

Transcript of Ms Dawn Sung's Nov. 18 4:06p text with picture of notice follows:

Thank you!!! I'm hoping that both exits from White Birch Ridge will be cleared out so we can have a better view of oncoming traffic. Again thank you 🙏 Dawn Sung



Tom Failla
Tree Warden
Town of Weston, CT

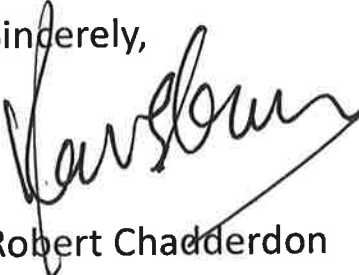
November 21, 2024

Re: Accident White Birch Road/White Birch Ridge 11/13/24

A recent motor vehicle accident that occurred at the T-intersection of White Birch Ridge and White Birch Road has prompted a suggested removal of a large oak tree at the north corner of White Birch Ridge.

As a resident of White Birch Ridge since 1955, I am not aware of one instance of a traffic incident or accident at this intersection. It has served consistently as a Weston Public School bus stop and as a U.S. Postal Service delivery location during all of these years. Residents of White Birch Ridge, delivery trucks, and service vehicles enter and exit regularly throughout each day, as they have for decades, without any issues. The tree is regularly maintained at my expense to insure its health and safety as part of my general tree service property management. I spend considerable time outdoors on my property and have never heard cars honking or screeching tires that would indicate signs of traffic irregularities. The site lines from the intersection are entirely adequate for responsible drivers to be able to safely observe and navigate oncoming traffic. All intersections require proceeding with caution and paying close attention to the surroundings. Coming to a full stop and yielding to avoid oncoming vehicles is part of the responsibility of being a safe driver. Negligence, distraction and/or inattention cause

accidents, as was the case in this instance where a driver's failure to give the right of way resulted in a collision. Clearly, the tree is not the problem.

Sincerely,

Robert Chadderton

Cc: W. Glenn Major

NOTICE OF TREE REMOVAL

This shade tree, the property of the Town of Weston will be ordered removed by me ten (10) days following this date or thereafter, and is posted in accordance with Section 23-59, Chapter 451, of the Connecticut General Statutes or as thereafter amended. Any Person or organizations objecting to such removal may appeal to me in writing before the ten (10) day period.

Posted this 18 day of NOV. 2024

Signature J. T. Failla

Tree Warden - Town of Weston
56 Norfield Road Weston, CT 06883
(203) 331-6035 - treewarden@westonct.gov

Reason for Removal:

- Dead Tree
- Hazardous tree with risk to public safety including the following issues:
Leaning - Decay - Storm Damage - Rot - Uprooted - Hollow - Public Nuisance - Broken Limbs
Line of Sight Issue - Girdled - Vandalism - Dropping Litter/Materials - Struck by Vehicle
- Insect and/or Disease damage or infestation; Explain _____
- Co-Dominant or Weak union/crotch; Multi-Stem
- Property owner request to remove tree(s) in Town Right of Way
- Replacement tree(s) planned for area - Tree Planting
- Utility request for removal of tree(s) due to conflict with poles/wires
- Construction improvements and modifications to area
- Other Police Chief Request



CONNECTICUT UNIFORM POLICE CRASH REPORT

Number of Motor Vehicles: 2
Automobiles, Motorcycles, etc.
Number of Non-Motorists: 0
Pedestrians, Bicyclists, etc.

Form PR-1 REV October 2018
Crash Summary (Front)

Case Number: 24-10972
DOT Identifier: Far DOT use only

CRASH DATE, TIME, SEVERITY, AND LOCATION

Date of Crash (YYYYMMDD): 20241113
Time (0000-2359): 0710
Town Name: Weston
Town #: 157
Crash Severity: Injury
Latitude: 40.600000
Longitude: -71.400000
Crash occurred on: White Birch Ridge at White Birch Road

CRASH FACTORS AND CONDITIONS

TRAFFICWAY OWNERSHIP: 01
LOCATION OF FIRST HARMFUL EVENT: 01
FIRST HARMFUL EVENT: 14
MANNER OF IMPACT: 03
TRAFFICWAY CLASS: 01
LIGHT CONDITIONS: 01
WEATHER CONDITIONS: 01, 88
TRAFFICWAY SURFACE CONDITIONS: 01
TYPE OF INTERSECTION: 03
SCHOOL BUS RELATED: 01
CONTRIBUTING CIRCUMSTANCES, ENVIRONMENTAL: 00, 88, 88
CONTRIBUTING CIRCUMSTANCES, ROAD: 00, 88, 88

