



THE GREEN

LAW FIRM P.C.

*Board Certified / Personal Injury Trial Law
Texas Board of Legal Specialization

April 8, 2024

Via USPS Certified mail 7019 0160 0000 5196 8661

Webb County Judge

Attn: Judge Tano E. Tijerina

1000 Houston St. 3rd Floor, Laredo Tx 78040

Re:	Our Client:	Sergio R. Chaires Jr
	Your Insured :	Webb County Sheriff Department
	Claim#:	24911297
	Policy#	CA6676622
	D/Accident:	March 14, 2024
	Time:	01:29 AM
	Our File:	24-008 JAG

Risk Management:

Please be advised that the undersigned has been retained by the above-referenced client(s) to prosecute their claims and causes of action that stem from the accident referenced above. This accident occurred on Block 6500, Bob Bullock Loop. My client was the driver of the 2017 Black Chevrolet Impala, when the driver Jose Israel Sanchez, failed to yield right of way, colliding into my client Unit. My client suffered injuries on his left knee and head. At this time the extent of his injuries are unknown, but he is under the medical care of a doctor.

You are instructed hereby to cease and desist any communication with my client(s). In addition, do not make any attempt to contact my client(s) current or former medical providers. We will gladly provide the information you will need to properly evaluate this claim. Any previously signed authorizations and/or assignments of benefits are hereby revoked. My client(s) privacy rights with regard to medical treatment are protected under the Federal Health Insurance Protection and Accountability Act and various state laws as well. My client(s) intend to maintain said privacy.

DO NOT CONTACT MY CLIENT(S) MEDICAL PROVIDERS OR AGENCIES RESPONSIBLE FOR BILLING FOR MEDICAL TREATMENT OR MAKE ANY ATTEMPT TO NEGOTIATE REDUCTION OR DIRECT PAYMENT OF ANY MEDICAL BILL. We have informed my client(s) medical providers that they are not to discuss my client(s) medical treatment and/or bills with anyone not in possession of an express authorization from us. Please be advised that your failure to follow these instructions will result in the filing of a lawsuit and the reporting to the appropriate federal administrative/law enforcement agency.

Should you have any questions, please do not hesitate to contact my office:

Very truly yours,

THE GREEN LAW FIRM, P.C.

BY: /s/ Jorge A. Green

JORGE A. GREEN

APR 11 2024

Webb County Judge's Office

JAG: aa

Law Enforcement and TxDOT Use Only

FATAL CMV SCHOOL BUS RAILROAD MASS SUPPLEMENT ZONE

ACTIVE SCHOOL

Total Num. Units 2

Total Num. Prnts 2

TxDOT Crash ID 20074126

Texas Peace Officer's Crash Report (Form CR-3 4/1/2023)

Questions? Call 844/274-7457

Refer to the attached code sheet for numbered fields

*These fields are required on all additional sheets submitted for this crash (ex. additional vehicles, occupants, injured, etc.).

*Crash Date (MM/DD/YYYY) 03/14/2024 *Crash Time (24HRMM) 0 1 2 9 Case ID 2024-00045609 Local Use Outside City Limit

*County Name WEBB *City Name LAREDO

In your opinion, did this crash result in at least \$1000 damage to any one person's property? Yes No

ROAD ON WHICH CRASH OCCURRED

*1 Rwy. Sys. LR *Hwy. Num. 1 *2 Rwy. Part 6500 *3 Street Prefix BOB BULLOCK *Street Name BOB BULLOCK *4 Street Suffix LOOP

Private Use of Road: Private Property, Paved 3 Dir. of Traffic S Toll Road/Toll Lane Speed Limit 55 Canal Zone Yes No Worked Present No Secondary Crash Yes No Street Desc. PAVED ROAD

INTERSECTING ROAD, OR IF CRASH NOT AT INTERSECTION, NEAREST INTERSECTING ROAD OR REFERENCE MARKER

AI Yes No 1 Rwy. Sys. LR *Hwy. Num. 1 *2 Rwy. Part 6300 *3 Street Prefix SINATRA *Street Name SINATRA *4 Street Suffix PKWY

Distance from Int. or Ref. Marker 300 FT MI 3 Dir. from Int. or Ref. Marker N Ref. Marker PAVED ROAD RPO Num.

