

November 9, 2018

City of Milwaukee

Office of the City Attorney

Milwaukee City Hall Suite 800
200 East Wells Street
Milwaukee, Wisconsin 53202-3551

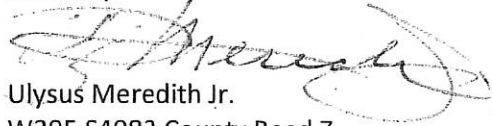
Claims # 1030-2018-2310

Dear Mr. Steve M. Carini:

Thank you for your letter. I would like to appeal your decision and request a hearing regarding claim # 1030-2018-2310.

Enclosed is a photocopy of your letter's envelope dated November 2, 2018.

Sincerely



Ulysus Meredith Jr.
W395 S4083 County Road Z
Dousman, Wisconsin 53118-9510
Home Phone# 262-965-5459
Cell Phone # 262-271-3512

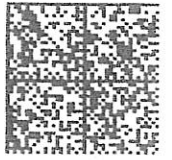
CITY OF MILWAUKEE
2018 NOV 15 A 9:10
CITY CLERK'S OFFICE

OFFICE OF THE CITY ATTORNEY
2018 NOV 15 AM 9:17

MILWAUKEE CITY CLERK'S OFFICE

CITY OF MILWAUKEE
Office of the City Attorney
OFFICE OF THE CITY ATTORNEY
800 City Hall
200 East Wells Street
Milwaukee, Wisconsin 53202-3551

PRESORTED
FIRST CLASS



U.S. POSTAGE & PITNEY BOWES
ZIP 53005 \$ 000.378
02 4W
0000351420 NOV 05 2018

Ulysus Meredith, Jr.
W395 S4083 County Road Z
Dousman, WI 53118-9510



Wlypus Meredith Jr
W. B. 25 S. 4883 County Rd Z
Dawson, WI. 53418-9510

RETURN RECEIPT
REQUESTED

CERTIFIED MAIL



7018 1130 0001 1463 7678



1000



53202

U.S. POSTAGE PAID
FCM LETTER
DELAFIELD, WI
53018
NOV 09, 18
AMOUNT

\$6.70

R2304H108921-15

RECEIVED
OFFICE OF CITY ATTORNEY

NOV 14 2018

10:32 AM P.M.

City of Milwaukee
Office of the City Attorney
800 City Hall
200 East Wells Street

Milwaukee, Wisconsin 53202-3551

ATTN: Steve Carini

532023551 0005



CITY OF MILWAUKEE October 22, 2018

2018 OCT 29 A 8:36

CITY CLERK'S OFFICE

RECEIVED
OFFICE OF CITY ATTORNEY

OCT 30 2018

12:31 A.M./P.M.

City Clerk

ATTN: CLAIMS

200 E. Wells St. Room 205

Milwaukee, WI 53202-3567

Claims # 10/19/2018 32250

At about 2:00 p.m. on October 19, 2018, I was sitting still in the left turn lane of southbound N.27TH street waiting for traffic to clear so I could safely turn onto eastbound W. Wisconsin Ave when "City" Vehicle Number 32250 sped by my right side; hitting my side view mirror, fender and bumper. The driver continued to speed away, thus I proceeded to chase him catching up with him at W. Clybourn St.

I called the Police who eventually came, but said because it was a city vehicle involve, I would have to file a claim with city. The Police Department therefore did not file a report.

I am seeking the full cost for the repair of my car.

Enclosed are two estimates: One from Goff's Collision Repair Center- Waukesha, and one from Mander Collision & Glass, Inc.

If there are no additional costs incurred, such as attorney fees, I will be satisfied with the lesser of the two estimates. Thus I am asking for \$628.74.

Thank you for your speedy response.


Ulysses Meredith Jr.

W395 S4083 County Road Z

Dousman, Wisconsin 53118-9510

Home Phone# 262-965-5459

Cell Phone # 262-271-3512



Goff's Collision Repair Center - Waukesha

Workfile ID: 4ebd8c86
Federal ID: 39-1212332

"Our Reputation Is No Accident"
W229 N2591 Duplainville Rd, Waukesha, WI 53186

Phone: (262) 650-1900
FAX: (262) 650-1924

RECEIVED
OFFICE OF CITY ATTORNEY

OCT 30 2018

12:52 A.M./P.M.

