM
To: VBARNETT@GAUTIER-MS.GOV
Subject: Regarding the USAA Automobile claim on 02/04/2014
Attachments: General Correspondence-S200.pdf

To ensure delivery to your inbox, please add USAA.Web.Services@customermail.usaa.com to your address book.



**Regarding the USAA
Automobile claim on
02/04/2014**

| Privacy Promise |

USAA Reference Number: 002539814 - 19

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USAA, 9800 Fredericksburg Road, San Antonio, Texas, 78288

[Privacy Promise](#)

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54577-0813



9800 Fredericksburg Road
San Antonio, Texas 78288

CITY OF GAUTIER
3330 HWY 90
GAUTIER MS 39553

April 8, 2014

Reference: Total Loss Information

Dear Sir or Madam,

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Phone:	1-800-531-8722

Sincerely,

Cathleen M Nogueron
Claims-Total Loss/Salvage
USAA Casualty Insurance Company
PO Box 33490
San Antonio, TX 78265
Phone: 1-800-531-8722
Fax Phone: 1-800-531-8669

Enc: Total Loss/Salvage - FedEx Label
Total Loss/Salvage - MS Sample Title

Venice Barnett

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Sent: Monday, March 31, 2014 2:13 PM
To: vbarnett@gautier-ms.gov
Attachments: 2011 push bumper and id cases.pdf; digital ally camera quote.pdf

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USAA CARLY CARTER ~~EQUIPMENT~~
(800) 531-8722 EXT. 74739 DAMAGED IN UNIT
\$ 7,779⁰⁰ PAYMENT

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(5-7 BUSINESS DAYS FOR CHECK TO GET HERE) IF RENTAL NEEDED WOULD BE PAID UNTIL 4/11/14,
NEED TO RELOCATE VEHICLE WILL BE PICKED-UP
TODAY ^{WILL} CALL FIRST.

MAIL TITLE TO:
SIGN NAME AS IS ON BUSINESS CARD WITH
TITLE
INCLUDE BUSINESS CARD.
OVERNIGHT TITLE

Veneice Barnett

From: Heather Hunter <heather.Hunter@oldnationalins.com>
Sent: Wednesday, February 26, 2014 1:25 PM
To: vbarnett@gautier-ms.gov
Cc: jpugh@gautier-ms.gov; Vicki Smith (Vicki.Smith@foxeverett.com)
Subject: 14-001445 City of Gautier

Hi Veneice, I wanted to let you know that I received a call back from Carly at USAA, claimant's insurance carrier and believe it or not, they have accepted liability on this case. I am really surprised cause when I talked to her last week, she said we were clearly at fault for hitting the rear of their insured's vehicle. She said today that she looked over this more and said their driver should've yielded to the right and not the left to our vehicle.

I had given her your# but she said it just kept ringing, I gave her your email as well

Jason, I also gave her your # also to get her in touch with Veneice.

Good news for us. Hoping they will reimburse you guys directly for the damages to City of Gautiers unit.

Thanks.

Heather Hunter
Claims Specialist
JWF Specialty Company/Old National Insurance
PO Box 40996
Indianapolis IN 46240
Phone#317-706-9824
Fax# 317-706-9924
heather.hunter@oldnationalins.com

Veneice Barnett

From: USAACLAIMS16826 <USAACLAIMS16826@usaa.com>
Sent: Wednesday, February 26, 2014 1:29 PM
To: VBARNETT@GAUTIER-MS.GOV
Subject: *DO NOT CHANGE SUBJECT FIELD* Confidential: Davis, Carly (PLF1822) - MR. WILLIAM DES JARDINS # 253 98 14 L/R # 19DOL: 02/04/2014

United Services Automobile Association

Ref: Davis, Carly (PLF1822) - MR. WILLIAM DES JARDINS # 253 98 14 L/R # 19DOL: 02/04/2014

We value your communication and are committed to keeping your information secure and confidential.
To ensure delivery: Reply only from this message and do not change the subject field.
To ensure privacy: Refrain from sending personal, medical, or financial information.

Ms. Barnett,

Thank you for your assistance today. If there is anything else you need please let me know. My contact is listed below for your reference.

