



Sentry® Claims Service

July 23, 2001

P.O. Box 8026
Stevens Point, WI 54481-8026
800-638-8763
FAX: 715 346-9040

OFFICE OF THE CITY CLERK
ROOM 205 CITY HALL
200 E WELLS ST
MILWAUKEE WI 53202

CITY OF MILWAUKEE
2001 JUL 27 PM 12:48
RONALD D. LEONHARDT
CITY CLERK

CLAIM NUMBER: 66A970230-230
INSURED: DENISE HODKIEWICZ
DATE OF LOSS: JUNE 11, 2001
LOCATION OF LOSS: 5344 WEST STACK DRIVE, MILWAUKEE, WI 53219

With this letter, we are filing a claim against the City of Milwaukee for damage caused to our insured's vehicle by a previously damaged tree. This letter is also to serve as our notice of subrogation rights.

The claim was filed under an insurance policy with Sentry Insurance a Mutual Company. The claim was filed for automobile damage caused by a fallen limb from a city-owned-elm tree.

During the summer of 2000, lightning struck and damaged a large portion of a city-owned-elm tree in front of our insured's property. Mr. Jeff Hodkiewicz had called the Milwaukee forestry services and requested maintenance for the damaged tree. The forestry department told Mr. Hodkiewicz the tree was fine.

On June 11, 2001, a large storm with very high winds came through the area. The wind caused the previously damaged limb to separate from the tree and land on our insured's parked and unoccupied vehicle. The enclosed photographs show decay present on the tree prior to the June 11, 2001, storm. It was this previously reported damage that caused a weakness in the tree's strength which ultimately resulted in the vehicle damage.

Enclosed you will find a copy of the repair estimate for our insured's 1995 Chevy S10 Blazer. The total cost to repair our insured's vehicle was \$3,233.60, this amount includes our insured's deductible. Our insured is also having an out-of-pocket expense for obtaining a rental vehicle while their vehicle is in the shop for repairs. Once the repair process is complete, we will obtain a copy of the rental invoice and submit a copy to your office.

As the previous damage has been reported, by our insured to the city and a request had been made for the damaged portion of that tree to be removed, and as the city failed to remove the damaged portion of the tree, we find the City of Milwaukee to negligent for failure to maintain their property. Sentry Insurance is, therefore, formally filing our

Serving:

Sentry Insurance a Mutual Company
Dairyland Insurance Company
Dairyland County Mutual Insurance Company of Texas

Sentry Life Insurance Company
Sentry Life Insurance Company of N.Y.

Middlesex Insurance Company
Patriot General Insurance Company
Sentry Select Insurance Company

CITY OF MILWAUKEE
RECEIVED
2001 JUL 27 PM 12:29
CITY OF MILWAUKEE

OFFICE OF THE CITY CLERK

Page 2

July 23, 2001

subrogation request in the immediate amount of \$3,233.60. The rental amount will be attached later as a supplement. Please forward payment in the amount of \$3,233.60 to Sentry Insurance, PO Box 8026, Stevens Point, Wisconsin 54481. Also, please notify our office as soon as a claim is filed and to whom the rental supplement needs to be sent. If there are any questions or you wish to discuss this matter further, please contact our office.

Teresa Jagodinski
Sentry Insurance
Extension 9717

OFFICE OF THE CITY CLERK

Milwaukee, Wisconsin

INSTRUCTIONS FOR FILING A CLAIM AGAINST THE CITY OF MILWAUKEE

To file a claim against the City of Milwaukee which complies with sec. 893.80, Stats., the following information must be submitted in writing to the City Clerk, Room 205, City Hall, 200 East Wells Street, 53202.

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.

In order to allow the City to thoroughly and promptly act on your claim, the following information should also be submitted.

1. Proof of the amount of the claim by means of either two itemized estimates or itemized receipted bills.
2. Your phone number where you can be reached during business hours.
3. As detailed a description of the incident as possible including the date, time and place.

