

November 25, 2002

City of Milwaukee  
Att: Robert Overholt  
200 East Wells Street, Room 205  
Milwaukee, WI 53202

Re: C.I. File No:02-S-332  
My Claim No. 00-651-310843-0623  
Insured: Marilyn White

Dear Mr. Overholt

This letter is in response to your denial I am requesting a hearing due to pictures of tree additional call to you regarding additional limbs, which fell from tree days later. You received (2) calls from me within the same week also the additional trimming by the City performed on that same tree within same week from a tree which you states **is alive tree which shows no external signs of decay.** If you have questions I can be reached at (414) 389-5812 (Work).

Very truly yours,

*Marilyn White*

Marilyn White  
Insured

Cc: Neil Schmidt

CITY OF MILWAUKEE  
2002 DEC -2 AM 9:46  
RONALD D. LEONHARDT  
CITY CLERK

CITY OF MILWAUKEE  
RECEIVED  
02 DEC -2 PM 3:41  
OFFICE OF  
CITY ATTORNEY

# CITY OF MILWAUKEE

Form CA-43

**GRANT F. LANGLEY**  
City Attorney

**RUDOLPH M. KONRAD**  
Deputy City Attorney

**THOMAS E. HAYES**  
**PATRICK B. McDONNELL**  
**LINDA ULISS BURKE**  
Special Deputy City Attorneys



## OFFICE OF CITY ATTORNEY

800 CITY HALL  
200 EAST WELLS STREET  
MILWAUKEE, WISCONSIN 53202-3551  
TELEPHONE (414) 286-2601  
TDD 286-2025  
FAX (414) 286-8550

**BEVERLY A. TEMPLE**  
**THOMAS O. GARTNER**  
**BRUCE D. SCHRIMPF**  
**ROXANE L. CRAWFORD**  
**SUSAN D. BICKERT**  
**HAZEL MOSLEY**  
**HARRY A. STEIN**  
**STUART S. MUKAMAL**  
**THOMAS J. BEAMISH**  
**MAURITA F. HOUREN**  
**JOHN J. HEINEN**  
**MICHAEL G. TOBIN**  
**DAVID J. STANOSZ**  
**SUSAN E. LAPPEN**  
**DAVID R. HALBROOKS**  
**JAN A. SMOKOWICZ**  
**PATRICIA A. FRICKER**  
**HEIDI WICK SPOERL**  
**KURT A. BEHLING**  
**GREGG C. HAGOPIAN**  
**ELLEN H. TANGEN**  
**MELANIE R. SWANK**  
**JAY A. UNORA**  
**DONALD L. SCHRIEFER**  
**EDWARD M. EHRlich**  
**LEONARD A. TOKUS**  
**MIRIAM R. HORWITZ**  
**MARYNELL REGAN**  
**G. O'SULLIVAN-CROWLEY**

Assistant City Attorneys

November 13, 2002

American Family Insurance Group  
Attn: Neil Schmidt  
Post Office Box 2927  
Milwaukee, WI 53201-2927

RE: C.I. File No: 02-S-332  
Your Clm No: 00-651-310843-0623  
Your Insured: Carl & Marilyn White

COPY

Dear Mr. Schmidt:

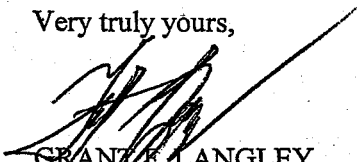
This office is in receipt of your claim in the amount \$1,728.15, relating to your subrogation interest and the interest of you insured arising from a September 29, 2002 incident in which your insured's vehicle was struck by a branch that fell from a tree owned by the City and located at 4556 North 71<sup>st</sup> Street.

The Forestry Division records indicate that on October 2, 2002, the Division received an emergency request involving a tree branch on your insured's vehicle. The tree was alive and showed no external signs of decay. Your insured indicated the damage occurred on September 29, 2002. The trees in this area were pruned June, 1999 per the division's programmed pruning schedule. The division searched its records for the last four years and found no notice of potential hazardous conditions or service requests for this location. The division acted within their established procedures. In addition, the limb fell from a live sound tree during windy conditions, and as such, the City cannot accept liability for your insured's loss. Accordingly, we are denying your claim.


American Family Insurance Group  
November 13, 2002  
Page 2

If you wish to appeal this decision, you may do so by sending a letter within 21 days of the receipt of this letter to the Milwaukee City Clerk, 200 East Wells Street, Room 205, Milwaukee, Wisconsin 53202, requesting a hearing.