Carly Carter

United Services Automobile Association
800-531-8722 ext: 4-4365

Venice Barnett

From: Heather Hunter <heather.Hunter@oldnationalins.com>
Sent: Thursday, February 20, 2014 8:08 AM
To: 'vbarnett@gautier-ms.gov'
Cc: Vicki Smith (Vicki.Smith@foxeverett.com)
Subject: RE: 14-001445 City of Gautier vehicle/2008 Ford CRV Vin#79615/PHOTOS/DRIVER BILLY GORE

It appears that I am leaning toward denial out right against claimant driver. I have talked with our driver Billy Gore and I believe they are trying to track down a witness that was on scene and claimant has a duty to yield to an emergency vehicle with lights/sirens activated and appears that all other vehicles did yield except for her.

I will wait to see if USAA send over subrogation demand and we'll proceed from there.

Thanks.

From: Venice Barnett [<mailto:vbarnett@gautier-ms.gov>]
Sent: Wednesday, February 19, 2014 4:28 PM
To: Heather Hunter
Subject: RE: 14-001445 City of Gautier vehicle/2008 Ford CRV Vin#79615/PHOTOS/DRIVER BILLY GORE

Part 2 and USAA Insurance Contact information for Claims:

#USAA (8722)
Phone: (210) 531-8722 or 1 (800) 531-8722
Mailing address: USAA (Claims Service)
P.O. Box 33490
San Antonio, TX 78265
Fax: 1 (800) 531-8669

Venice A. Barnett
Human Resources Generalist
City of Gautier
3330 Highway 90
Gautier, MS 39553
P: (228) 497-8000 Ext. 308
F: (228) 497-8028
Email: vbarnett@gautier-ms.gov
Website: www.gautier-ms.gov

From: Heather Hunter [<mailto:heather.Hunter@oldnationalins.com>]
Sent: Wednesday, February 19, 2014 6:45 AM
To: 'vbarnett@gautier-ms.gov'
Subject: RE: 14-001445 City of Gautier vehicle/2008 Ford CRV Vin#79615/PHOTOS/DRIVER BILLY GORE

Perfect. Thanks.

From: Venice Barnett [<mailto:vbarnett@gautier-ms.gov>]

Sent: Tuesday, February 18, 2014 5:28 PM

To: Heather Hunter

Subject: RE: 14-001445 City of Gautier vehicle/2008 Ford CRV Vin#79615/PHOTOS/DRIVER BILLY GORE

I will get these done for you tomorrow. Is that okay?

Venice A. Barnett

Human Resources Generalist

City of Gautier

3330 Highway 90

Gautier, MS 39553

P: (228) 497-8000 Ext. 308

F: (228) 497-8028

Email: vbarnett@gautier-ms.gov

Website: www.gautier-ms.gov

From: Heather Hunter [<mailto:heather.Hunter@oldnationalins.com>]

Sent: Tuesday, February 18, 2014 10:17 AM

To: vbarnett@gautier-ms.gov

Subject: 14-001445 City of Gautier vehicle/2008 Ford CRV Vin#79615/PHOTOS/DRIVER BILLY GORE

Hi Venice, could you guys send us photos of this above noted vehicle?

Thanks.

Heather Hunter

Claims Specialist

JWF Specialty Company/Old National Insurance

PO Box 40996

Indianapolis IN 46240

Phone#317-706-9824

Fax# 317-706-9924

heather.hunter@oldnationalins.com

Veneice Barnett

From: Heather Hunter <heather.Hunter@oldnationalins.com>
Sent: Friday, February 07, 2014 11:29 AM
To: 'vbarnett@gautier-ms.gov'
Subject: RE: MNA434909024/ City of Gautier 2/5/14 APD loss

So no coverage?

From: Veneice Barnett [<mailto:vbarnett@gautier-ms.gov>]
Sent: Friday, February 07, 2014 12:27 PM
To: Heather Hunter
Cc: Vicki Smith
Subject: RE: MNA434909024/ City of Gautier 2/5/14 APD loss

Thank is correct.

Veneice A. Barnett
Human Resources Generalist
City of Gautier
3330 Highway 90
Gautier, MS 39553
P: (228) 497-8000 Ext. 308
F: (228) 497-8028
Email: vbarnett@gautier-ms.gov
Website: www.gautier-ms.gov

From: Heather Hunter [<mailto:heather.Hunter@oldnationalins.com>]
Sent: Friday, February 07, 2014 10:49 AM
To: Vicki Smith (Vicki.Smith@foxeverett.com)
Cc: vbarnett@gautier-ms.gov
Subject: FW: MNA434909024/ City of Gautier 2/5/14 APD loss

Hi Vicki, I am the adjuster assigned to this claim. Claim#14-001445 involving City of Gautier driver, Billy Gore.

