## NOTICE OF CIRCUMSTANCES OF CLAIM

TO: CITY OF MILWAUKEE, DEPARTMENT OF PUBLIC WORKS

WATER DISTRIBUTION, LINCOLN WATER

**ROOM 516** 

MUNICIPAL BUILDING 841 NORTH BROADWAY

MILWAUKEE, WISCONSIN 53202

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**PLEASE TAKE NOTICE** Pursuant to Wisconsin Statute § 893.80(1)(a) that the undersigned will be making a claim for injuries and damages against you by virtue of the reasons set forth hereafter:

NAME OF CLAIMANT:

MARGARET LAZAREVICH

DATE AND TIME OF INJURIES SUSTAINED:

SEPTEMBER 4, 2003

OFFICE OF

RECEIVED

PLACE OR LOCATION WHERE INJURY OR DAMAGES OCCURRED:

2254 SOUTH CHASE AVENUE MILWAUKEE, WISCONSIN

MANNER IN WHICH DAMAGES OR INJURIES WERE RECEIVED OR OCCURRED:

Claimant tripped and fell due to a Department of Public Works pipe sticking out of the ground the pipe was in disrepair, being badly chipped and bent. It was also missing its cover, making it particularly hazardous. The pipe is located in front of 2254 South Chase Avenue, Milwaukee, Wisconsin.

## GROUNDS ON WHICH CLAIM IS MADE:

Negligence on the part of the City of Milwaukee, Department of Public Works, by its agents, servants, and employees including but not limited to failure to maintain a safe and proper condition for public use and negligently maintaining a stand pipe.

## GENERAL DESCRIPTION OF INJURIES AND DAMAGES:

PERSONAL INJURIES:

RIGHT KNEE

LOST WAGES

MEDICAL EXPENSES

PAST AND FUTURE PAIN AND SUFFERING

PLEASE TAKE NOTICE that satisfaction for such injuries or damages will be claimed, but that the amount of said demand is UNKNOWN at the present time. This document is a NOTICE OF CIRCUMSTANCES made pursuant to Wisconsin Statute § 893.80(1)(a) and NOT A NOTICE OF CLAIM pursuant to Wisconsin Statute § 893.80(1)(b).

Dated at Milwaukee, Wisconsin, this 29th Day of December, 2003

Claimant:

MARGARET LAZAREVICH

827 SOUTH SHEA

MILWAUKEE, WISCONSIN 53215

**ACTION LAW OFFICES** 

BY:

STEVEN C. GABERT

Attorney for the Claimant 933 North Mayfair Road

Suite 200

Milwaukee, Wisconsin 53226 Telephone: (414) 456-1111

Subscribed and sworn to before me this 29th day of December, 2003

Motary Public State of Wisconsin My Commission Expires: 1-39-06 The undersigned hereby certifies that a true copy of the attached:

## NOTICE OF CIRCUMSTANCES OF CLAIM

was served upon the hereinafter named:

CITY OF MILWAUKEE, DEPARTMENT OF PUBLIC WORKS
WATER DISTRIBUTION, LINCOLN WATER
ROOM 516
MUNICIPAL BUILDING
841 NORTH BROADWAY
MILWAUKEE, WISCONSIN 53202

by enclosing same in an adequately postpaid envelope, bearing the sender's name and address which was duly deposited in a U.S. Mailbox on the 29th day of December, 2003, pursuant to Section 801.14(2), Milwaukee, Wisconsin.

JOANNE L. FRANKEN, Paralegal

983 North Mayfair Road

Suite 200

Milwankee, Wisconsin 53226 Telephone: (414) 456-1111