Unit Num. 1 5 Unit Desc. 1 Parked Vehicle Hit and Run LP State TX LP Num. 1361490 VIN 1GNL1CDECA1R261055

Veh. Year 2020 8 Veh. Color WHI Veh. Make CHEVROLET Veh. Model TAHOE Veh. Body Style SV

Responder Struck (Explain in Narrative if checked) 8 Autonomous Unit UNKNOWN 9 Autonomous Level Engaged UNKNOWN Police, Fire, EMS on Emergency (Explain in Narrative if checked)

10 DL/ID Type 1 DL/ID State TX DL/ID Num. 14613539 11 DL Class A 12 CDL End. 96 13 DL Rest. N/T DOB (MM/DD/YYYY) 1/21/1982

Address (Street, City, State, ZIP) 114 KENNEDY LOOP LAREDO, TX 78046

Person Num.	14 Ptn. Type	15 Seat Position	Name: Last, First, Middle Enter Driver or Primary Person for this Unit on first line	16 Injury Severity	17 Age	18 Sex	19 Eject.	20 Rest.	21 Airbag	22 Height	23 Sex	24 Alc. Spec.	25 Drug Spec.	26 Drug Result	27 Drug Category
1	1	1	SANCHEZ, JOSE, ISRAEL	N	41	H	1	1	1	97	N	96	97	97	
Not Applicable - Alcohol and Drug Results are only reported for Driver/Primary Person for each Unit.															

Owner Lessee Owner/Lessee Name & Address ENTERPRISE FM TRUST 2281 BALL DR ST LOUIS, MO 63146

Proof of Fin. Resp. Yes Expired No Exempt 28 Fin. Resp. Type 2 Fin. Resp. Name SAFETY NATIONAL C. Fin. Resp. Num. CA6676622

Fin. Resp. Phone Num. 888-995-5300 29 Vehicle Damage Rating 1 9 L F 0 2 29 Vehicle Damage Rating 2 Vehicle Inventory Yes No

Towed By Towed To

Unit Num. 2 5 Unit Desc. 1 Parked Vehicle Hit and Run LP State TX LP Num. PWX9056 VIN 2G11052A5H9175152

Veh. Year 2017 8 Veh. Color BLK Veh. Make CHEVROLET Veh. Model IMPALA Veh. Body Style P4

Responder Struck (Explain in Narrative if checked) 8 Autonomous Unit UNKNOWN 9 Autonomous Level Engaged UNKNOWN Police, Fire, EMS on Emergency (Explain in Narrative if checked)

10 DL/ID Type 1 DL/ID State TX DL/ID Num. 46787092 11 DL Class C 12 CDL End. 96 13 DL Rest. 96 DOB (MM/DD/YYYY) 1/21/1982

Address (Street, City, State, ZIP) 2611 COMAL LOOP LAREDO, TX 78046

Person Num.	14 Ptn. Type	15 Seat Position	Name: Last, First, Middle Enter Driver or Primary Person for this Unit on first line	16 Injury Severity	17 Age	18 Sex	19 Eject.	20 Rest.	21 Airbag	22 Height	23 Sex	24 Alc. Spec.	25 Drug Spec.	26 Drug Result	27 Drug Category
1	1	1	CHAIRES, SERGIO, RICARDO	N	21	H	1	1	1	97	N	96	96	97	97
Not Applicable - Alcohol and Drug Results are only reported for Driver/Primary Person for each Unit.															