286-3781

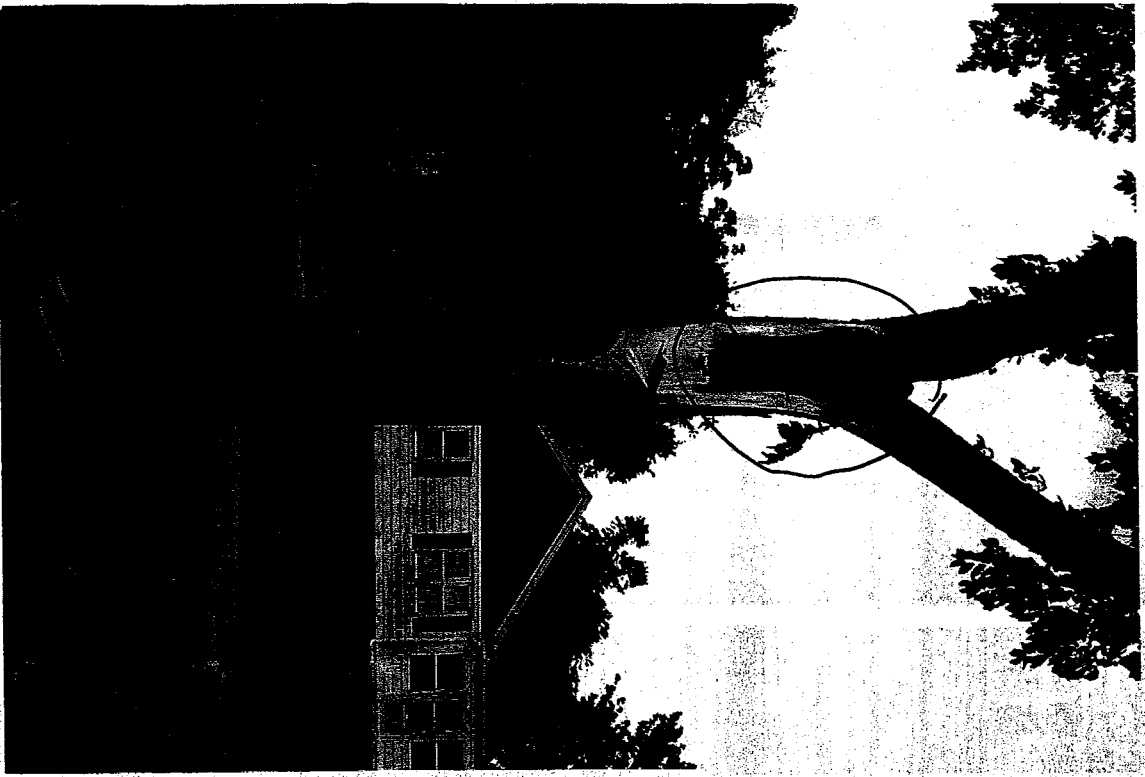
Ronald D. Leonhardt

RONALD D. LEONHARDT
City Clerk

kmm

claim-info

burn spot from lightning hit
Summer of 2000.
Signs of rotted wood below
and around burn spot





close up of old burn
spot and decay



During the June 11th Storm the Elm tree located to the east of my property fell on my car. This occurred at about 10:40 pm. The winds took the tree limb down.

During the summer of 2000 my husband asked the forestry department to trim a limb that had been hit by lightning. They told him the tree was fine. This is the limb that fell on my car.

Denise Godlewicz

AA VEE01SY
06/14/2001 AT 11:50 AM
22744

66A970230A -F-

2

SENTRY INSURANCE
SENTRY CLAIMS SERVICE
CUSTOMER SERVICE IS OUR PRIORITY!

SUITE 201
1233 N. MAYFAIR RD.
WAUWATOSA, WI 53226
(414)479-3734 FAX: (414)479-3710

ESTIMATE OF RECORD

WRITTEN BY: JIM LUTHER # 06/14/2001 11:49 AM
ADJUSTER: TERESA JAGODINSKI #

INSURED: DENISE HODKIEWICZ
OWNER: DENISE HODKIEWICZ
ADDRESS: AND JEFFREY
5344 WEST STACK DR

CLAIM #66A970230A -F-
POLICY #73864535100
DATE OF LOSS: 06/11/2001

2

MILWAUKEE, WI 53219-0000
EVENING: (414)329-1249X0000
OTHER: (414)329-1249
INSPECT HODKIEWICZ, DENISE
LOCATION: 5344 WEST STACK DR
MILWAUKEE, WI 53219

TYPE OF LOSS: COMPREHENSIVE
POINT OF IMPACT: 12. FRONT

REPAIR BROWNELL QUALITY COLLISION CENTE
FACILITY: 10414 W. GREENFIELD AVE
WEST ALLIS, WI 53214

BAY (414)329-1249
OTHER
BUSINESS: (414)774-0610
DAYS TO REPAIR
LICENSE # 391758646

1995 CHEV BLAZER 4X4 6-4.3L-FI 4D UTV TEAL INT:GREY
VIN: 1GNDT13W352138418 LTC: NML197 WI PROD DATE

ODOMETER: 61250

- AIR CONDITIONING
- CRUISE CONTROL
- DUAL MIRRORS
- POWER BRAKES
- AM RADIO
- CASSETTE
- DRIVER AIRBAG
- RECLINE/LOUNGE SEATS
- OVERDRIVE
- REAR DEFOGGER
- INTERMITTENT WIPERS
- CLEAR COAT PAINT
- POWER WINDOWS
- FM RADIO
- SEARCH/SEEK
- CLOTH SEATS
- AUTOMATIC TRANSMISSION
- TILT WHEEL
- TINTED GLASS
- POWER STEERING
- POWER LOCKS
- STEREO
- ANTI-LOCK BRAKES (4)
- SPLIT BENCH SEATS
- 4 WHEEL DRIVE