I have looked at the vehicle schedule and I am showing that this vehicle the 2008 Ford CRV Vin#79615 has Liability only? Is that correct. If so, we will leave claim open in case claimant tries to make a claim against us down the road.

Thanks.

From: Blair R. Libby
Sent: Thursday, February 06, 2014 3:07 PM
To: 'Vicki Smith'; Heather Hunter
Cc: Seth Graber
Subject: RE: MNA434909024/ City of Gautier 2/5/14 APD loss

Thanks. Ms. Hunter will attend to this.

Blair Libby, Liability Claims Manager
JWF Specialty Company/ Old National Insurance
600 East 96th Street, Ste. 425 | Indianapolis, IN 46240
P.O. Box 40996 | Indianapolis, IN 46240-0996

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From: Vicki Smith [<mailto:Vicki.Smith@foxeverett.com>]
Sent: Thursday, February 06, 2014 12:49 PM
To: Blair R. Libby
Cc: Vicki Smith
Subject: MNA434909024 City of Gautier

Hi Blair,

Attached is a new loss notice for City of Gautier. Please advise adjuster's name/contact information and claim number when assigned.

Also, I will resume the claim duties for Fox Everett.

Traci is following up on the open claims before they are turned back over to me however you may want to mark your file that I will be the contact from this point forward.

Thanks,

Vicki



Vicki Smith
CL Account Manager/Claim Manager

Vicki.Smith@foxeverett.com

12260 Intraplex Parkway direct line: (228) 897-6753
Gulfport, MS 39503 direct fax: (601) 607-5953
New Orleans: (504) 274-1513

525 St. Charles Ave., Suite 320
New Orleans, LA 70130
<http://www.foxeverett.com>



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**City of Gautier
ACCIDENT REPORT OF PROPERTY DAMAGE**

Today's Date: 02-04-14 Date of Damage: 02-04-14

PERSONAL INFORMATION

Last Name: Gore First Name: Billy MI: W
 Street Address: 7108 KNOLLWOOD City/State: Biloxi MS Zip Code:
 Mailing Address: S/A/A City/State: S/A/A Zip Code:
 Home #: - Mobile #: 228-282-4475 Email: Fax #:

DAMAGE QUESTIONNAIRE

(Please Attach photos, reports and provide witness information if applicable.)

Person Notified: Cooksey Date Notified: 02-04-14 Time: 2044 AM PM Any Witnesses: Yes No

Name of Witness: Street Address: City: State:

Home #: Mobile #: Email: Fax #:

Property Damaged: (type, model, etc.)
VIN# 2FAPP71V38X179615
FORD CROWN VICTORIA Property Owner: CITY OF GAUTIER Home #: Mobile #:

Owner's Mailing Address: City: State: Zip Code:

Location which Damage or Accident Occurred: Date of Accident/Damage: Time: Personal Injuries

GAUTIER VANLEAVE NEAR HIGH SCHOOL DRIVE 02-04-14 1929 AM PM Yes No

What were you doing when the damage occurred? Time Work Day Began:

OFFICER GORE WAS RESPONDING TO AN EMERGENCY CALL 1800 PM AM PM

Describe the damage in detail. (Describe the events which resulted in damage. What happened and how it happened? Name only objects or substances involved and tell how they were involved. Give full details on all factors which led or contributed to the accident or exposure.)

OFFICER GORE WAS RESPONDING TO AN EMERGENCY CALL. A CIVILIAN VEHICLE YIELDED IMPROPERLY TO BLUE LIGHTS + SIREN BY PULLING LEFT INTO THE CENTER TURN LANE AND SWERVED BACK INTO THE PASSING LANE CAUSING COLLISION.

Describe Damage(s): Estimated Amount of Damages: (Please attach a written estimate of damage(s) from an accredited source.)

CRASHED FRONT END \$ liability only

Submitted By: D. Welton Date: 02-04-14

FOR OFFICE USE ONLY

Department Head's Signature: [Signature] Date: 2/6/2014

City Manager's Signature: Samantha D. Abell Date: 2/10/14

Claim Processed By: [Signature] Date: 2/16/2014

(NOTE: This form is to be processed by the City Manager's Office within 24 hours of the incident.)