WORK ZONE CRASH INFORMATION

WORK ZONE: 01
LOCATION: 88
TYPE: 88
WORKERS PRESENT: 88
ENFORCEMENT PRESENT: 88

CONNECTICUT UNIFORM POLICE CRASH REPORT

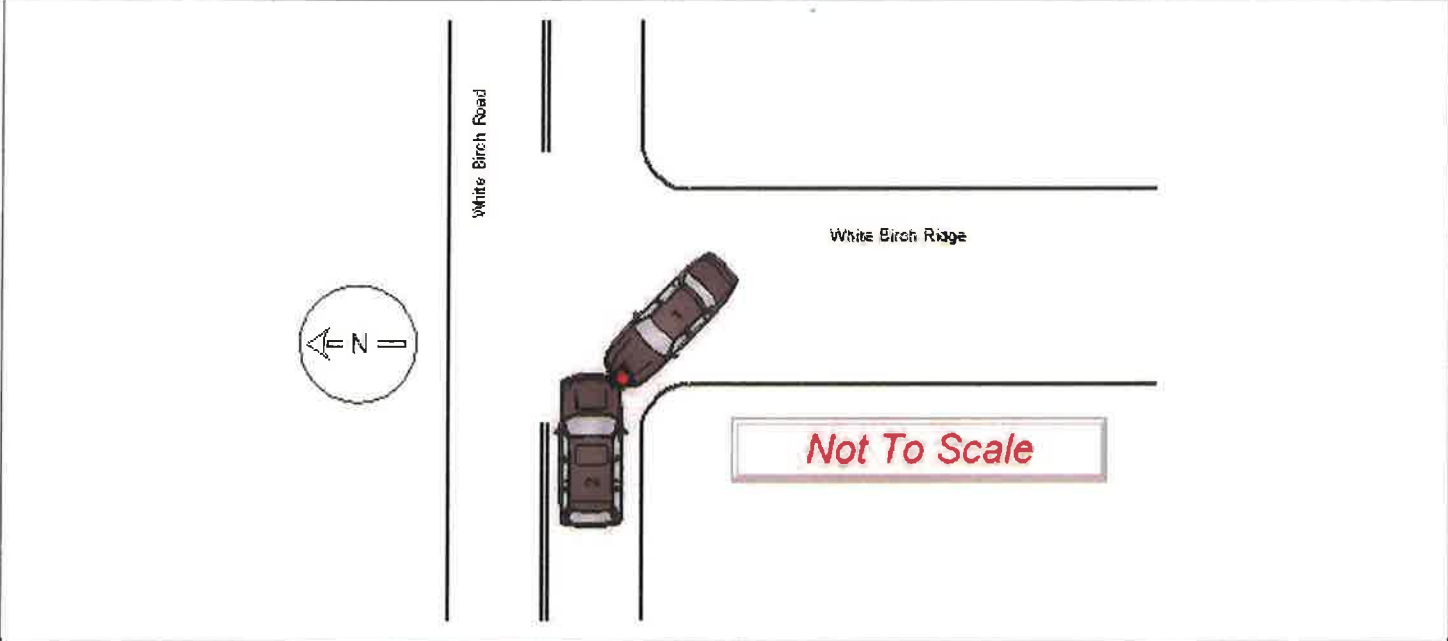
Form PR-1 REV October 2018

Case Number: 24-10972

Crash Summary (Back)

DOT Identifier:
For DOT use only

DIAGRAM



Vehicles were moved prior to police arrival Delete Diagram

NARRATIVE

Officers Narrative: Describe any unusual circumstances associated with the crash, including officer's observations.

Refer to each by motor vehicle number and/or non-motorist number

Op 1 stated he was traveling northbound on White Birch Ridge. Op 1 stated he stopped at inspection and proceeded to turn left. Op 1 stated he did not see Vehicle 2 and hit the front of the vehicle. Op 1 and passenger had reported injuries and were transported to Norwalk Hospital.

Op 2 stated she was traveling eastbound on White Birch Road when Vehicle 1 came speeding out of White Birch Ridge and hit her vehicle. Op 2 had injuries and was transported to Norwalk Hospital.

Investigation reveals that Vehicle 1 was traveling northbound on White Birch Ridge. Vehicle 2 was traveling eastbound on White Birch. Vehicle 1 pulled out from White Birch Ridge and hit Vehicle 2. Writer notes that White Birch Ridge is a private road and does not have a stop sign. White Birch Ridge has a line of site issue. A sight mirror was in place on pole number 7791 at time of accident. Vehicle 1 and Vehicle 2 both had disabling damages and were towed by Quality Towing.

