

  
**afni** Insurance Services  
Subrogation Department

P.O. Box 3068 | Bloomington, IL 61702 | Phone 888-767-2361 | Fax 309-820-2626

March 24, 2008

CITY OF MILWAUKEE  
ATTN NANCY WORBEXKI  
200 E WELLS ST RM 205  
MILWAUKEE, WI 532023515

CITY OF MILWAUKEE  
2008 MAR 31 PM 1:36  
RONALD D. LEONHARDT  
CITY CLERK

Re: Our File #: 532724  
Claim #: 00-321-105322  
Insured: THOMAS E AND MARY M CRAINE  
Date of Loss: March 10, 2008  
Total Damages: \$6,012.59

Dear Ms. Worbeski

We are contacting you today on behalf of AMERICAN FAMILY INSURANCE regarding a loss, which occurred on March 10, 2008. The facts of the incident indicate that you are liable for payments that AMERICAN FAMILY INSURANCE made to its policyholder as a result of the loss. The balance due is \$6,012.59.

The City of Milwaukee did some work in the neighborhood of the Craines that resulted in a sewer backup and damage to the dwelling.

I enclose the documents that support this claim.

Please contact me at 888-767-2361 ext. 3589 with any questions and to discuss settlement.

Thank you for your cooperation.

Sincerely,

*Steve Chiles*

STEVEN CHILES  
Subrogation Specialist

Enclosure

CITY OF MILWAUKEE  
2008 MAR 31 PM 3:03  
RONALD D. LEONHARDT  
CITY CLERK

# Property Investigation Report

## Summary Report

Claim Number: 00-321-105322-0517 Adjuster Name: Gail Perla  
Insured Name: Thomas E & Mary M Craine Location of Risk: 1011 E Holt Ave  
Date Submitted: 3/10/2008 Date of Loss: March 10, 2008

### CONTACT INFORMATION:

Date Loss Reported: 3/10/08  
Date File Received: 3/10/08  
Date of First Contact: 3/10/08  
Date of Inspection: 3/10/08

### INVESTIGATION:

Investigation Conducted: Met with insured and numerous insured on block, city was out to unclog Grease clog in sewer main, they were on Holt street and unclogged the drain, Truck number 40061, license plat 58303, talked to Nancy Wrobeski she is charge of Sewer area, she is aware, they did nothing unusual, did put them on notice and called city clerks office Ronald Leonhard 200 E Wells #205, Milwaukee WI 53202

Cause: Off premise sewer back up  
Origin: Off premise and then into insured finished basement  
Subrogation: Yes, city of Milwaukee, see contact information above, have put on notice

### COVERAGE:

Coverage Issues: Off premise overflow, 466 L 5000 max 1000 ded  
Coverage Decisions: Covered based on the 466 limitation

### DAMAGED PROPERTY:

Coverage A: Concrete painted floor in laundry area, tile area in rec room, base molding, need to be cleaned, sanitized and extracted, drying equipment, anit microbial and heap filters  
Coverage B: Washer and dryer sewage up into bottom, 6 years old,  
Coverage C: Insured has relatives staying over, cleaner cannot get started until tomorrow, check with Country Inn and they can put the 7 people up for \$150 a night  
Salvage: None, sewage damaged  
Other: None

**SETTLEMENT ACTIVITY:**

Coverage A: Wrote up estimate and paid insured policy limits, \$5000 estimate did exceed was over \$6100 acv  
 Coverage B: Paid acv for washer and dryer, ded of \$1000 was applied to this  
 Coverage C: Paid insured \$150 for hotel stay for one night, basement will be cleaned first thing tomorrow  
 Other: none

**RESOLUTION PLAN:**

Action Plan: Put city on notice, have paid insured, will send file to subro  
 Reserve Recommendations: 5150.00  
 Authority Requested: 5150.00  
 Next Suspense Date: None, file sent to subro

**PAYMENT/RESERVE SUMMARY:**

Coverage	Peril	Paid to Date	Total Anticipated Claim Payments	Remaining Reserves
Coverage A	R 19	\$ 5000	\$ 5000	\$ 0
Coverage B	Q *	\$ *	\$ *	\$ *
Coverage C	X 19	\$ 150	\$ 150	\$ 0
Other	*	\$ *	\$ *	\$ *
Total		\$ 5,150.00	\$ 5,150.00	\$ 0.00

## American Family Insurance

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Attn: Scanning Center  
6000 American Parkway  
Madison, WI 53783  
gperla@amfam.com  
Phone: 414-525-9113 Fax 866-494-4928

March 10, 2008

CRAINE, THOMAS E & CRAINE, MARY M  
1011 E HOLT AVE  
MILWAUKEE, WI 53207-3539

RE: Claim Number: 00321105322  
Date of Loss: 03/10/2008

The attached estimate of damages has been prepared for your property. The estimate has used common prices for labor and material from your area.