Very truly yours,



GRANT F. LANGLEY  
City Attorney



ROBERT M. OVERHOLT  
Investigator Adjuster

RMO:beg  
1068-2002-3140:60160

COPY



## AMERICAN FAMILY INSURANCE GROUP

440 S EXECUTIVE DR • BROOKFIELD WI 53005-4280 • PHONE: (262) 784-9100, 784-2933 • FAX: (262) 784-3828

Mailing Address: PO BOX 2927 • MILWAUKEE WI 53201-2927

October 7, 2002

CITY CLERK  
ATTN: CLAIMS  
200 E WELLS ST ROOM 205  
MILWAUKEE WI 53202-3567

CITY OF MILWAUKEE  
2002 OCT -9 PM 1:06  
RONALD D. LEONHARDT  
CITY CLERK

RE: Your Insured: CITY OF MILWAUKEE--4556 N. 71<sup>st</sup> St  
Your File Number: unknown  
Our Claim Number: 00-651-310843-0623  
Our Insured: Carl E & Marilyn White  
Date of Accident: September 29, 2002  
Total Claim: \$1,728.15  
Company Portion: \$1,478.15  
Insured's Deductible: \$250

Dear : CITY CLERK

We have been informed that you are responsible for the tree at or near the residence for the above-named party. It appears from our investigation that the tree damage in question was caused by the City's negligence. The total damage as well as the loss paid by the American Family Mutual Insurance Company are stated above.

If the City of Milwaukee is responsible for the damage, we would appreciate your offer of settlement. Such offer should take into consideration the total amount of the loss, including our insured's interest.

Respectfully,

Neil Schmidt  
Milwaukee West Claims

Enc.

cc: Carl & Marilyn White

CITY OF MILWAUKEE  
RECEIVED  
2002 OCT -9 PM 4:00  
OFFICE OF  
CITY ATTORNEY

# American Family Insurance Co.

400 S. EXECUTIVE DR.  
MILWAUKEE WI 53005

PHONE (414) 784-9100 FAX (262) 784-9125

CD LOG NO 4166

- 0

DATE 10-07-02

ESTIMATE

## CLAIM INFORMATION

CLAIM # 00-651-310843  
COMPANY AMERICAN FAMILY INS  
INSURED WHITE, CARL E & MARILYN  
CLAIMANT  
FILE HNDLR SCHMIDT, NEIL  
LOSS PAYEE

POLICY # 07-234729-04  
AGENT 163/046  
LOSS DATE 09-09-02  
LOSS TYPE COMPREHENSIVE  
FILE # 623  
ACCT # SCHMIDT, NEIL

## INSPECTION

TYPE DRIVE IN  
APPRAISER NAME JOHN FLEMING  
PHONE (414) 464-3350  
ADDRESS 7373 W FOND DU LAC AVE  
CITY STATE MILWAUKEE WI  
ZIP 53218

FAX (414) 464-2121  
INSP DATE 10-03-02  
LOCATION FONTOSA DRIVE IN  
CITY STATE

## OWNER

OWNER WHITE, CARL E & MARILYN  
ADDRESS 4556 N 71ST ST  
CITY STATE MILWAUKEE WI  
ZIP 53218

WORK PHONE  
HOME PHONE (414) 389-5812

## REPAIR

REPAIRER UPTOWN LINCOLN MERCURY  
PHONE (414) 777-5731  
CONTACT BRUCE GREGORY  
ADDRESS 2111 N MAYFAIR RD  
CITY STATE MILWAUKEE WI  
ZIP 53226

