

Rafael Escobedo Xicotencatl
CI File No: 06-V-13-1

March 20, 2006

To: Office of City Attorney

I am appealing the decision on my case; reference number above.

Please contact me per my address by letter ~~or~~ or phone:

1229 S. 16th St #3
Milwaukee, WI 53204
(414)-906-1663

Thank You

Rafael Escobedo X.

CITY OF MILWAUKEE
2006 MAR 22 AM 8:34
RONALD D. LEONHARDT
CITY CLERK

CITY OF MILWAUKEE

2006 MAR 21 10:20:00

1-6-06

CITY OF MILWAUKEE

2006 JAN 13 PM 1:17

Claimant RONALDO ESCOBEDO
CITY CLERK
1900 E Singer Cir #76
Milwaukee, WI 53212
414 906 1063
414 383 1835

CH: K...
...
...

Relief Sought: Restoration of car/vehicle due to accident

Money damages: \$5,000

*Please see both car estimates. These are only initial estimates. More damages may be seen when taking car apart to restore - therefore the amount of \$5,000.

Phone Number where can be reached: 414-906-1063 or 414-383-1835

Description of Accident: Refer to Accident Report.

Additional Info: Initially a NON-REPORTABLE Accident was written. But damages are more than \$1,000 - A second STATE Accident was written. Both Photocopies are included.

WISCONSIN DRIVER REPORT OF ACCIDENT

CONTINUE ONLY ...if there was \$1000 or more damage to any one person's property,
OR ...if anyone was injured,
OR ...if there was \$200 or more damage to government property, other than vehicles.

Hit and Run Accident? YES ACCIDENT

County of Milwaukee City, Village or Township of Milwaukee Month 12 Day 9 Year 05 Day of Week Fri Time 3:10 AM PM

Total Units Involved 2 Total Injured * 0 LOCATION Name and Number of Street(s) or Highway or Parking Lot S 18th St at Greenfield Ave

TYPE OF ACCIDENT (Please check one) Hit another motor vehicle in operation Hit a parked vehicle Hit a deer Hit a bicyclist or pedestrian Other

U N I T 1

Driver Full Name (Last, First, MI) Lo, Ka Sex F

Address 200 E Singer Cir #70 Birth Date 5-7-82

City & State Milwaukee, WI Zip Code 53202 Daytime Phone Number (714) 900-065

Driver License Number 2000 5008-2009-03 Issuing State WI

Vehicle Legally Parked YES NO Operating a commercial vehicle? YES NO If yes, circle appropriate classification A B C

Owner Full Name (Last, First, MI) Escobar Xicotencatl, Rafael

Address 1224 S 16th St #3

City & State Milwaukee, WI Zip Code 53204 Daytime Phone Number (414) 383-1835

License Plate Number 758-KBS Exp Yr WI Issuing State WI Vehicle Make Honda Year 95 Color yel

Vehicle Identification Number 1HGE38058SL028173

Was a motor vehicle liability insurance policy in effect on the day of the accident? NO YES Policy Holder's Name SELF

Exact Name of Insurance Company

U N I T 2

Driver Full Name (Last, First, MI) Crawley, Scott T Sex M

Address 200 E Wells St Birth Date 2-17-77

City & State Milwaukee, WI Zip Code 53202 Daytime Phone Number (714) 546-205

Driver License Number 0640-7981-1052-04 Issuing State WI

Vehicle Legally Parked YES NO Operating a commercial vehicle? YES NO If yes, circle appropriate classification A B C

Owner Full Name (Last, First, MI) City of Milwaukee

Address 200 E Wells St

City & State Milwaukee, WI Zip Code 53202 Daytime Phone Number (414) 546-1781

License Plate Number 50041 Exp Yr WI Issuing State WI Vehicle Make Internat Year 04 Color U-C

Vehicle Identification Number 1HTSDAAR1V11-178-175

Was a motor vehicle liability insurance policy in effect on the day of the accident? NO YES SELF Policy Holder's Name

Exact Name of Insurance Company City of Milwaukee

*INJURED Important: Number of injuries reported must equal number entered in "Total Injured" box above. For additional injuries, provide the information on a separate piece of paper and attach.