[Signature]
HR DIRECTOR

GAUTIER POLICE DEPARTMENT

Call Number: 2014020125

	Date	Time	Location Address Information
Received	2/04/14	19:28:31	VALLYWOOD
Dispatched	2/04/14	19:29:18	GAUTIER
Enroute	2/04/14	19:29:54	
Arrived	2/04/14	19:29:25	Call Reported From: Telephone: (228) 497-2486
Under Control			VALLYWOOD
Completed			86
			Third Party:

Signal	S1	ACCIDENT
Reference Signal	S1	ACCIDENT
Actual Signal	S1	ACCIDENT

Extra Phone 1:		Extra Phone 2:	
Citations Issued	<input type="checkbox"/>	Weapon How Received:O	License No: Created: New

DISPOSITIONS/NOTIFIEDS

DISPOSITION: CRASH REPT

DISPOSITION: REPORT

NOTIFIED: EMS

Notes:

2012001190 02/04/2014 19:28:31: 2012001190 02/04/2014 19:27:49: unit involved
 2013001619 02/04/2014 19:38:47: collision depot enroute for police car
 2013001619 02/04/2014 19:39:02: collision will remain on top of list per pd 12
 2013001619 02/04/2014 19:39:19: all pro per owners req... 1028 jhy289

Name:	Eqp. No.:	ID Number	Party	Dispatched	Enroute	Arrived	Completed
SAWYER, DON	234	2012001190	R				
SAWYER, DON	234	2012001190	D				
WELTON, DERRICK	12	2010000024	A	19:29:18		19:29:25	20:33:48
MARTIN, BILL	71	2010000094	B	19:29:51	19:29:54	19:29:55	20:33:46
ACADIAN AMBULANCE 1,	A1	2010000064	M	19:34:34	19:34:35	19:47:16	20:33:43
DENNIS, LETRANCE	236	2013001619	Z				
COLLISION DEPOT- 228-238-9455,	CD	2010000291	Z	19:46:23	19:46:28	20:32:35	20:33:34
ALL-PRO TOWING,	APT	2010000055	Z	19:46:26	19:46:29	20:32:37	20:33:49

STATE OF MISSISSIPPI
UNIFORM CRASH REPORT

Agency Number

3 0 0 5

Agency Case Number

2 0 1 4 0 2 0 4 3 0

Page

0 1

of

0 7

Agency Name

PASCAGOULA POLICE DEPT

G1. County

3 0

G2. Status Code

C P U

G3. Reported Date (MM/DD/YYYY)

0 2 / 0 4 / 2 0 1 4

G4. Reported Time (2400)

1 9 3 5

Arrival Time (2400)

1 9 5 9

10-24 Time (2400)

2 0 5 5

G6. Vehicles

0 2

G7. Killed

0 0

G8. Injured

0 2

G9. Address Number

G10. Street Name

G A U T I E R V A N C L E A V E R D

G11. Hwy/County Road #

G12. Trafficflow Direction

N E
 S W

G13. Int.

Y
 N

G14. Distance

1 0 0 . 0 0

G15. Direction

F N E
 S W

G16. Intersecting Street Name

R O L L I N G M E A D O W S R D

G17. Int. Hwy/County Road #

G18. City Name

P A S C A G O U L A

G19. Latitude

N 3 0 2 4 . 0 8 7

G20. Longitude

W 0 8 8 3 9 . 1 6 4

Crash with OMV in Road

- Rear end slow or stop
- Rear end turn
- Left turn same roadway
- Left turn cross traffic
- Right turn cross traffic
- Head on
- Sideswipe
- Angle
- Hit and run

Non-Crash in Road

- Overturn
- Jackknife
- Fell from vehicle
- Other

Crash of MV in Road with

- Pedestrian
- Parked Vehicle
- Train
- Bicyclist
- Deer
- Animal (other than deer)

Fixed Object

- Bridge/Culvert
- Embankment/Ditch/Curb
- Guardrail/Median Barrier
- Tree
- Utility pole/light support
- Other fixed object
- Sign Post
- Signal standard

Non-Fixed Object

- Building/Other Structure
- Maint. Equip. - Not Moving
- Maint. Equip. - Moving
- Other non-fixed object

G22. Crash Location

- Roadway
- Off-Roadway
- Median
- Roadside
- Shoulder
- Parking Lot
- Gate

None

- Four-way Inter
- T - Intersection
- Crossover
- Driveway
- Five-point or more
- Off Ramp
- On Ramp
- Path/Trail
- RR Xing
- Traffic Circle/Round
- Y - Intersection