Photographs taken. No measurements

Investigation completed.

Related Incident Number	Officer First Name James	Officer Last Name Boyles	Badge Number 36	Police Agency Code 157
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Case Status O - Open C - Closed	Officer Name: James Boyles	Supervisor: Sgt. Arnette
<input checked="" type="checkbox"/> C	Date & Time: 2 0 2 4 1 1 1 3 0 8 1 4	Date & Time: 2 0 2 4 1 1 1 3 0 8 1 4

This report is a revision to a previously submitted report

CONNECTICUT UNIFORM POLICE CRASH REPORT

Motor Vehicle ID:

Form PR-1 REV October 2018

Case Number:

Person ID:

Motor Vehicle Driver Information
Complete One Sheet Per Driver

DOT Identifier:

Name (Last, First, Middle, Suffix): <input type="text"/>	GENDER 01. Male <input type="text" value="01"/> 02. Female 99. Unknown	DATE OF BIRTH (YYYYMMDD) <input type="text"/>
Street Address or PO Box: <input type="text"/>	State: <input type="text"/> Postal Code: <input type="text"/>	<input type="checkbox"/> Date of Birth is unknown
City: <input type="text"/>	Phone/Email (optional): <input type="text"/>	

LICENSE INFO For all numeric fields, 99 = Unknown DRIVER INFORMATION

LICENSE NUMBER

STATE

EJECTION
01. Not Ejected
02. Ejected, Partially
03. Ejected, Totally
88. Not Applicable

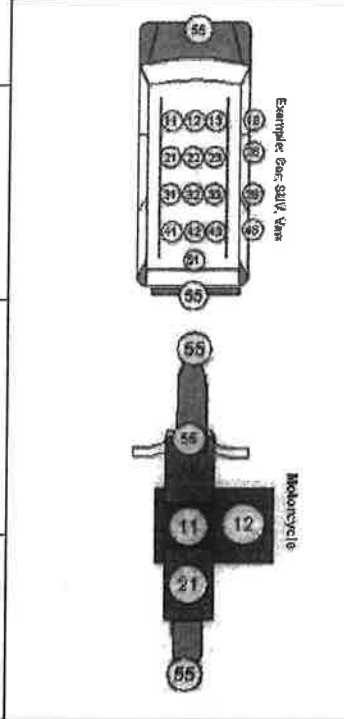
SEATING POSITION FIRST DIGIT
1. Front Row

DRIVER ACTIONS (choose up to 4)
01. No Contributing Action
02. Ran Off Roadway
03. Failed to Yield Right-of-Way
04. Ran Red Light
05. Ran Stop Sign
06. Disregarded Other Traffic Sign
07. Disregarded Other Road Markings
08. Improper Turn
09. Improper Backing
10. Improper Passing
11. Wrong Side or Wrong Way
12. Followed Too Closely
13. Failed to Keep in Proper Lane
14. Operated Vehicle in Reckless Aggressive Manner
15. Operated Motor Vehicle in Inattentive, Careless, Negligent, or Erratic Manner
16. Swerved or Avoided Due to Wind, Motor Vehicle, Object, Non-Motorist in Roadway, etc.
17. Over-Correcting/Over-Steering
18. Overtaking Cyclist
88. Not Applicable
97. Other Contributing Action

DRIVER LICENSE JURISDICTION
01. Not Licensed
02. State
03. Tribal Nation
04. U.S. Government
05. Canadian Province
06. Mexican State
07. International License (other than Mexico and Canada)
08. Valid License (other country)
88. Not Applicable

RESTRAINT SYSTEM
00. None Used-Motor Vehicle Occupant
01. Shoulder and Lap Belt Used
02. Shoulder Belt Only Used
03. Lap Belt Only Used
04. Restraint Used Type Unknown
88. Not Applicable
97. Other

SECOND DIGIT
_1. Left Seat (usually the motor vehicle or motorcycle driver except for postal vehicles and some foreign vehicles)
_2. Middle Seat
_3. Right Seat
_8. Other Seat



DRIVER DISTRACTED BY
01. Not Distracted
02. Manually Operating an Electronic Communication Device (Texting, etc.)
03. Talking on Hands-Free Electronic Device
04. Talking on Hand-Held Electronic Device
05. Other Activity, Electronic Device
06. Passenger
07. Other Inside the Vehicle (eating, hygiene, etc.)
08. Outside the Vehicle