Injury Codes: A=Severe, B=Moderate, C=Minor

Unit No	Name (Last, First, MI)	Address	City & State	Zip Code	Sex	Birth Date	Injury Code
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VEHICLE DAMAGE Unit 1 - Important - Circle the numbers closest to the damaged areas.

Damage Estimate (Required): \$4,000.00

Unit 2 - Important - Circle the numbers closest to the damaged areas.

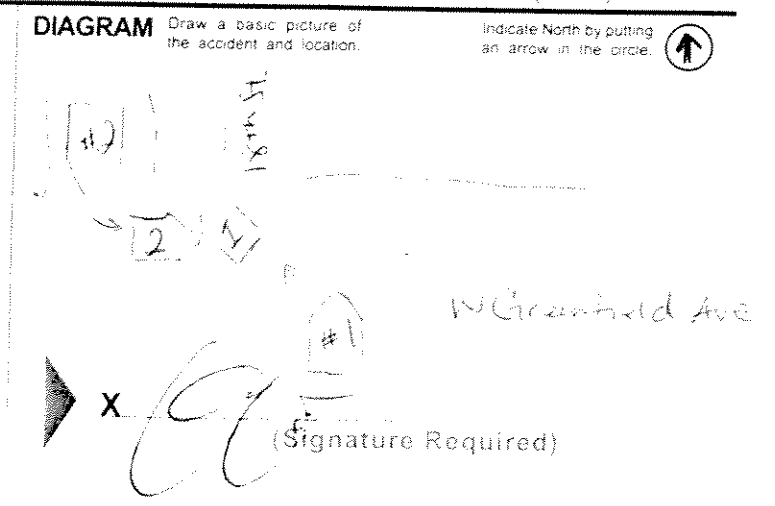
Damage Estimate (If Known): NONE

PROPERTY DAMAGE Describe what was damaged. Property damage includes structures, trees, fences, towed items, etc. Do NOT include vehicle damage.

Property Owner Full Name (Last, First, MI) _____ Address, City, State & Zip Code _____ Daytime Phone Number _____

NARRATIVE Print a brief description of the accident.

Unit #2 was S/B on S 18th St, turning left to W Greenfield Ave. Unit #1 was exiting a parking lot crossing W Greenfield Ave traveling N/B. The plow on Unit #2 struck the left front of Unit #1.



Wisconsin DRIVER REPORT OF ACCIDENT

▶ **DO NOT COMPLETE** this Driver Report of Accident if a law enforcement officer completed a Wisconsin Motor Vehicle Accident Report.

▶ **COMPLETE** this Wisconsin Driver Report of Accident if:

- There was \$1000 or more damage to any one person's property
- OR -
- Anyone was injured
- OR -
- There was \$200 or more damage to government property, other than vehicles.

MV4002 1/2004 s.346.70(2) Wis. Stats.

Wisconsin Department of Transportation

Please provide all requested information. Print clearly.

1. You are "Unit 1".
2. An individual involved in the accident must sign the report.
3. Provide all information on the other driver(s)/owner(s) involved. Incomplete reports may be returned requesting missing information. If you need assistance, contact your insurance agent, local law enforcement agency, or the DOT Traffic Accident Section at 608-266-8753.
4. Use the "Narrative" and "Diagram" sections to explain how the accident happened.
5. If more space is needed, use plain paper and attach to this report.
6. This form is available at www.dot.wisconsin.gov/drivers/drivers/traffic/accident.htm.

Retain a copy of this report for your records before mailing.

Mail completed report to address shown below.

(Fold report so that address panel shows to outside - tape bottom edge closed and mail - Do not staple).