City Street

- State Highway
- U.S. Highway
- County Road
- Parking Lot/Private Drive
- Interstate
- Off Road
- State Park

- Daylight
- Dark-Lit
- Dark-Unlit
- Dawn
- Dusk

Dry

- Wet
- Water
- Sand/Mud/Dirt/Oil/Gravel
- Ice
- Slush
- Snow

G27. Weather Condition (2)

- Clear
- Rain
- Cloudy
- High winds
- Blown Debris
- Fog/Smog/Smoke
- Sleet/Hail
- Snow

G28. Workzone Relationship

- Not Workzone Related
- Within Construction Zone
- Advance Warning Area

G29. Workzone Type (2)

- None
- Intermittent or Moving Work
- Lane Closure
- Lane Shift/Crossover
- Shoulder/Median Work
- Utility

WITNESS(ES)

G30. First Name

M

Last Name

G38. First Name

M

Last Name

G31. Address

G32. Phone Number

G39. Address

G40. Phone Number

G33. City

G34. State

G35. Zip Code

G41. City

G42. State

G43. Zip Code

G36. Sex M F

G37. Age

G44. Sex M F

G45. Age

G48. Badge Number

1 1 5

G47. Investigating Officer Name (Please Print)

David Sanabria

G48. Officer Signature

David Sanabria

G49. Reviewing Badge Number

4 2 6 0

G50. Reviewing Officer Initials

S D

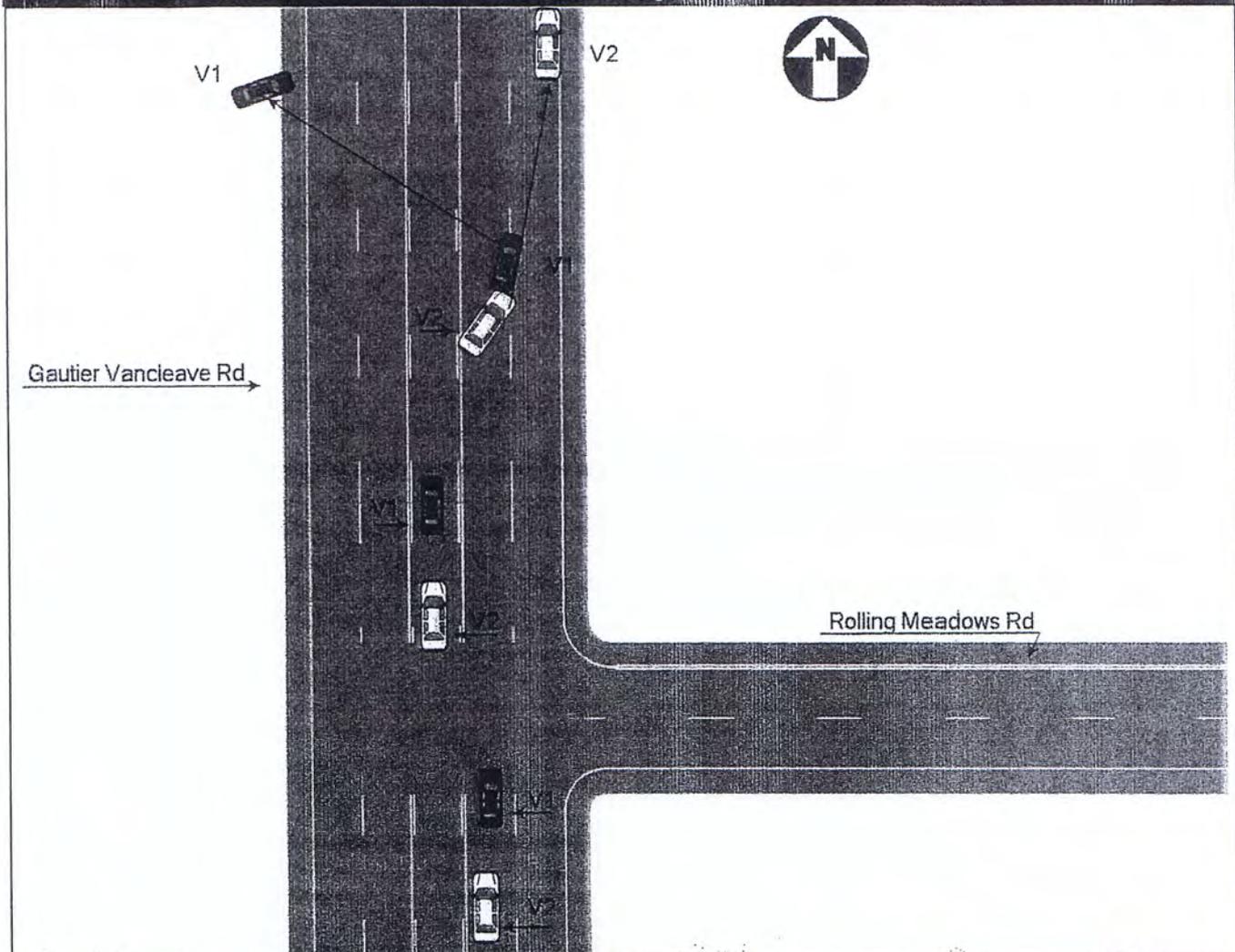
G51. Photos Taken

Y N

G52. Photographer and Badge #

DAVID SANABRIA 115

N1. Collision Diagram



N2. Collision Narrative

V1 STATED SHE WAS IN THE LEFT HAND LANE GOING NORTH ON GAUTIER VANCLEAVE RD NEAR ROLLING MEADOWS RD. V1 STATED SHE SUDDENLY SAW BLUE LIGHTS FROM A POLICE CAR BEHIND HER. V1 SAID SHE TRIED TO MERGE INTO THE RIGHT HAND LANE BUT WAS UNABLE TO DUE TO TRAFFIC. V1 STATED SHE THEN MERGED INTO THE CENTER TURN LANE. V1 STATED THE POLICE VEHICLE ALSO MERGED INTO THE CENTER LANE AT THE SAME TIME AND STRUCK V1 IN THE REAR.