Make to Drop party

NO.	OP.	DESCRIPTION	QTY	EXT. PRICE	LABOR	PAINT
1		FENDER				
2*	REPL	QUAL RECY PARTS RT FENDER; EXC	1	198.00*	1.7	2.2
3		REFN EDGES				0.5
4		ELECTRICAL				
5	REPL	ANTENNA, FIXED	1	7.87	0.1	
6		WINDSHIELD				
7*	REPL	QUAL RECY PARTS W/SHIELD;	1	120.00	1.5*	
8	REPL	REVEAL MOLDING UPPER	1	9.20	INCL.	
9		ROOF				
10	REPL	ROOF PANEL	1	308.42	19.0	4.0

Net # C181337 6/19/01 TW

06/14/2001 AT 11:50 AM
22744

66A970230A -F-

2

ESTIMATE OF RECORD

1995 CHEV BLAZER 4X4 6-4.3L-FI 4D UTV TEAL INT:GREY

NO.	OP.	DESCRIPTION	QTY	EXT. PRICE	LABOR	PAINT
11		OVERLAP MAJOR NON-ADJ. PANEL				-0.2
12	REPL	RT CARRIER BAR FRONT AND REAR	1	48.60	0.3	
13*	REPL	A/M BLK. ROOF MLD.@ RIBS	1	30.00	0.4	
14	REPL	CENTER ROW FRONT	1	18.83	2.0	

AA VEE01SY
 06/14/2001 AT 11:50 AM
 22744

66A970230A -F-

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 ADJUSTER: TERESA JAGODINSKI #

INSURED: DENISE HODKIEWICZ CLAIM #66A970230A -F-
 OWNER: DENISE HODKIEWICZ POLICY #73864535100
 ADDRESS: AND JEFFREY DATE OF LOSS: 06/11/2001

2

5344 WEST STACK DR
 MILWAUKEE, WI 53219-0000

TYPE OF LOSS: COMPREHENSIVE
 POINT OF IMPACT: 12. FRONT

EVENING: (414)329-1249X0000
 OTHER: (414)329-1249

DAY: (414)329-1249

INSPECT HODKIEWICZ, DENISE
 LOCATION: 5344 WEST STACK DR
 MILWAUKEE, WI 53219

OTHER

REPAIR BROWNELL QUALITY COLLISION CENTE
 FACILITY: 10414 N. GREENFIELD AVE
 WEST ALLIS, WI 53214

BUSINESS: (414)774-0610
 3 DAYS TO REPAIR
 LICENSE # 391758648

1995 CHEV BLAZER 4X4 6-4.3L-FI 4D UTV TEAL INT:GREY
 VIN: 1GNDT13W3S2138418 LIC: NML197 WI PROD DATE:

ODOMETER: 61350

- | | | |
|----------------------|------------------------|----------------------|
| AIR CONDITIONING | REAR DEFOGGER | TILT WHEEL |
| CRUISE CONTROL | INTERMITTENT WIPERS | TINTED GLASS |
| DUAL MIRRORS | CLEAR COAT PAINT | POWER STEERING |
| POWER BRAKES | POWER WINDOWS | POWER LOCKS |
| AM RADIO | FM RADIO | STEREO |
| CASSETTE | SEARCH/SEEK | ANTI-LOCK BRAKES (4) |
| DRIVER AIRBAG | CLOTH SEATS | SPLIT BENCH SEATS |
| RECLINE/LOUNGE SEATS | AUTOMATIC TRANSMISSION | 4 WHEEL DRIVE |
| OVERDRIVE | | |

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2*	REPL	QUAL RECY PARTS RT FENDER; EXC	1	198.00*	1.7	2.2
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4		ELECTRICAL				
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10	REPL	ROOF PANEL	1	308.42	19.0	4.0

*WJH
 01/18/337
 1/19/01
 TEL*

06/14/2001 AT 11:50 AM
 22744

66A970230A -F-

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13*	REPL	A/M BLK. ROOF MLD.@ RIBS	1	30.00	0.4	

PRINT REQUESTED BY: JAGODINSKI, TERESA L

SOLAR PAYMENT VERIFICATION

REFERENCE NUMBER	CHECK NUMBER	DATE ISSUED	CLAIM NUMBER	INSURED NAME
018133722	024129654	061901	66 A 970230	HODKIEWICZ, DENISE L

THIS PAYMENT COVERS: COLLISION LOSS LESS DEDUCTIBLE

AMOUNT: \$ 3133.60
NOT NEGOTIABLE

THREE THOUSAND ONE HUNDRED THIRTY-THREE AND 60/100

PAYEE: HODKIEWICZ, DENISE OR JEFF AND MAIL TO: BROWNELL QUALITY COLLISION
BROWNELL QUALITY COLLISION

5344 WEST STACK DR

10414 W GREENFIELD AVE

MILWAUKEE

WI 53219

WEST ALLIS

WI 53214

***** ST4N *** 07-24-01 *** 08:20 *****