Enclosed is our draft for the actual cash value (today's replacement cost less depreciation) of your damaged property. For Dwelling and Structure damages, we may have included your mortgage company, NATIONAL CITY MORTGAGE CO, on the draft as required by your policy.

### Summary For Sewer Back Up/Sump Pump Ovrflw

Coverage Type	Replacement Cost Value	Less Recoverable Depreciation	Less Non Recoverable Depreciation	Actual Cash Value (ACV)
Dwelling	\$6,497.20	(\$484.61)		\$6,012.59
Less Deductible				(\$1,000.00)
Total ACV Settlement (does not reflect any advance payments that may have been received):				\$5,012.59

See the enclosed estimate for details of your settlement which may include other itemized details not shown above.

If you wish to make a claim for the recoverable depreciation amount, you must do **TWO** things:

1. You must have the item(s) replaced or repaired within one year from your date of loss.
2. You must submit a final repair bill or purchase receipt showing the item(s) has been repaired or replaced.

The attached estimate is what we expect to be the reasonable cost to repair or replace the property. This estimate may not include taxes or permit fees. If total charges for repair/replacement plus taxes or permits exceed the amount shown here for that repair/replacement, prior to any deductible, then additional amounts may be payable. If the actual cost is more or less, the final payment will be adjusted accordingly. If you wish, you may repair or replace with higher quality items, however, you will be responsible for any increase in cost.

Please refer to your policy for the exact wording of your LOSS VALUE DETERMINATION or LOSS SETTLEMENT. This is found in CONDITIONS - SECTION I.

Please present this estimate to a contractor or repair facility of your choice BEFORE you authorize the start of repairs. If any additional damage or costs are identified, for which you believe we should be responsible, they must be approved by a representative of American Family Insurance prior to having the additional work done. If you, your contractor, or repair facility have any questions, please contact us at

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American Family Insurance appreciates your business.

Thank You,  
Gail Perla

**American Family Insurance**

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Insured: CRAINE, THOMAS E & CRAINE, MARY M

Property: 1011 E HOLT AVE  
MILWAUKEE, WI 53207-3539

Claim Rep.: Gail Perla

<u>Claim Number</u>	<u>Policy Number</u>	<u>Type of Loss</u>	<u>Deductible</u>
00321105322	48PU681001	Sewer Back Up/Sump Pump Ovrflw	\$1,000.00

Date Contacted: 03/10/2008

Date of Loss: 03/10/2008      Date Est. Completed: 03/10/2008

Price List: WIMW4B8A  
Restoration/Service/Remodel

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### Summary for Sewer Back Up/Sump Pump Ovrflw

Line Item Total				5,643.15
Total Adjustments for Base Service Charges				523.41
Material Sales Tax	@	5.600% x	752.25	42.13
Services Mat'l Tax	@	5.600% x	1,218.12	68.21
Subtotal				6,276.90
Service Sales Tax	@	5.600% x	3,933.91	220.30
Replacement Cost Value				6,497.20
Less Depreciation				(484.61)
<b>Actual Cash Value</b>				<b>6,012.59</b>
Less Deductible				(1,000.00)
<b>ACV Settlement</b>				<b>5,012.59</b>
Total Recoverable Depreciation				484.61
ACV Settlement if Depreciation is Recovered				5,497.20

As the insured, you, and you alone can authorize work to be completed on your home, The selection and use of a particular contractor is your choice. Please present this estimate to your contractor before you authorize the start of repairs. American Family Mutual Insurance Company needs to be contacted concerning additional or supplemental payments(s) on work being done that is not part of this estimate prior to this work being started or completed. If you or your contractor have any questions, please contact the American Family claims office.

This estimate does not include tax or permit fees. Additional amounts may be payable for tax and permit fees where the total repairs/replacement plus tax or permit fees exceeds the estimated amount for that repair/replacement, prior to any deductible.

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**CRAINE THOMAS E & C**

**Main Level**

basement

Ceiling Height: 8'

Missing Wall: 1 - 3'0" X 8'0" Opens into stairs Goes to Floor/Ceiling

640.00 SF Walls 384.00 SF Ceiling 1,024.00 SF Walls & Ceiling  
 384.00 SF Floor 42.67 SY Flooring 80.00 LF Floor Perimeter  
 80.00 LF Ceil. Perimeter