Important - Please print your return address:

Ra Le
1200 E Singer Cir #76
Milwaukee, WI 53212



TRAFFIC ACCIDENT SECTION
WISCONSIN DEPT OF TRANSPORTATION
P O BOX 7919
MADISON WI 53707-7919



MILWAUKEE POLICE DEPARTMENT DRIVER INFORMATION EXCHANGE NON-REPORTABLE ACCIDENT

IMPORTANT
INSTRUCTIONS
ON REVERSE SIDE

DATE: 12-9-05 TIME: 3:10 pm LOCATION: 51897 at W. Greenfield St DISTRICT: 6

UNIT #1	UNIT #2	UNIT #3
DRIVERS NAME: <u>CAROLY 5004 T</u>	DRIVERS NAME: <u>LO TK</u>	DRIVERS NAME: _____
D.O.B. <u>2-12-77</u> INS. CO.: <u>GEFF</u>	D.O.B. <u>5-9-82</u> INS. CO.: <u>120186</u>	D.O.B. _____ INS. CO.: _____
ADDRESS: <u>200 E WELLS</u>	ADDRESS: <u>2005 WILSON C/C 676</u>	ADDRESS: _____
CITY: <u>MILWAUKEE</u> STATE: <u>WI</u> ZIP: <u>53202</u>	CITY: <u>MILWAUKEE</u> STATE: <u>WI</u> ZIP: <u>53202</u>	CITY: _____ STATE: _____ ZIP: _____
VEH. OWNER: <u>CITY of MILWAUKEE</u>	VEH. OWNER: <u>SCARBORO-SICOMERATI, ANGELO</u>	VEH. OWNER: _____
DRIVER'S PHONE NUMBER: <u>(414) 246-9819</u>	DRIVER'S PHONE NUMBER: <u>(414) 906-1663</u>	DRIVER'S PHONE NUMBER: () () ()
VEH. OWNER'S PHONE NUMBER: <u>(414) 2150</u>	VEH. OWNER'S PHONE NUMBER: <u>(414) 283-1835</u>	VEH. OWNER'S PHONE NUMBER: () () ()
DL#: <u>4940-9987-7052-04</u> STATE: <u>WI</u> EXP: <u>11</u>	DL#: _____ STATE: _____ EXP: _____	DL#: _____ STATE: _____ EXP: _____
YEAR: <u>95</u> MAKE: <u>HONDA</u> COLOR: <u>YEL</u>	YEAR: <u>95</u> MAKE: <u>HONDA</u> COLOR: <u>YEL</u>	YEAR: _____ MAKE: _____ COLOR: _____
TYPE: <u>TRK</u> PLATE #: <u>5004</u> STATE: <u>WI</u>	TYPE: <u>TRK</u> PLATE #: <u>258-664</u> STATE: <u>WI</u>	TYPE: _____ MAKE: _____ PLATE #: _____ STATE: _____
VIN. # <u>1HG3DA47VH478475</u>	VIN. # <u>1H666865951028173</u>	VIN. # _____

OWNER: _____ ADDRESS: _____ PHONE #: () () ()

WITNESS NAME: #1 _____ ADDRESS: _____ PHONE #: () () ()

WITNESS NAME: #2 _____ ADDRESS: _____ PHONE #: () () ()

CIT. / W.C. List Statute No. 1 346.18(4) Circle One

CIT. / W.C. List Statute No. 2 343.44(1)(a) Circle One

SHORT NARRATIVE (List First Harmful Event): 401st Ave & 189th, Trucking
left to create field for unit #2, was exiting a park way lot
causing vehicle to travel on N/B. The driver of unit #1
struck the left front of unit #2.

MANNER OF COLLISION	Direction of Travel Before Accident
<input checked="" type="checkbox"/> 5	Unit 1 <input checked="" type="checkbox"/> 5
<input type="checkbox"/> 1	Unit 2 <input type="checkbox"/> 2
<input type="checkbox"/> 2	Unit 3 <input type="checkbox"/> 3

ROAD CONDITION

1. Dry	2. Wet	3. Snow/Slush	4. Ice
5. Sand/Mud/Dirt/Oil	6. Other	7. Unknown	8. Other

WHAT DRIVERS WERE DOING

1. Going Straight Ahead	2. Left Turn	3. Right Turn	4. Slow/Stopping
5. Stop in Traffic	6. Legally Parked	7. Vol. No Pass Zone	8. Illegally Parked
9. Park Maneuver	10. Backing	11. Changing Lanes	12. Overtake Left
13. Overtake Right	14. U-Turn	15. Turn On Rhd	16. Merging
17. Negotiating Curve	18. Other		

