

June 30, 2017

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JUL 10 2017

OFFICE OF
CITY ATTORNEY

Milwaukee City Clerk

200 East Wells Street Room 205

Milwaukee, WI 53202

To whom it may concern:

I wish to appeal the decision in regards to file no. 1030-2017-1082, in regards to the investigation in incorrect. So therefore i am requesting a hearing .

Thank you

CAD:

Our denial letter was

mailed on 6-16-17

(INCLUDE)

Debra Wallace

3767 North 9th Street

Milwaukee, WI 53206

414-394-6336

CITY OF MILWAUKEE
2017 JUL 10 A 8:29
CITY CLERK'S OFFICE

CITY OF MILWAUKEE
2017 MAY 18 P 3:48
CITY CLERK'S OFFICE


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MAY 19 2017

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On May 15, 2017, at 1:09pm, I left my office to go to lunch at Burger King on W. Messmer Street. While driving southbound on Green Bay Ave I proceeded to turn left on Messmer Street with my left signal on behind a city worker truck (white) turning the same way with there left blinker on between 3-4 feet away than all of a sudden the truck back up lights came on the truck started to back up angling toward the curbs , no caution light yellow was not in use . I blow my horn several times even hanging on the horn I was not able to back up. The right end of her truck hit the left front end on my car because she was at a angel when backing up. The worker got out of her truck and apologize stating that she did not see me I ask why did you start backing up she said was going to the work site. I stated that I was blowing my horn she said that the machine the worker was using was to loud and she did not hear my horn. So you did not hear me or see me. She said she will call her supervisor he will be here in 10 mintues. I advised to call the police she stated no need . 15 mintues later another white truck arrive at the scene Brian D. ask if I was ok and proceed to take my statement. I gave my insurance infomation and licesence and i ask the worker for there liscense he denied ans said I wont need them and walk away. City vehicle # 222666

Thank you



Debra Wallace

414-394-6336

Two Estimate enclosed

CITY OF MILWAUKEE
MAY 18 P 3:48
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893.80 Claims against governmental bodies or officers, agents or employees; notice of injury; limitation of damages and suits. (1) Except as provided in subs. (1g), (1m), (1p) and (8), no action may be brought or maintained against any volunteer fire company organized under ch. 213, political corporation, governmental subdivision or agency thereof nor against any officer, official, agent or employe of the corporation, subdivision or agency for acts done in their official capacity or in the course of their agency or employment upon a claim or cause of action unless:

(a) Within 120 days after the happening of the event giving rise to the claim, written notice of the circumstances of the claim signed by the party, agent or attorney is served on the volunteer fire company, political corporation, governmental subdivision or agency and on the officer, official, agent or employe under s. 801.11. Failure to give the requisite notice shall not bar action on the claim if the fire company, corporation, subdivision or agency had actual notice of the claim and the claimant shows to the satisfaction of the court that the delay or failure to give the requisite notice has not been prejudicial to the defendant fire company, corporation, subdivision or agency or to the defendant officer, official, agent or employe; and

(b) A claim containing the address of the claimant and an itemized statement of the relief sought is presented to the appropriate clerk or person who performs the duties of a clerk or secretary for the defendant fire company, corporation, subdivision or agency and the claim is disallowed.

To File A CLAIM with The CITY OF MILWAUKEE:

BRIAN D.
DAN P. ILLA

286-5561

You will need the following information

DATE of Incident 5-15-2017

"City" Vehicle Number 22266

11:10 PM

OFFICE OF THE CITY CLERK
Milwaukee, Wisconsin

INSTRUCTIONS FOR FILING A CLAIM AGAINST THE CITY OF MILWAUKEE

To file a claim against the City, a claimant must comply with Section 893.80(1), Wis. Stats., a copy of which is printed on the reverse side of this instruction sheet. Generally the statute requires the claimant to submit to the City Clerk:

1. A document stating the circumstances of the claim which must be signed by the claimant, or his/her agent or attorney. This document should be filed within 120 days of the event.
2. A document stating the address of the claimant and a statement of the relief sought. If money damages are sought, a specific sum must be stated.

(The above information may be combined in a single document.)

The following information should also be submitted to allow the City to promptly act on your claim:

1. Proof of the amount of the claim by means of either itemized receipts or two itemized estimates.
2. A phone number where the claimant can be reached during business hours.
3. As detailed a description of the incident as possible, including the date, time and place. Include the "City" vehicle #.

All information should be submitted to:

City Clerk
ATTN: CLAIMS
200 E. Wells St., Room 205
Milwaukee, WI 53202-3567

ADDITIONAL INFORMATION

Before you can file a lawsuit against the City of Milwaukee for reimbursement, State law requires that you first follow the claim procedures established by the City Clerk.

Filing a claim against the City does not automatically guarantee reimbursement from the City. However, the City examines each claim on an individual basis in determining if reimbursement is legally required.

In order to obtain reimbursement for a claim against the City, you must prove that the City or its employees acted unlawfully or negligently.

