

R.E. CASE File NO: 03-S-98

- REQUEST FOR HEARING -

Appealing City Decision TO  
DENY DAMAGE TO Vehicle CLAIM.

GABE COCONATE  
4845 N. NEVA  
CHICAGO, IL, 60656

Copy ENCLOSED -

CITY OF MILWAUKEE  
2003 MAY - 2 PM 2:49  
RONALD D. LEONHARDT  
CITY CLERK

CITY OF MILWAUKEE  
RECEIVED  
03 MAY - 2 PM 3:23  
OFFICE OF  
CITY ATTORNEY

2/18/03 9

My Son is a Marquette University Freshman Student.

ON FEBRUARY 2 2003 HIS CAR WAS ILLEGALLY TOWED FROM 716 N. 11th St. across the street from His Dorm. NO SIGNS -

POSTING - TICKETS etc - I AM CURRENTLY ARBITRATING THIS MATTER.

When first found out car was missing - Police Dept. Notified. Due to their mistake (wrong plates) they didn't know if car was stolen or they ordered the tow, which later they admitted they had vehicle towed.

ON FEB 4 2003 I PICKED UP MY SON, WENT TO COURT PAID FEES AND WAS INSTRUCTED TO GO TO THE POLICE POUND -

I PAID TOWING FEES. WHEN HIS CAR WAS BROUGHT UP TO FRONT GATE I NOTICED FOOT PRINTS ACROSS ENTIRE LENGTH OF VEHICLE - FOOT PRINTS GOING FROM FRONT BUMPER ACROSS HOOD - ACROSS HIS CONVERTIBLE CLOTH ROOF CONTINUING ACROSS REAR TRUNK RIDE -

DENTS - DAMAGE TO ALL OF THE ABOVE - THE ATTENDANT ON DUTY TOOK PICTURES AND OUR CAR ON RECORD AT POLICE POUND -

THIS DAMAGE HAD TO BE DONE BY YOUR TOWING COMPANY CONTRACTOR - YOU HAVE VIDEO

Tapes at the Police Pound  
according to your office people.  
I have enclosed copies  
of all related events.

I have estimate of  
damages done by your spewing  
people —

I appreciate all help  
and consideration in this matter  
This was a very disturbing  
entry into the city of Milwaukee  
and its workings. Considering  
I am funding my sons education  
in your city —

Thank you —

GABE COCONATE  
4845 N. NEVA  
CHGO, IL. 60656  
773-763-5543

JOHN J. JOHNSON  
MILWAUKEE  
2009 FEB 21 AM 11:57  
RONALD D. BOHANNON  
CITY CLERK

City of Milwaukee  
Tow Lot

Workstation ID : TowLotReg4  
Drawer ID : towcd4

Workstation Session No. : 14426  
Drawer Session No. : 1728

Receipt Number : 1065861  
Payment Date : 11:55 AM 02/04/2003

Item Description : Tow  
Issue # : T00004543  
Amount Due : \$95.00  
Amount Paid : \$95.00  
Balance Due : \$0.00

Paid by : CASH  
Amount Due : \$95.00  
Amount Paid : \$95.00  
Amount Tendered : \$100.00  
Amount Change : \$5.00  
Cashier ID : FJTM

Thank You For Your Payment

INSURANCE CARRIER: \_\_\_\_\_ TYPE OF INSURANCE: \_\_\_\_\_ ADJUSTOR: \_\_\_\_\_ PHONE: \_\_\_\_\_ CAR LOCATED AT: \_\_\_\_\_

PARTS AND ESTIMATE OF LABOR REQUIRED	PAINT COST ESTIMATE	PARTS COST ESTIMATE	LABOR COST ESTIMATE
REPAIR HOOD	3.0		5.0
" TRUNK	3.0		5.0
REPAIR CONVERT TOP (REF STITCH) SUBLET		200.00	
		126.00	
	6.0		
TOTALS			
	252.00	326.00	470.00
			998.00
GRAND TOTAL			
WRECKER SERVICE			
		TAX	27.71
TOTAL OF ESTIMATE			\$1,025.71

INSURED PAYS \$ \_\_\_\_\_ INS. CO. PAYS \$ \_\_\_\_\_ R.O. NO. \_\_\_\_\_

INS. CHECK PAYABLE TO \_\_\_\_\_

The above is an estimate, based on our inspection, and does not cover additional parts or labor which may be required after the work has been opened up. Occasionally, after work has started, worn, broken or damaged parts are discovered which are not evident on first inspection. Quotations on parts and labor are current and subject to change.

ESTIMATE MADE BY: Walter Ma 1-30-03

Authorization For Repairs: You are hereby authorized to make the above specified repairs to the car described herein.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

42.00 A.P. RATE: 1/10/03  
 PAID CASH \$525.71 2-3-03  
 BAL \$500.00 2-14-03

PAID & MAILED  
 (105.50)  
 (27.71)



DOB: \_\_\_\_\_ Driver's License: \_\_\_\_\_

Citation	Issue Date	Issue Time	Make	Code Violation	Vio	Location	Badge	Fine	Pen	Red	Pd	Due Amend
* 330273344	2/2/03	10:35 am	CHRY	771 PARKING IN EXCESS	759 N 11 ST	52451	30	0	0	0	0	30

Vehicle was Towed

TOW # T00004543

Open Ticket Count: 1

Total Amount Due: \$30.00

Amended Amount Due: Release

For City Attorney Use:

Signed For The Office Of The City Attorney: Mgt. Carolyn M. Stokes

Date: 2-4-03 Court Number: 48880

For Municipal Court:

Name: \_\_\_\_\_ (Please Print)

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date Of Birth: \_\_\_\_\_ Drivers License: \_\_\_\_\_

I Accept Full Responsibility For The Citations Listed Above:

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

VEHICLES THAT ARE TOW ELIGIBLE WILL REMAIN TOW ELIGIBLE FOR 3 DAYS AFTER ALL PARKING CITATIONS ARE PAID

X Joseph T Coconate

I will not challenge the TOW # T00004543

length