CIRCLE DAMAGED AREA ON VEHICLE WITH SEVERITY CODES

SEVERITY CHART

1. SCRATCH/SCUFF	2. VERY MINOR	3. MINOR
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DISTRIBUTION

WHITE — TRAFFIC SECTION
 YELLOW — DRIVER
 PINK — DRIVER
 GOLDENROD — DRIVER

OFFICER NAME (PRINT) POI. HARTER

EMPLOYEE I.D. NUMBER 012851 DISTRICT LOCATION NUMBER 29

ANDREW AUTOMOTIVE - BODY REPAIR CENTER
 1621 W. LA SALLE ST.
 MILWAUKEE, WI 53209
 PH: 414-540-2559 FX: 414-228-7420

EST #1

CD LOG NO 5948-1 DATE 12/29/05

SHOP: ANDREW AUTO BODY REPAIR INSP DATE: 12/29/05
 ADDRESS: 1621 W. LASALLE ST. CONTACT: DAVID MAERTZ
 CITY STATE: GLENDALE, WI PHONE 1: (414)540-2559
 ZIP: 53209- FAX: (414)228-7420

OWNER: LO, KA WORK PHONE: (414)906-1663
 ADDRESS: 1200 E. SINGER CIR #76
 CITY STATE: MILWAUKEE, WI
 ZIP: 53212

POINT OF IMPACT: 5 TYPE OF LOSS: /DRV

LIC#: STATE: VIN: 1HGEG8658SL028473
 BODY COLOR: YELLOW MILEAGE:
 CONDITION: GOOD ACCTNG CTL#:

*=USER-ENTERED VALUE	E=REPLACE OEM	NG=REPLACE NAGS
EC=REPLACE ECONOMY	UE=REPLACE OE SURPLUS	UC=RECONDITIONED PRT
UM=REMAN/REBUILT PRT	EU=REPLACE SALVAGE	EP=REPLACE PXN
OE=REPLACE PXN OE SRPLS	PC=PXN RECONDITIONED	PM=PXN REMAN/REBUILT
TE=PARTL REPL PRICE	ET=PARTL REPL LABOR	IT=PARTIAL REPAIR
I=REPAIR	L=REFINISH	BR=BLEND REFINISH
TT=TWO-TONE	CG=CHIPGUARD	SB=SUBLET
N=ADDITIONAL LABOR	RI=R&I ASSEMBLY	P=CHECK
AA=APPEAR ALLOWANCE	RP=RELATED PRIOR	UP=UNRELATED PRIOR

1995 HONDA CIVIC LX 4DOOR SEDAN 4CYL GASOLINE 1.5
 CODE: H0243E/D OPTNS H/24BILGO

OPTIONS:
 TWO-STAGE - EXTERIOR SURFACES TWO-STAGE - INTERIOR SURFACES
 ELEC REMOTE CONTROL MIRRORS POWER DOOR LOCKS
 POWER WINDOWS CRUISE CONTROL
 U.S.A. BUILT VEHICLE

OP	GDE	MC	DESCRIPTION	MFG. PART NO.	PRICE	AJ%	B%	HOURS	R
E	0054		PARKLAMP ASSEMBLY	LT 33350SR4A02	49.07			INC	1
BR	0083	13	PANEL, HOOD	BLEND REFINISH				2.2	4
RI	0033		EMBLEM, HOOD PANEL	R&I ASSEMBLY				0.2	1
E	0118	07	REINF, INNER FENDER	LT 60262SR4000ZZ	18.40			0.2	1
L	0118		REINF, INNER FENDER	LT REFINISH				0.4	4
E	0103		FENDER, FRONT	LT 60261SR4507ZZ	231.62			3.1	1
L	0103		FENDER, FRONT	LT REFINISH				2.9	4
E	0124		MLDG, FENDER SIDE	L/R 75321SR4A01	11.38			0.2	1