Preliminary Estimate

Customer: MEREDITH, ULYSUS

Job Number:

Written By: Nuri Yildiz

Insured: MEREDITH, ULYSUS
Type of Loss:
Point of Impact: 02 Right Front Pillar (Right Side)

Policy #:
Date of Loss:

Claim #:
Days to Repair: 0

Owner:
MEREDITH, ULYSUS
W395 S4083 County Rd Z
DOUSMAN, WI 53118
(262) 271-3512 Cell

Inspection Location:
Goff's Collision Repair Center - Waukesha
W229 N2591 Duplainville Rd
Waukesha, WI 53186
Repair Facility
(262) 650-1900 Business

Insurance Company:

VEHICLE

2013 NISS Altima SV 4D SED 4-2.5L Gasoline Electronic Fuel Injection RED

VIN: 1N4AL3AP9DC172580
License: ADM8656
State: WI

Interior Color:
Exterior Color: RED
Production Date: 11/2012

Mileage In: 176,699
Mileage Out:
Condition: Good
Vehicle Out:
Job #:

TRANSMISSION

Automatic Transmission

POWER

Power Steering
Power Brakes
Power Windows
Power Locks
Power Mirrors
Power Driver Seat

DECOR

Dual Mirrors
Tinted Glass
Console/Storage
Overhead Console

CONVENIENCE

Air Conditioning
Intermittent Wipers
Tilt Wheel
Cruise Control
Rear Defogger
Keyless Entry
Alarm
Message Center
Steering Wheel Touch Controls
Telescopic Wheel
Climate Control
Remote Starter
Backup Camera w/Parking Sensors

RADIO

AM Radio
FM Radio
Stereo
Search/Seek
CD Player
Auxiliary Audio Connection
Satellite Radio
SAFETY
Drivers Side Air Bag
Passenger Air Bag
Anti-Lock Brakes (4)
4 Wheel Disc Brakes
Front Side Impact Air Bags

Head/Curtain Air Bags
Hands Free Device

SEATS

Cloth Seats
Bucket Seats
WHEELS
Aluminum/Alloy Wheels

PAINT

Clear Coat Paint
OTHER
Traction Control
Stability Control
Power Trunk/Gate Release

Get live updates at www.carwise.com/e/3uwkJA

Preliminary Estimate

Customer: MEREDITH, ULYSUS

Job Number:

2013 NISS Altima SV 4D SED 4-2.5L Gasoline Electronic Fuel Injection RED

Line	Oper	Description	Part Number	Qty	Extended Price \$	Labor	Paint
1	#						
2		FRONT DOOR					
3		R&I RT R&I trim panel					
4		R&I RT Belt molding				0.5	
5		Repl RT Mirror outside w/o signal lamp	963013TH0A	1	427.65	0.3	
6		Repl RT Mirror cover w/o signal Imp	963733TH0A	1	32.18	0.4	
7		Add for Clear Coat				Incl.	0.4
8	#	Repl Flex Additive		1	7.00		0.1
9	#	Repl Hazardous Waste Removal		1	5.00		
SUBTOTALS					471.83	1.2	0.5

ESTIMATE TOTALS

Category	Basis	Rate	Cost \$
Parts			471.83
Body Labor	1.2 hrs @	\$ 62.00 /hr	74.40
Paint Labor	0.5 hrs @	\$ 62.00 /hr	31.00
Paint Supplies	0.5 hrs @	\$ 42.00 /hr	21.00
Subtotal			598.23
Sales Tax	\$ 598.23 @	5.1000 %	30.51
Grand Total			628.74
Deductible			0.00
CUSTOMER PAY			0.00
INSURANCE PAY			628.74

THE PRICE FOR THE AUTHORIZED REPAIRS WILL NOT BE EXCEEDED IF THE MOTOR VEHICLE IS DELIVERED TO THE SHOP WITHIN FIVE DAYS .

SUPPLEMENTAL REPAIRS MAY BE NECESSARY TO RESTORE THE VEHICLE TO PRE-LOSS CONDITION. ANY ADDITIONAL REPAIRS REQUIRED ABOVE AND BEYOND THIS ITEMIZED ESTIMATE WILL BE DOCUMENTED AND AUTHORIZED BY THE RESPONSIBLE PARTY BEFORE PROCEEDING WITH CHANGES.

MOTOR VEHICLE REPAIR PRACTICES ARE REGULATED BY CHAPTER ATCP 132, WIS. ADM. CODE, ADMINISTERED BY THE BUREAU OF CONSUMER PROTECTION, WISCONSIN DEPT. OF AGRICULTURE, TRADE AND CONSUMER PROTECTION, P.O. BOX 8911, MADISON, WISCONSIN 53708-8911.