FAX (414) 771-8306  
CAR IN  
CAR OUT  
DAYS TO REPAIR  
REG. ID 390 889 732

## VEHICLE

2002 FORD FOCUS ZTS 4 DOOR SEDAN  
4 CYL ENGINES 2.0L ZETEC

## OPTIONS

TWO-STAGE - EXTERIOR SURFACES  
BUMPER COVER MOUNTED FOG LAMPS  
POWER DOOR LOCKS  
AIR CONDITIONING  
CRUISE CONTROL

TWO-STAGE - INTERIOR SURFACES  
ELEC REMOTE CONTROL MIRRORS  
POWER WINDOWS  
AUTOMATIC TRANS  
HEATED BACK GLASS

BODY COLOR BLACK  
CONDITION GOOD  
LICENSE # 767-CTV  
LICENSE STATE WI

MILEAGE 8,161  
VIN 1FAHP38382W243687  
CODE P157  
VEH INSP #

## REMARKS:

COLLECT DEDUCTIBLE FROM OWNER

PART	GDE	OPERATION	PRICE	LABOR	RT
FRONT END PANEL AND LAMPS					
Headlamp Assy, Halogen LT YS4Z13008KC	0041	Replace OEM	\$198.27	INC	SM
FRONT BODY AND WINDSHIELD					
Panel, Hood	0083	Repair/Align		4.0 *	SM
Panel, Hood	0083	Refinish		3.8	RF
		Surface		2.7	
		Two-stage		0.5	
		Two-stage Setup		0.6	
Fender, Front LT	0103	Replace OEM	\$150.00	2.2	SM

2002 FORD FOCUS ZTS 4 DOOR SEDAN  
Claim # 00-651-310843

Date 10-07-02  
Log 4166 - 0

YS4Z16006CA							
Fender, Front	LT	0103	Refinish Surface			2.8	RF
			Edge			1.8	
			Two-stage			0.5	
ROOF							
W/Strip, Roof	LT	0416	R&I Assembly			0.5	SM
Mldg, Roof Side	LT	0354	Replace OEM	\$26.72		0.3	SM
1S4Z5450463BA							
FRONT DOORS							
Pnl, Front Door Outer	LT	0209	Refinish Surface			2.3	RF
			Two-stage			1.9	
						0.4	
W/Strip, Belt Outer	LT	0025	R&I Assembly			0.2	SM
Mldg, Front Door Scalp	L/R	0267	R&I Assembly			0.2	SM
Mirror, Outer R/C	LT	0243	Replace OEM	\$55.52		0.3	SM
1S4Z17683MAA							
Handle, Front Door Otr	LT	0233	R&I Assembly			0.6	SM
QUARTER AND ROCKER PANEL							
Pillar, Hinge	LT	0163	Repair/Align			3.5 *	SM
07							
Pillar, Hinge	LT	0163	Refinish Surface			1.2	RF
			Two-stage			1.0	
						0.2	

14 ITEMS

MC MESSAGE

07 STRUCTURAL PART AS IDENTIFIED BY I-CAR

FINAL CALCULATIONS & ENTRIES

PARTS

GROSS PARTS	\$430.51	
OTHER PARTS		
PAINT MATERIAL	\$242.40	
PARTS TOTAL		\$672.91
TAX ON PARTS & MATERIAL @ 5.600%		\$37.68

LABOR RATE REPLACE HRS REPAIR HRS

1-SHEET METAL	\$44.00	4.3	7.5	\$519.20
2-MECH/ELEC	\$68.00			
3-FRAME	\$44.00			
4-REFINISH	\$44.00	10.1		\$444.40
5-PAINT	\$24.00			

LABOR TOTAL	\$963.60
TAX ON LABOR @ 5.600%	\$53.96
SUBLET REPAIRS	

GROSS TOTAL	\$1,728.15
LESS: DEDUCTIBLE	\$250.00-
NET TOTAL	\$1,478.15

PXN Y/00/00/00/00/00 CUM 00/00/00/00/00 GEOCODE: 53005 MILWAUKEE METRO  
SPPL YES GEOCODE: 53005 MILWAUKEE METRO  
ADP PHOTOLINK 2.60P ES HOST 4575123 LOG 4166 -0 10-07-02 12:13PM 3.38 CD 09/02  
COPYRIGHT © 2002 AUTOMATIC DATA PROCESSING

3.4 HOURS WERE ADDED TO THIS ESTIMATE BASED ON ADP'S TWO-STAGE REFINISH FORMULA: 20% OF REFINISH HOURS, AFTER OVERLAP, PLUS SETUP TIME FOR THE FIRST MAJOR PANEL, WHERE NOTED.

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.....THIS IS NOT AN AUTHORIZATION TO REPAIR, VEHICLE OWNER MUST AUTHORIZE. ANY SUPPLEMENT MUST HAVE PRIOR APPROVAL OF A REPRESENTATIVE OF THIS COMPANY.