LICENSE CLASS
00. None
01. Class A
02. Class B
03. Class C
04. Class D
05. Class M
88. Not Applicable

HELMET USE
01. No Helmet
02. DOT-Compliant Motorcycle Helmet
03. Helmet, Other Than DOT-Compliant Motorcycle Helmet
04. Helmet, Unknown If DOT-Compliant
88. Not Applicable

COMMERCIAL LICENSE
01. No
02. Yes

AIRBAG
01. Not Deployed
02. Deployed-Front
03. Deployed-Side
04. Deployed-Curtain
05. Deployed-Other
06. Deployed-Combination
88. Not Applicable

ENDORSEMENTS
 A - Activity Vehicles
 F - Taxi, Livery, Motor Coach
 H - Hazardous Materials
 M - Motorcycles
 N - Tank Vehicles
 P - Passenger
 Q - Fire Fighting Vehicles
 S - School Bus
 T - Double/Triple Trailers
 V - Student Transportation
 X - Combination of Tank Vehicle and Hazardous Materials

SPEED RELATED
01. No
02. Racing
03. Exceeded Speed Limit
04. Too Fast for Conditions

INJURY AND EMS INFORMATION

INJURY STATUS
K. Fatal Injury
A. Suspected Serious Injury
B. Suspected Minor Injury
C. Possible Injury
O. No Apparent Injury

TRANSPORTED TO FIRST MEDICAL FACILITY BY
01. Not Transported
02. EMS Air
03. EMS Ground
04. Law Enforcement
97. Other

EMS COMPANY NAME

EMS RUN NUMBER

INTENDED RECEIVING FACILITY

ENFORCEMENT ACTIONS TAKEN DRUG/ALCOHOL INFORMATION

ACTION BY OFFICER
00. None Taken
01. Verbal Warning
02. Written Warning
03. Infraction
04. Arrest/Summons

VIOLATION STATUTES

ALCOHOL TEST STATUS
01. Test Not Given
02. Test Refused
03. Test Given
99. Unknown if Tested

TYPE OF ALCOHOL TEST
01. Blood
02. Urine
03. Breath
88. Not Applicable 97. Other

DRUG TEST STATUS
01. Test Not Given
02. Test Refused
03. Test Given
99. Unknown if Tested

TYPE OF DRUG TEST
01. Blood
02. Urine
88. Not Applicable
97. Other

CONNECTICUT UNIFORM POLICE CRASH REPORT

Motor Vehicle ID:

Form PR-1 REV October 2018

Case Number:

Person ID:

Motor Vehicle Driver Information

DOT Identifier:

Complete One Sheet Per Driver

For DOT use only

Name (Last, First, Middle, Suffix): <input type="text"/>		GENDER 01. Male <input type="text" value="02"/> 02. Female 09. Unknown		DATE OF BIRTH (YYYYMMDD) <input type="text"/>	
Street Address or PO Box: <input type="text"/>		State: <input type="text"/>		<input type="checkbox"/> Date of Birth is unknown	
City: <input type="text"/>		Postal Code: <input type="text"/>		Phone/Email (optional): <input type="text"/>	

LICENSE INFO DRIVER INFORMATION (ii)