Mander Collision & Glass, Inc.
 1604 Manhattan Dr., Waukesha, WI 53186
 Phone: (262) 446-0655
 FAX: (262) 446-0650

Workfile ID: cae10144
 Federal ID: 41-2000478
RECEIVED
 OFFICE OF CITY ATTORNEY

OCT 30 2018

12:50 A.M./P.M.

Estimate

RO Number:

Customer: Meredith, Ulysus Insurance: Na Adjuster: Phone: Claim: NA Loss Date: Deductible: Estimator: Jonathan Voll Create Date: 10/22/2018

2013 NISS Altima SV 4D SED 4-2.5L Gasoline Electronic Fuel Injection

VIN: 1N4AL3AP9DC172580 Interior Color: Mileage In: Vehicle Out:
 License: Exterior Color: Mileage Out:
 State: Production Date: Condition: Job #:

Line	Ver	Operation	Description	Qty	Extended Price \$	Part Type	Labor	Type	Paint
1	E01		FRONT DOOR						
2	E01	Remove/Replace	RT Mirror outside w/o signal lamp	1	427.65T	OEM	0.4T	Body	
3	E01	Remove/Replace	RT Mirror cover w/o signal lmp	1	32.18T	OEM	0.0T	Body	0.4T
4	E01		Add for Clear Coat						0.1T
5	E01	Remove/Install	RT R&I trim panel				0.5T	Body	
6	E01		FENDER						
7	E01	Repair	RT Fender				1.0T	Body	2.2T
8	E01		Overlap Minor Panel						(0.2)T
9	E01		Add for Clear Coat						0.8T
10	E01		FRONT LAMPS						
11	E01	Remove/Install	RT Headlamp assy w/o xenon type				0.4T	Body	
12	E01		FRONT BUMPER						
13	E01	Repair	Bumper cover				1.0T	Body	3.2T
14	E01		Add for Clear Coat						1.3T
15	E01	Overhaul	O/H bumper assy			OEM	2.7T	Body	
16	E01		Flex additive	1	5.00T	Other			
17	E01		Cover car	1	5.00T	Other			
18	E01		Hazardous waste	1	3.00T	Other			
19	E01		Pre-post sca				1.0T	Mech	

Estimate Totals	Discount \$	Markup \$	Rate \$	Total Hours	Total \$
Parts					472.83
Labor, Body			60.00	6.0	360.00
Labor, Refinish			60.00	7.8	468.00
Labor, Mechanical			95.00	1.0	95.00

T = Taxable Item, RPD = Related Prior Damage, AA = Appearance Allowance, UPD = Unrelated Prior Damage, PDR = Paintless Dent Repair, A/M = Aftermarket, Rechr = Rechromed, Reman = Remanufactured, OEM = New Original Equipment Manufacturer, Recor = Re-cored, RECOND = Reconditioned, LKQ = Like Kind Quality or Used, Diag = Diagnostic, Elec = Electrical, Mech = Mechanical, Ref = Refinish, Struc = Structural

Estimate

RO Number:

2013 NISS Altima SV 4D SED 4-2.5L Gasoline Electronic Fuel Injection

Material, Paint	40.00	7.8	312.00
Subtotal			1,707.83
Sales Tax			87.10
Grand Total			1,794.93
Net Total			1,794.93

Estimate Version	Total \$
Original	1,794.93

Insurance Total \$:	1,794.93
Received from Insurance \$:	0.00
Balance due from Insurance \$:	1,794.93

Customer Total \$:	0.00
Received from Customer \$:	0.00
Balance due from Customer \$:	0.00

T = Taxable Item, RPD = Related Prior Damage, AA = Appearance Allowance, UPD = Unrelated Prior Damage, PDR = Paintless Dent Repair, A/M = Aftermarket, Rechr = Rechromed, Reman = Remanufactured, OEM = New Original Equipment Manufacturer, Recor = Re-cored, RECOND = Reconditioned, LKQ = Like Kind Quality or Used, Diag = Diagnostic, Elec = Electrical, Mech = Mechanical, Ref = Refinish, Struc = Structural

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.



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:**

RECEIVED
OFFICE OF CITY ATTORNEY

OCT 30 2018

12:40 A.M./P.M.

You will need the following information

DATE of Incident 10-19-2018 2:00 PM

"City" Vehicle Number 32250