V2 STATED HE WAS GOING NORTH IN HIS PATROL CAR WITH BLUE LIGHTS AND SIRENS ON IN THE LEFT HAND LANE. V2 STATED HE WAS APPROACHING V1 IN THE LEFT HAND LANE. V2 STATED VEHICLES IN THE RIGHT HAND LANE YIELDED AND THE RIGHT HAND LANE WAS CLEAR FOR V1 TO MERGE INTO THE RIGHT LANE. V2 STATED HE THEN ATTEMPTED TO PASS V1 IN THE CENTER TURN LANE. V2 SAID V1 ALSO MERGED INTO THE CENTER TURN LANE IN FRONT OF HIM. V2 STATED HE APPLIED HIS BRAKES TO AVOID HITTING V1 AND TURNED RIGHT BACK INTO THE LEFT HAND LANE. V2 SAID V1 DID THE SAME. V2 STATED HE TRIED TO AVOID HITTING V1 AGAIN BY TRYING TO TURN INTO THE RIGHT HAND LANE BUT WAS UNABLE TO AND STRUCK V1 IN THE REAR.

PHOTOS OF THE ACCIDENT WERE TAKEN AT THE SCENE, BUT DUE TO THE FOG AND GLARE OF LIGHTS FROM VEHICLE TRAFFIC THE PHOTO'S ARE NOT CLEAR

P1. Person Type Driver Pedestrian Bicyclist Skater Other non-motorist Train Engineer Hit and Run Driver LE

P2. Driver License# 800902612 P3. State MS

P4. Driver's License Class Regular Operator Regular Operator A B C Motorcycle Class 0 (U.S. only)

P5. DOB (MM/DD/YYYY) 03 / 04 / 1963

P6. First Name CHRISTINA M.I. C Last Name DEJARDINS

P7. Address 1704 SEACREST DR P8. Phone Number 2282090470

P9. City GAUTIER P10. State MS P11. Zip Code 39553

P12. DL Status Valid Suspended - DUI No license Learner Permit Expired Improper DL Suspended Other

P13. Sex M F

P14. Race White Black Hispanic Other

P15. Position Left Center Right

P16. Offense Not Transported Police Hearse EMS Private Vehicle Obviously Intoxicated Physical Impairment Affected by Exhaust Fumes Using Drugs - Impaired Using Drugs - Not Impaired Pending Lab Results Unknown Entering/Crossing Roadway Walking/running/playing/cycling Working Pushing vehicle Approaching/leaving vehicle Playing/working on vehicle Standing