LICENSE NUMBER 156646459 STATE CT		EJECTION 01. Not Ejected <input type="text" value="01"/> 02. Ejected, Partially 03. Ejected, Totally 88. Not Applicable		SEATING POSITION FIRST DIGIT 1. Front Row <input type="text" value="11"/> SECOND DIGIT 1. Left Seat (usually the motor vehicle or motorcycle driver except for postal vehicles and some foreign vehicles) 2. Middle Seat 3. Right Seat 8. Other Seat		DRIVER ACTIONS (choose up to 4) 01. No Contributing Action <input type="text" value="01"/> 02. Ran Off Roadway 03. Failed to Yield Right-of-Way 04. Ran Red Light 05. Ran Stop Sign 06. Disregarded Other Traffic Sign 07. Disregarded Other Road Markings 08. Improper Turn 09. Improper Backing 10. Improper Passing 11. Wrong Side or Wrong Way 12. Followed Too Closely 13. Failed to Keep in Proper Lane 14. Operated Vehicle in Reckless Aggressive Manner 15. Operated Motor Vehicle in Inattentive, Careless, Negligent, or Erratic Manner 16. Swerved or Avoided Due to Wind, Motor Vehicle, Object, Non-Motorist in Roadway, etc. 17. Over-Correcting/Over-Steering 18. Overtaking Cyclist 88. Not Applicable 97. Other Contributing Action	
DRIVER LICENSE JURISDICTION 01. Not Licensed <input type="text" value="02"/> 02. State 03. Tribal Nation 04. U.S. Government 05. Canadian Province 06. Mexican State 07. International License (other than Mexico and Canada) 08. Valid License (other country) 88. Not Applicable		RESTRAINT SYSTEM 00. None Used-Motor Vehicle Occupant 01. Shoulder and Lap Belt Used 02. Shoulder Belt Only Used 03. Lap Belt Only Used 04. Restraint Used Type Unknown 88. Not Applicable 97. Other <input type="text" value="01"/>		<p>Example: Car SUV, Van</p> <p>Motorcycle</p>		DRIVER DISTRACTED BY 01. Not Distracted <input type="text" value="01"/> 02. Manually Operating an Electronic Communication Device (Texting, etc) 03. Talking on Hands-Free Electronic Device 04. Talking on Hand-Held Electronic Device 05. Other Activity, Electronic Device 06. Passenger 07. Other Inside the Vehicle (eating, hygiene, etc.) 08. Outside the Vehicle	
LICENSE CLASS 00. None <input type="text" value="04"/> 01. Class A 02. Class B 03. Class C 04. Class D 05. Class M 88. Not Applicable		HELMET USE 01. No Helmet 02. DOT-Compliant Motorcycle Helmet 03. Helmet, Other Than DOT-Compliant Motorcycle Helmet 04. Helmet, Unknown If DOT-Compliant 88. Not Applicable <input type="text" value="88"/>				CONDITION AT TIME OF CRASH (choose up to 2) 01. Apparently Normal <input type="text" value="01"/> 02. Physically Impaired 03. Emotional (depressed, angry, etc.) 04. Ill (sick), Fainted 05. Asleep or Fatigued 06. Under the Influence (Medications/Drugs/Alcohol) 88. Not Applicable 97. Other	
COMMERCIAL LICENSE 01. No <input type="text" value="01"/> 02. Yes		AIRBAG 01. Not Deployed <input type="text" value="01"/> 02. Deployed-Front 03. Deployed-Side 04. Deployed-Curtain 05. Deployed-Other 06. Deployed-Combination 88. Not Applicable					
ENDORSEMENTS <input type="checkbox"/> A - Activity Vehicles <input type="checkbox"/> F - Taxi, Livery, Motor Coach <input type="checkbox"/> H - Hazardous Materials <input type="checkbox"/> M - Motorcycles <input type="checkbox"/> N - Tank Vehicles <input type="checkbox"/> P - Passenger <input type="checkbox"/> Q - Fire Fighting Vehicles <input type="checkbox"/> S - School Bus <input type="checkbox"/> T - Double/Triple Trailers <input type="checkbox"/> V - Student Transportation <input type="checkbox"/> X - Combination of Tank Vehicle and Hazardous Materials		SPEED RELATED 01. No <input type="text" value="01"/> 02. Racing 03. Exceeded Speed Limit 04. Too Fast for Conditions					

INJURY AND EMS INFORMATION

INJURY STATUS K. Fatal Injury A. Suspected Serious Injury B. Suspected Minor Injury <input type="text" value="B"/> C. Possible Injury O. No Apparent Injury	TRANSPORTED TO FIRST MEDICAL FACILITY BY 01. Not Transported 02. EMS Air 03. EMS Ground <input type="text" value="03"/> 04. Law Enforcement 97. Other	EMS COMPANY NAME _____ EMS RUN NUMBER _____ INTENDED RECEIVING FACILITY _____
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ENFORCEMENT ACTIONS TAKEN

DRUG/ALCOHOL INFORMATION

ACTION BY OFFICER 00. None Taken <input type="text" value="00"/> 01. Verbal Warning 02. Written Warning 03. Infraction 04. Arrest/Summons	VIOLATION STATUTES <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	ALCOHOL TEST STATUS 01. Test Not Given <input type="text" value="01"/> 02. Test Refused 03. Test Given 99. Unknown if Tested	TYPE OF ALCOHOL TEST 01. Blood <input type="text" value="88"/> 02. Urine 03. Breath 88. Not Applicable 97. Other
		DRUG TEST STATUS 01. Test Not Given <input type="text" value="01"/> 02. Test Refused 03. Test Given 99. Unknown if Tested	TYPE OF DRUG TEST 01. Blood <input type="text" value="88"/> 02. Urine 88. Not Applicable 97. Other









Sent from my iPhone