Owner Lessee Owner/Lessee Name & Address SERGIO RICARDO CHAIRES 2611 COMAL LOOP LAREDO, TX 78046

Proof of Fin. Resp. Yes Expired No Exempt 28 Fin. Resp. Type 2 Fin. Resp. Name REDPOINT COUNTY MUT Fin. Resp. Num. QAQ008809900

Fin. Resp. Phone Num. 855-935-1233 29 Vehicle Damage Rating 1 1 0 F D 2 29 Vehicle Damage Rating 2 Vehicle Inventory Yes No

Towed By Towed To

DISPOSITION OF INJURED/KILLED	Unit Num.	Prsn. Num.	Taken To	Taken By	Date of Death (MM/DD/YYYY)	Time of Death (24HRMM)

CHARGES	Unit Num.	Prsn. Num.	Charge	Citation/Reference Num.
	1	1		FAIL TO YIELD RIGHT OF WAY

DAMAGE	Damage/Property Other Than Vehicle	Owner's Name	Owner's Address

Unit Num.	<input type="checkbox"/> 10,001+ lbs.	<input type="checkbox"/> Transporting Hazardous Material	<input type="checkbox"/> 9+ Capacity	CMV Disabling Damage? <input type="checkbox"/> Yes <input type="checkbox"/> No	20 Veh. Oper.	31 Carrier ID Type	Carrier ID Num.			
Carrier's Corp. Name	Carrier's Primary Addr.		32 Veh. Type		33 Bus Type	<input type="checkbox"/> RGWV <input type="checkbox"/> GVWR	HazMat Released <input type="checkbox"/> Yes <input type="checkbox"/> No	34 HazMat Class Num.	HazMat ID Num.	35 Cargo Body Type
Unit Num.	<input type="checkbox"/> RGWV <input type="checkbox"/> GVWR	36 Trk. Type	CMV Disabling Damage? <input type="checkbox"/> Yes <input type="checkbox"/> No	Unit Num.	<input type="checkbox"/> RGWV <input type="checkbox"/> GVWR	36 Trk. Type	CMV Disabling Damage? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Sequence Of Events	37 Seq. 1	37 Seq. 2	37 Seq. 3	37 Seq. 4	Intermodal Shipping Container Permit <input type="checkbox"/> Yes <input type="checkbox"/> No	Actual Gross Weight	Total Num. Axles			

FACTORS & CONDITIONS	38 Contributing Factors (Investigator's Opinion)			39 Vehicle Defects (Investigator's Opinion)		Environmental and Roadway Conditions						
	Unit #	Contributing	May Have Contrib.	Contributing	May Have Contrib.	40 Weather Cond.	41 Light Cond.	42 Entering Road	43 Roadway Dye	44 Roadway Alignment	45 Surface Condition	46 Traffic Control
1	32					1	3	97	3	1	1	96

NARRATIVE AND DIAGRAM	<p>Investigator's Narrative Opinion of What Happened (Attach Additional Sheets if Necessary)</p> <p>UNIT #1 WAS TRAVELING SOUTHBOUND (OUTERLANE) BY THE 6500 BLOCK OF BOB BULLOCK LOOP, WHEN IT FAILED TO YIELD RIGHT OF WAY, THUS COLLIDING UNTO UNIT #2.</p> <p>UNIT #2 WAS TRAVELING SOUTHBOUND (INNER LANE) BY THE 6500 BLOCK OF BOB BULLOCK LOOP AT THE TIME OF THE COLLISION.</p> <p>UNIT #2 ADVISED UNIT #1 DID NOT HAVE EMERGENCY LIGHTS UNTIL LAST SECOND, WHEN ATTEMPTING TO DO A TRAFFIC STOP (NON EMERGENCY) AND COMMITTING A U-TURN.</p>	<p>Indicate North</p> <p>Field Diagram - Not to Scale</p>
	<p>Not To Scale</p>	

Date Notified (MM/DD/YYYY): 03/14/2024	Time Notified (24HRMM): 0 1 5 0	How Notified: MCT DISPATCHED
Date Arrived (MM/DD/YYYY): 03/14/2024	Time Arrived (24HRMM): 0 1 5 6	Report Date (MM/DD/YYYY): 03/14/2024
Date Roadway Cleared (MM/DD/YYYY): 03/14/2024	Time Roadway Cleared (24HRMM): 0200	Date Scene Cleared (MM/DD/YYYY): 03/14/2024
Investigation Complete: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Investigator Name (Printed): ABISAI TAPIA	ID Num.: 1337
ORI Num.: T X 2 4 0 0 1 0 0	Agency: LAREDO POLICE DEPARTMENT	Service/Region/DA: B 1