Only the City Attorney or the Common Council and the Mayor can authorize payment of a claim against the City. Any other representations made by City employees are not legally binding on the City.



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LINDEMS AUTO, INC
117 E. CAPITOL DR.
MILWAUKEE WI 53212
PH. 414-967-9210
FAX 414-755-3210

"BETTER BUSINESS BUREAU" ACCREDITED BUSINESS

FAX COVER SHEET

DATE: 5-16-17

DELIVERY TO: Debra W.

FROM: Anna

RECIPIENT'S FAX NUMBER: 264-7771

NUMBER OF PAGES (INCLUDING COVER SHEET): 2

NOTES: Thanks for stopping by!

We'd be glad to do the repairs
for you!

Lindems Auto, Inc.
 117 East Capitol Drive
 Milwaukee, WI. 53212
 Phone: 414-967-9210 Fax: 414-755-3210

ESTIMATE #

017445

ESTIMATE FOR SERVICES

Estimate Date : 05/16/2017

Wallace, Debra

1999 Toyota - Corolla LE - 1.8L, In-Line4 (109CI) VIN(R)
 Lic # : 156WXX - WI Odometer In: 0

Cell: 414-394-6336

VIN#: 1NXBR12EX XZ193754

Part Description / Number	Qty	Sale	Ext	Labor Description	Hours	Extended
LH fender 0	1.00	58.00	58.00	Remove/Replace LH fender	0.90	70.00
LH headlight 0	1.00	90.00	90.00	Refinish fender	1.93	150.00
LH corner light 0	1.00	26.00	26.00	Remove/replace hood	0.77	60.00
Hood 0	1.00	158.00	158.00	Refinish hood	2.38	185.00
Paint and materials 0	1.00	150.00	150.00	Remove/replace headlight and corner light	0.84	65.00
Shop Supplies			23.17			

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Parts/Supplies: 605.17

Labor: 530.00

HazMat/Fees: 0.00

Tax: 57.97

Total: \$ 1,093.14

Motor vehicle repair practices are regulated by chapter ATCP 132, Wis. Admin. Code, administered by the Bureau of Consumer Protection, Wisconsin Dept. of Agriculture, Trade and Consumer Protection, P.O. Box 8911, Madison, Wisconsin 53708-0911

This vehicle received without face to face customer contact.

Shop Representative _____

YOU ARE ENTITLED TO A PRICE ESTIMATE FOR THE REPAIRS YOU HAVE AUTHORIZED. THE REPAIR PRICE MAYBE LESS THAN THE ESTIMATE, BUT WILL NOT EXCEED THE ESTIMATE WITHOUT YOUR PERMISSION. YOUR SIGNATURE WILL INDICATE YOUR ESTIMATE SELECTION.

1. I request an estimate in writing before you begin repair _____

2. Please proceed with repairs, but call me before continuing if the price will exceed \$ _____

3. I do not want an estimate _____

Do you want the replaced parts you are entitled to? Yes No

Payment will be made by Cash Check Credit Card Charge

Call when vehicle is ready Yes No

Having authority to do so I hereby order the above products and services, parts and labor and grant permission to you and/or your employees to operate the vehicle described for the purpose of testing and/or inspection, I agree to pay cash when the work is completed or to pay on other terms satisfactory to you. Until paid in full, the amount owing on this work shall constitute a lien on the motor vehicle. If collection is made by suit or otherwise, I agree to pay storage and collection and reasonable attorney's fees.

Customer Sign: _____
 Date: _____

ANDREW AUTOMOTIVE - BODY REPAIR CENTER
1621 W. LA SALLE ST.
MILWAUKEE, WI 53209
PH: 414-540-2559 FX: 414-228-7420

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*** PRELIMINARY ESTIMATE ***

05/16/2017 08:10 AM

Owner

Owner: DEBRA WALLACE
Address: 3767 NORTH 9TH ST
City State Zip: Milwaukee, WI 53206

Work/Day: (414)394-6336
FAX:

Control Information

Claim # : JR NG
File # : 3021

Insured Policy # :
Accounting # :

Inspection

Inspection Date: 05/16/2017 08:10 AM

Inspection Type:

Contact: Justin R Rupp
Address: 1621 West LaSalle Street
City State Zip: Milwaukee, WI 53209

Work/Day: (414)540-2559
FAX: (414)228-7420

Repairer

Repairer: Andrew Auto Body Repair
Address: 1621 W. Lasalle St.