P17. EMS Agency Code P18. Medical Facility Code

P19. Non-Motorist Action No Defects Apparent Unknown Hit and Run Drinking - Not impaired Drinking - Impaired Fell Asleep/Fainted/Fatigue Obviously Intoxicated Physical Impairment Affected by Exhaust Fumes Using Drugs - Impaired Using Drugs - Not Impaired Pending Lab Results Unknown Entering/Crossing Roadway Walking/running/playing/cycling Working Pushing vehicle Approaching/leaving vehicle Playing/working on vehicle Standing

P20. Driver's License Class No Apparent Improper Driving Failed to Yield Right of Way Following Too Closely Speed Too Fast For Conditions Driving Under The Influence Animal on Roadway Faulty Equipment Exceeded Lawful Speed Improper Passing/Overtaking Made Improper Turn Left of Center Failure to keep proper lane/Run off road Avoidance Drove on Wrong Side of Road Fatigued/Asleep Illegally Crossing Median Improper Lane Change Lying and/or illegally in roadway Not Visible (Dark Clothing) Operating Defective Equipment Passed Stop Sign Pedestrian Actions Ran Red Light Roadway Defects Visibility Obstructed Improper Backing See Crash Description

P21. Safety Equip. Shoulder & Lap Belt None Lap Belt Automated Restraint Shoulder Belt Child Safety Seat Helmet

P22. Injury None Complaint of Pain Moderate Life Threatening Killed Not Partially Totally

P23. Extricated N Y

P24. Alcohol Test Information None Blood Breath Serum Urine

P25. Drug Test Information None Blood Urine Serum Urine

P26. Cellular Phone In Use? Y N

Occupant

C0. Vehicle # 01 C1. First Name DYLAN M Last Name DESJARDINS

C2. Address Same as Person # 1704 SEACREST DR

C3. Address Same as Person # 1704 SEACREST DR

C4. City GAUTIER C5. State MS Unborn Child

C6. Sex M F White Black Hispanic Other

C7. Age 16 C8. Marital Status M Y N O Y N

C9. Offense Not Transported Police Hearse EMS Private Vehicle Obviously Intoxicated Physical Impairment Affected by Exhaust Fumes Using Drugs - Impaired Using Drugs - Not Impaired Pending Lab Results Unknown Entering/Crossing Roadway Walking/running/playing/cycling Working Pushing vehicle Approaching/leaving vehicle Playing/working on vehicle Standing

C10. EMS Agency Code C11. Medical Facility Code

C12. Driver's License Class Front-Driver Front-Middle Front-right 2nd-left 2nd-middle 2nd-right 3rd-left 3rd-middle 3rd-right Sleeper of Truck Cab Encl. Pass./Cargo Area Unencl. Pass./Cargo Area Riding on Exterior Towed Vhcl./Trailer

C13. Safety Equip. Shoulder and Lap Belt None Lap Belt Automated Restraint Shoulder Belt Child Safety Seat Helmet

C14. Injury None Life Threatening Complaint of Pain Moderate Killed Deployed - Front Deployed - Side Deployed - Both Not Deployed No Airbag

Occupant

C0. Vehicle # 01 C1. First Name MADISON M Last Name CREEL

C2. Address Same as Person # 1906 WOODVILLE LN

C3. Address Same as Person # 1906 WOODVILLE LN

C4. City GAUTIER C5. State MS Unborn Child

C6. Sex M F White Black Hispanic Other

C7. Age 15 C8. Marital Status M Y N O Y N

C9. Offense Not Transported Police Hearse EMS Private Vehicle Obviously Intoxicated Physical Impairment Affected by Exhaust Fumes Using Drugs - Impaired Using Drugs - Not Impaired Pending Lab Results Unknown Entering/Crossing Roadway Walking/running/playing/cycling Working Pushing vehicle Approaching/leaving vehicle Playing/working on vehicle Standing

C10. EMS Agency Code C11. Medical Facility Code

C12. Driver's License Class Front-Driver Front-Middle Front-right 2nd-left 2nd-middle 2nd-right 3rd-left 3rd-middle 3rd-right Sleeper of Truck Cab Encl. Pass./Cargo Area Unencl. Pass./Cargo Area Riding on Exterior Towed Vhcl./Trailer

C13. Safety Equip. Shoulder and Lap Belt None Lap Belt Automated Restraint Shoulder Belt Child Safety Seat Helmet

C14. Injury None Life Threatening Complaint of Pain Moderate Killed Deployed - Front Deployed - Side Deployed - Both Not Deployed No Airbag

