



Pole 4744974E

Mountain View Dr

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Google earth



St Light Pole 4744974E

Mountain View Dr

Mureau Rd

Google earth

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34°09'09.08" N 118°40'49.49" W elev 951 ft

Eye alt 1640 ft

1989



*** DAMAGE REPORT**

POLES OR STRUCTURES STRUCK BY VEHICLES

Claim W/O _____ Function _____ Index # _____

Thomas Guide Pg _____ Quadrant _____ Trouble Order # 43103

Latitude ° ' " N SAP Order # 901474075-0010

Longitude ° ' " W District/Grid 635 THOUSAND OAKS

Report requested by Law Department

Date of Occurrence 01/20/2015 Time _____

Location of Occurrence N/E CORNER OF MOUNTAIN VIEW DR, CALABASAS District THOUSAND OAKS

STREET ADDRESS, CITY

Nearest Cross Street MUREAU RD

Registered Owner of Vehicle See Police Report

FULL NAME(S)

Address of Owner See Police Report, ... Telephone Number _____

STREET ADDRESS CITY, STATE, ZIP CODE

Driver of Vehicle See Police Report Age _____

FULL NAME

Address of Driver _____ Telephone Number _____

STREET ADDRESS CITY, STATE, ZIP CODE

Did Driver or Owner of Vehicle Have Insurance? _____ Name of Insurance Carrier See Police Report

Insurance Carrier Address See Police Report, ... Policy Number See Police Report

Occupants Of Vehicle

NAME	STREET ADDRESS, CITY, STATE, ZIP	DRIVER	PASS.	INJURED	FATAL
1. <u>See Police Report, ...</u>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. <u>See Police Report, ...</u>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. <u>See Police Report, ...</u>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. <u>See Police Report, ...</u>	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Make of Vehicle See Police Report Year _____ Body Type _____ License# _____

Was Occurrence Investigated by Police? Yes

Estimated Cost of Repairing

Which Police Dept.? CHP Damage to Company Facilities \$ \$5000.00

Report No. 01-20-15-9580-1935-16523 CHP PH# (818) 888-0980

Describe Damage to Vehicle See Police Report

Pole No. 4744974E Height 30 Date Set 03/19/2010 Kind of Pole EC Vis. Strips No

Does this Pole Contain both Transmission and Distribution Facilities? _____

Name of Circuit SIENNA Voltage 16KV # of Wires on Pole 2

Damage to Pole BROKEN

Damage to Arms BROKEN

Damage to Wires NA

Damage to Company Telephone NA

Combination _____ Name of Joint Owner NA

Distance from Edge of Pavement to Pole 18 IN

***IN CASE OF ANY INJURY TO PERSON OR SUBSTANTIAL DAMAGE
IMMEDIATELY NOTIFY THE ENERGY CONTROL CENTER BY TELEPHONE**

Distance From Shoulder to Pole NO SHOULDER

Was Pole Behind Curb? Yes

Location of Pole with Respect to Intersection MOUNTAIN GATE E/S 10' N/O MUREAU

Direction Vehicle was Traveling _____ Estimated Speed, If Known _____

Distance Vehicle Traveled After Leaving Pavement Before Striking Pole SEE PR

Distance Vehicle Traveled After Striking Pole SEE PR

Weather Conditions DARK, FOG

IMPORTANT — Make Sketch — Indicate north direction with relation to sketch.

Take photographs of all struck poles or structures, including pictures showing their relation to roadway.
On back of photos indicate street names and direction photos were taken.

Name of Person Taking Photos OSENDORF

Statement of Facts — State details for which no questions appear on this form.
If Company property is other than a pole, describe in space below the property damaged.

CALLED TO RESPOND TO CAR HIT POLE. FOUND STREETLIGHT ON GROUND. POLICE HAD LEFT THE SCENE AND VEHICLE WAS GONE PRIOR TO MY ARRIVAL

State Source of Information for This Report SEE POLICE REPORT

Witness Other Than Occupants Of Either Vehicle

List below any witnesses other than driver or occupants of vehicle:

Name, Street Address, City, State, Zip Code

Phone Number

1. SEE POLICE REPORT, ... _____ -

2. SEE POLICE REPORT, ... _____ -

3. SEE POLICE REPORT, ... _____ -

4. SEE POLICE REPORT, ... _____ -

Account Number Covering Work in Progress at the Time of This Accident (Same as Payroll Charge) 901474075-0010

Does This Account Pertain to Plant Construction, or Other _____

Date of Report 01/20/2015 Investigated By _____

Energy Control Center Notified — Prepared By OSENDOJR PAX 805 8568149

Hour _____ Supervisor MACDONALD PAX _____

Date _____ Dept. or Dist THOUSAND OAKS

Dept. Head _____

Distribution Repair Order

Information:

CAD ID: GO 012015-00729 Incident Date: 01//20//2015 Time: 23:42
Structure No: 4744974E RO Date: 01//20//2015 Time: 23:42
Reported by: Osendorf, Jody Radio No: 9552 Cell Number: (805) 8568149
Problem: Car Hit Pole Cause: Damaged/Broken Pole
Circuit: SIENNA Code 16418 Sub: VALDEZ
Location: N/E CORNER OF MOUNTAIN VIEW DR, CALABASAS
Access: Street
Seq No: 43103 Foreman: _____ Radio No: _____ Cell Number: _____
Duration: 45 Crew Size: 3 Crews Needed: 1 Crew Type: DISTRIBUTION
Enviromental Release? No Enviromental Other? No District Notified? No
Tree Crew Needed? No Grounding Needed for Tree Crew? No

Load Off (Individual or Downstream):

1 SL

Other Departments:

TeleComm Transmission Other Utility Other _____

Equipment Needed:

<input type="checkbox"/> Double/Tub Bucket	<input checked="" type="checkbox"/> Arrowboard	<input type="checkbox"/> Flatbed	<input type="checkbox"/> EasyHauler
<input checked="" type="checkbox"/> Y2K	<input type="checkbox"/> Ped Control	<input type="checkbox"/> Snow Cat	<input type="checkbox"/> Fork Lift
<input type="checkbox"/> Auger Truck	<input type="checkbox"/> P/L Dolly	<input type="checkbox"/> Air Ops	<input type="checkbox"/> Power Dolly
<input type="checkbox"/> UG Van	<input type="checkbox"/> P/L Pole Dolly	<input type="checkbox"/> Four Wheel Drive	<input type="checkbox"/> Crane

Material:

1-Cobra Drop Glass 200 watt Material Code - 10118441

of Attachments- 2

Remarks:(Status of Line, Access Instructions, Special Instructions)

CAR HIT STREETLIGHT . CONDUCTOR SAFE AND INSTALLED HH OVER BASE.