City State Zip: Glendale, WI 53209

Contact:
Work/Day: (414)540-2559
Work/Day: (414)540-2559
FAX: (414)228-7420

Target Complete Date/Time:

Days To Repair: 4

Vehicle

1999 Toyota Corolla LE 4 DR Sedan
4cyl Gasoline 1.8
4 Speed Automatic

Lic Expire:
Veh Insp# :
Condition:
Ext. Color: GOLD
Ext. Refinish: Two-Stage

VIN: 1NXBR12EXX2198754
Mileage Type: Actual
Code: Y2104C
Int. Color:
Int. Refinish: Two-Stage

Options

AM/FM Stereo Tape	Air Conditioning	Bucket Seats
Center Console	Digital Clock	Dual Airbags
Intermittent Wipers	Power Brakes	Power Door Locks
Power Mirrors	Power Steering	Power Windows
Rear Window Defroster	Rem Trunk-L/Gate Release	Tachometer
Tilt Steering Wheel	Tinted Glass	U.S.A. Built Vehicle
Velour/Cloth Seats		

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Damages

Line	Op	Guide	MC	Description	MFR.Part No.	Price	ADJ%	B%	Hours	R
Front End Panel And Lamps										
1	E	18	49	Grille Assembly LT	5311302010	\$22.65			1.1	SM
2	EP	41		Headlamp Assy, Halogen LT	Replace PXN	\$131.75			0.5	SM
3	N	973		Headlamps Aim	Additional Labor				0.4	SM
4	EP	59		Lamp, Side Marker LT	Replace PXN	\$57.25			INC	SM
Radiator Support										
5	I	75	07	Crsmbr, Rad Panel Upr	Repair				2.0*	SM
6	L	75		Crsmbr, Rad Panel Upr	Refinish				0.6	RF
					0.5 Surface					
					0.1 Two-stage					
Front Body And Windshield										
7	EP	83		Panel, Hood	Replace PXN	\$178.00			1.2	SM
8	L	83	13	Panel, Hood	Refinish				5.5	RF
					2.9 Surface					
					1.2 Edge					
					0.6 Two-stage setup					
					0.8 Two-stage					
9	RI	1030		Nozzle, W/S Washer LT	R & I Assembly				INC	SM
10	RI	1031		Nozzle, W/S Washer RT	R & I Assembly				INC	SM
Manual Entries										
11	L			Color Tint	Refinish				0.7*	SM
12	EC			Cover Car Exterior	Replace Economy	\$5.00*				SM
13	SB			Hazardous Waste Removal	Sublet Repair	\$3.00*				SM
13	Items									

MC Message

07 STRUCTURAL PART AS IDENTIFIED BY I-CAR
 13 INCLUDES 0.6 HOURS FIRST PANEL TWO-STAGE ALLOWANCE
 49 UNPRINTED ALTERNATE PARTS COMPARE

Estimate Total & Entries

Gross Parts					\$22.65					
Other Parts					\$372.00					
Paint & Materials			6.1 Hours @	\$38.00	\$231.80					
Parts & Material Total									\$626.45	
Tax on Parts & Material			@	5.600%					\$35.08	
Labor	Rate	Replace Hrs	Repair Hrs	Total Hrs						
Sheet Metal (SM)	\$58.00	3.5	2.4	5.9	\$342.20					
Mech/Elec (ME)	\$116.00									
Frame (FR)	\$58.00									
Refinish (RF)	\$58.00	6.1		6.1	\$353.80					
Labor Total				12.0 Hours					\$696.00	
Tax on Labor		@	5.600%		\$38.98					
Sublet Repairs					\$3.00					
Tax on Sublet		@	5.600%		\$0.17					
Gross Total									\$1,399.68	

Net Total

\$1,399.68

Alternate Parts Y/04/03/02/01/00 CUM 04/03/02/01/00 Zip Code: 53209 Default
Recycled Parts NOT REQUESTED
Rate Name Default

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Audatex Estimating 8.0.134 ES 05/16/2017 08:12 AM REL 8.0.134 DT 05/01/2017 DB 05/15/2017
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1.5 HRS WERE ADDED TO THIS ESTIMATE BASED ON AUDATEX'S TWO-STAGE REFINISH FORMULA.

THIS ESTIMATE HAS BEEN PREPARED BASED ON THE USE OF ONE OR MORE REPLACEMENT PARTS SUPPLIED BY A SOURCE OTHER THAN THE MANUFACTURER OF YOUR MOTOR VEHICLE. WARRANTIES APPLICABLE TO THESE REPLACEMENT PARTS ARE PROVIDED BY THE MANUFACTURER OR DISTRIBUTOR OF THE REPLACEMENT PARTS RATHER THAN BY THE MANUFACTURER OF YOUR MOTOR VEHICLE.

Op Codes

- | | | |
|----------------------------|---|--------------------------------|
| * = User-Entered Value | ^ = Labor Matches System Assigned Rates | E = Replace OEM |
| NG = Replace NAGS | EC = Replace Economy | OE = Replace PXN OE Srpls |
| UE = Replace OE Surplus | ET = Partial Replace Labor | EP = Replace PXN |
| EU = Replace Recycled | TE = Partial Replace Price | PM = Replace PXN Reman/Reblt |
| UM = Replace Reman/Rebuilt | L = Refinish | PC = Replace PXN Reconditioned |
| UC = Replace Reconditioned | TT = Two-Tone | SB = Sublet Repair |
| N = Additional Labor | BR = Blend Refinish | I = Repair |
| IT = Partial Repair | CG = Chipguard | RI = R & I Assembly |
| P = Check | AA = Appearance Allowance | RP = Related Prior Damage |



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