Owner **WHITE, CARL E & MARILYN**  
Style/Model **FORD FOCUS ZTS 4 DOOR SEDAN**  
Insured **WHITE, CARL E & MARILYN**  
Loss Date **9/9/2002** Inspection Type **DRV / COMP**  
Destination **AMERICAN FAMILY INS**  
Ref Number **SCHMIDT, NEIL**

Claim **00-651-310843**  
Policy **07-234729-04**  
Agent **163/046**  
Claimant  
Shop Name **UPTOWN LINCOLN MERCURY**  
File # **623**

Photo # 2 Private Capture Date 10/3/2002 1:55PM



Photo # 3 Private Capture Date 10/3/2002 1:55PM

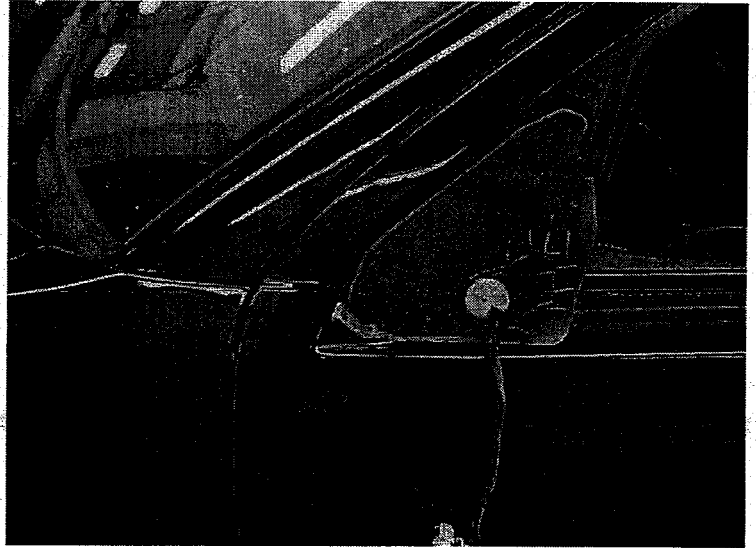
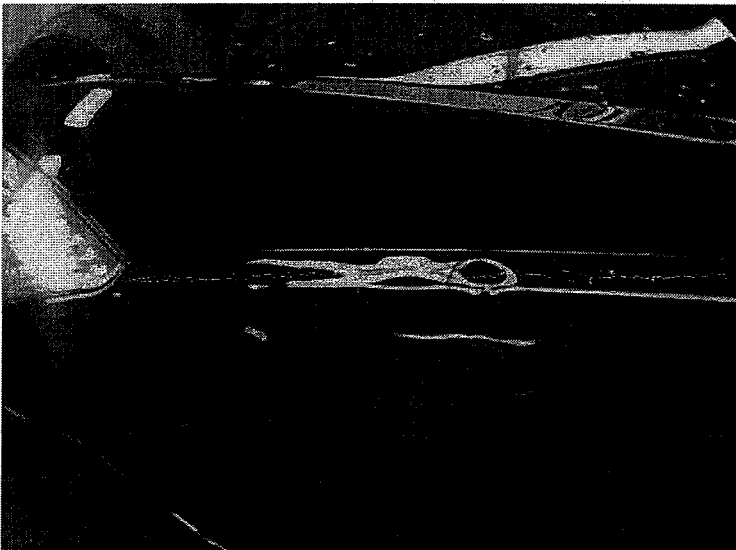


Photo # 4 Private Capture Date 10/3/2002 1:55PM



DRAFT RECORD DISPLAY

-----DATES-----  
DRAFT 0065789533 CLAIM 00-651-310843 POLICY 07-234729-04 ISSUED ACTIV  
PAYEE: WHITE, CARL E & MARILYN & UPTOWN LINCOLN MERCU 10/03/2002  
IN PAYMENT OF: COMPREHENSIVE LOSS OF 09/29/2002 250 DEDUCTIBLE APPLIE

MAILED TO: WHITE, CARL E & MARILYN  
4556 N 71ST ST

SERIES:  
PAGE:

MILWAUKEE WI 53218  
COMMENTS: DA JOHH FLEMING

STATUS: 01 NOT RECONCILED DRAFT TYPE: 01 CLAIMANT LOSS  
ID PERIL AMOUNT  
00 059 1,478.15 TOTAL: 1,478.15 TIN: 390889732  
TIN WITHHOLDING: 0.00 TYPE: 1  
-----  
DRAFT PAYMENT: \$1,478.15 HANDLING:

OPT -- POL -- ----- -- CLM -- ----- DRFT -----