Description	Quantity	Unit Price	Replace Cost	Depreciation	Actual Cash Value
1. Equipment setup, take down, and monitoring (hourly charge)	8.00 HR	34.55	276.40	0.00	276.40
2. Dehumidifier (per 24 hour period) - XLarge - No monitoring	3.00 EA	114.72	344.16	0.00	344.16
3. Air mover axial fan (per 24 hour period) - No monitoring	6.00 EA	29.78	178.68	0.00	178.68
4. Apply anti-microbial agent	384.00 SF	0.17	65.28	0.00	65.28
5. Water extract from floor - Cat 3 water - aft business hrs	384.00 SF	1.25	480.00	0.00	480.00
6. Contents - move out then reset - Extra large room	1.00 EA	120.04	120.04	0.00	120.04
DEPRECIATON NOTE: No depreciation is applied to cleaning and drying.					
7. Add for HEPA filter (for neg. air machine/vacuum - Large)	3.00 EA	207.25	621.75	0.00	621.75
DEPRECIATON NOTE: No depreciation is applied to cleaning and drying.					
8. Dumpster load - Approx. 12 yards, 1-3 ton of debris	1.00 EA	285.50	285.50	0.00	285.50
9. R&R Washer - Top-loading - Standard grade	1.00 EA	406.76	406.76	244.06 (6.00 y / 10.00 y)	162.70
10. R&R Dryer - Electric - Standard grade	1.00 EA	438.31	438.31	210.39 (6.00 y / 12.00 y)	227.92
<b>Sub Total: basement</b>			<b>3,216.88</b>	<b>454.45</b>	<b>2,762.43</b>

rec

Ceiling Height: 8'



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640.00 SF Walls  
 384.00 SF Floor  
 384.00 SF Ceiling  
 42.67 SY Flooring  
 1,024.00 SF Walls & Ceiling  
 80.00 LF Floor Perimeter  
 80.00 LF Ceil. Perimeter

Description	Quantity	Unit Price	Replace Cost	Depreciation	Actual Cash Value
1. Dehumidifier (per 24 hour period) - XLarge - No monitoring	3.00 EA	114.72	344.16	0.00	344.16
2. R&R Baseboard - plastic (simulated wood)	80.00 LF	1.98	158.40	9.50 (6.00 y / 100.00 y)	148.90
3. Air mover axial fan (per 24 hour period) - No monitoring	9.00 EA	29.78	268.02	0.00	268.02
4. Content Manipulation charge - per hour	10.00 HR	31.75	317.50	0.00	317.50
5. Apply anti-microbial agent	384.00 SF	0.17	65.28	0.00	65.28
6. Water extract from floor - Cat 3 water - aft business hrs	384.00 SF	1.25	480.00	0.00	480.00
7. Contents - move out then reset - Extra large room	1.00 EA	120.04	120.04	0.00	120.04
DEPRECIATION NOTE: No depreciation is applied to cleaning and drying.					
8. Add for HEPA filter (for neg. air machine/vacuum - Large)	3.00 EA	207.25	621.75	0.00	621.75
Sub Total: rec			2,375.15	9.50	2,365.65

stairs

Ceiling Height: 17'

Missing Wall: 1 - 3'0" X 8'0" Opens into basement Goes to Floor/Ceiling

240.00 SF Walls  
 36.00 SF Floor  
 36.00 SF Ceiling  
 4.00 SY Flooring  
 276.00 SF Walls & Ceiling  
 30.00 LF Floor Perimeter  
 30.00 LF Ceil. Perimeter

Description	Quantity	Unit Price	Replace Cost	Depreciation	Actual Cash Value
1. Apply anti-microbial agent	36.00 SF	0.17	6.12	0.00	6.12
2. Water extract from floor - Cat 3 water - aft business hrs	36.00 SF	1.25	45.00	0.00	45.00

DEPRECIATION NOTE: No depreciation is applied to cleaning and drying.

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CONTINUED - stairs

Description	Quantity	Unit Price	Replace Cost	Depreciation	Actual Cash Value
<b>Sub Total: stairs</b>			51.12	0.00	51.12
<b>Sub Total: Main Level</b>			5,643.15	463.95	5,179.20
<b>Line Item Subtotals: CRAINE _ THOMAS _ E _ &amp; _ C</b>			5,643.15	463.95	5,179.20
<b>Adjustments for Base Service Charges</b>					<b>Adjustment</b>
Carpenter - Finish, Trim/Cabinet					106.56
Cleaning Remediation Technician					69.10
Electrician					144.02
General Laborer					31.75
Plumber					171.98
<b>Total Adjustments for Base Service Charges:</b>					<b>523.41</b>
<b>Line Item Totals: CRAINE _ THOMAS _ E _ &amp; _ C</b>			<b>6,166.56</b>	<b>463.95</b>	<b>5,702.61</b>

**Grand Total Areas:**

1,520.00 SF Walls	804.00 SF Ceiling	2,324.00 SF Walls and Ceiling
804.00 SF Floor	89.33 SY Flooring	190.00 LF Floor Perimeter
0.00 SF Long Wall	0.00 SF Short Wall	190.00 LF Ceil. Perimeter
835.22 Floor Area	859.22 Total Area	1,751.84 Interior Wall Area
1,375.00 Exterior Wall Area	140.00 Exterior Perimeter of Walls	
0.00 Surface Area	0.00 Number of Squares	0.00 Total Perimeter Length
0.00 Total Ridge Length	0.00 Total Hip Length	