1995 HONDA CIVIC LX 4DOOR SEDAN
 CD LOG NO 5948-1

TE	0108	GUARD, FENDER MUD	PART/PARTIAL REPL	30.60		1
ET	0112	GUARD, FENDER MUD	LT LABOR/PARTL REPLA			0.2 1
E	0110	SKIRT, INNER FENDER	LT 74151SR3000	38.97		INC 1
I	0970	SUSP ALIGN, 4 WHEEL	SUBLET REPAIR	79.95*		2
I	0207	DOOR SHELL, FRONT	LT REPAIR			2.0*1
L	0207	DOOR SHELL, FRONT	LT REFINISH			2.0 4
E	0209	PNL, FRONT DOOR OUTE	LT 67151SR4506ZZ	250.86		7.1 1
L	0209	PNL, FRONT DOOR OUTE	LT REFINISH			0.6 4
E	0266	MLDG, FRONT DOOR SID	LT 75322SR4A01	60.73		0.3 1
E	0229	MIRROR, OUTER R/C	LT 76250SR1A16	202.71		INC 1
BR	0289	PNL, REAR DOOR OUTER	LT BLEND REFINISH			1.0 4
RI	0264	MLDG, REAR DOOR BELT	LT R&I ASSEMBLY			0.8 1
RI	0307 01	PNL, INNER DOOR TRIM	LT R&I ASSEMBLY			INC 1
RI	0305	HANDLE, RR DOOR OUTE	LT R&I ASSEMBLY			0.1 1
L	M15	COLOR TINT	REFINISH			0.2*4
L	M17	COVER CAR EXTERIOR	REFINISH			*4
SB	M60	HAZARD. WSTE. REM.	SUBLET REPAIR	5.00*		1
N		DIAGNOSE WINDOWS	ADDNL LABOR OPERA			1.0*2*

26 ITEMS

MC MESSAGE(S)
 01 CALL DEALER FOR EXACT PART NUMBER / PRICE
 07 STRUCTURAL PART AS IDENTIFIED BY I-CAR
 13 INCLUDES 0.6 HOURS FIRST PANEL TWO-STAGE ALLOWANCE

FINAL CALCULATIONS & ENTRIES

GROSS PARTS					894.34
PAINT MATERIAL					260.40
PARTS & MATERIAL TOTAL					1,154.74
TAX ON PARTS & MATERIAL @				5.600%	64.67
LABOR	RATE	REPLACE HRS	REPAIR HRS		
1-SHEET METAL	48.00	12.2	2.0		681.60
2-MECH/ELEC	83.00		1.0		83.00
3-FRAME	48.00				
4-REFINISH	48.00	9.3			446.40
5-PAINT MATERIAL	28.00				
LABOR TOTAL					1,211.00
TAX ON LABOR		@		5.600%	67.82
SUBLET REPAIRS					84.95
TAX ON SUBLET		@		5.600%	4.76
TOWING					
STORAGE					

GROSS TOTAL 2,587.94

NET TOTAL 2,587.94

ADP SHOPLINK UG202 ES CD LOG 5948-1 DATE 12/29/05 08:45:00AM R6.37 CD 12/05
 PXN: Y/00/00/00/00/00 CUM 00/00/00/00/00 GEOCODE 53209

HOST LOG

(C) 1998 - 2005 ADP CLAIMS SOLUTIONS GROUP, INC.

1995 HONDA CIVIC LX 4DOOR SEDAN
CD LOG NO 5948-1

2.4 HRS WERE ADDED TO THIS EST. BASED ON ADP TWO-STAGE REFINISH FORMULA.

RUSS DARROW COLLISION CENTER
 7676 NORTH 76TH STREET
 MILWAUKEE WI 53224-9010
 PHONE (414) 362-7520 FAX (414) 355-6744
 MOBILE ESTIMATING (414) 587-9015 AT DEALERSHIPS

EST#2

CD LOG NO 9257-1 DATE 01/06/06

SHOP: RUSS DARROW COLLISION CENTER INSP DATE: 01/06/06
 ADDRESS: 7676 NORTH 76TH STREET CONTACT: MARTIN REHFELDT
 CITY STATE: MILWAUKEE, WI PHONE 1: (414)362-7520
 ZIP: 53223- PHONE 2: (414)354-8338
 FAX: (414)355-6744

OWNER: LO, KA HOME PHONE: (414)906-1663
 ADDRESS: 1200 EAST SINGER CIRCLE
 APT 76
 CITY STATE: MILWAUKEE, WI
 ZIP: 53212

POINT OF IMPACT: 6 TYPE OF LOSS: /DRV

LIC#: STATE: WI VIN: 1HGEG8658SL028473
 BODY COLOR: YELLOW MILEAGE:
 CONDITION: GOOD ACCTNG CTL#:

*=USER-ENTERED VALUE	E=REPLACE OEM	NG=REPLACE NAGS
EC=REPLACE ECONOMY	UE=REPLACE OE SURPLUS	UC=RECONDITIONED PRT
UM=REMAN/REBUILT PRT	EU=REPLACE SALVAGE	EP=REPLACE PXN
OE=REPLACE PXN OE SRPLS	PC=PXN RECONDITIONED	PM=PXN REMAN/REBUILT
TE=PARTL REPL PRICE	ET=PARTL REPL LABOR	IT=PARTIAL REPAIR
I=REPAIR	L=REFINISH	BR=BLEND REFINISH
TT=TWO-TONE	CG=CHIPGUARD	SB=SUBLET
N=ADDITIONAL LABOR	RI=R&I ASSEMBLY	P=CHECK
AA=APPEAR ALLOWANCE	RP=RELATED PRIOR	UP=UNRELATED PRIOR

ADDITIONAL DAMAGE TO WIRING INSIDE DOOR ITEMS DO NOT WORK.

1995 HONDA CIVIC LX 4DOOR SEDAN 4CYL GASOLINE 1.5
 CODE: H0243E/D OPTNS H/24BILGO

OPTIONS:
 TWO-STAGE - EXTERIOR SURFACES TWO-STAGE - INTERIOR SURFACES
 ELEC REMOTE CONTROL MIRRORS POWER DOOR LOCKS
 POWER WINDOWS CRUISE CONTROL
 U.S.A. BUILT VEHICLE

OP	GDE	MC	DESCRIPTION	MFG. PART NO.	PRICE	AJ%	B%	HOURS	R
E	0006		COVER, FRONT BUMPER	71101SR4000ZZ	193.68			1.8	1
L	0006	13	COVER, FRONT BUMPER	REFINISH				3.6	4
				2.5 SURFACE					
				0.6 TWO STAGE SETUP					

Code	Description	Part/Spec	Price	Quantity	Unit
		0.5 TWO STAGE			
RI 0009	FRAME, LICENSE PLATE	R&I ASSEMBLY		0.2	1
E 0041	HEADLAMP ASSY, HALOG LT	33150SR3A01	120.00	INC	1
N 0973	HEADLAMPS AIM	ADDNL LABOR OPERA		0.5	1
E 0054	PARKLAMP ASSEMBLY LT	33350SR4A02	49.07	INC	1
BR 0083	PANEL, HOOD	BLEND REFINISH		1.6	4
		1.1 BLEND			
		0.5 TWO STAGE			
E 0033	EMBLEM, HOOD PANEL	75700SR3000	15.12	0.2	1
E 0103	FENDER, FRONT	LT 60261SR4507ZZ	231.62	2.3	1
L 0103	FENDER, FRONT	LT REFINISH		2.9	4
		1.9 SURFACE			
		0.5 EDGE			
		0.5 TWO STAGE			
E 0124	MLDG, FENDER SIDE	L/R 75321SR4A01	11.38	0.2	1
TE 0108	GUARD, FENDER MUD	PART/PARTIAL REPL	30.60		1
I 0163 07	PILLAR, HINGE	LT REPAIR		2.5*	1
L 0163	PILLAR, HINGE	LT REFINISH		1.2	4
		1.0 SURFACE			
		0.2 TWO STAGE			
E 0141	MLDG, ROCKER PANEL	LT 71850SR4000	108.15	INC	1
E 0207	DOOR SHELL, FRONT	LT 67050SR1A00ZZ	444.05	4.8	1
L 0207	DOOR SHELL, FRONT	LT REFINISH		3.2	4
		1.7 SURFACE			
		1.0 EDGE			
		0.5 TWO STAGE			
RI 0231 01	PNL, INNER DOOR TRIM	LT R&I ASSEMBLY		0.2	1
RI 0245	MLDG, FRONT DOOR SCA	LT R&I ASSEMBLY		INC	1
E 0417	MLDG, FRONT DOOR SCAL/R	72470SR4003	29.57	INC	1
E 0266	MLDG, FRONT DOOR SID	LT 75322SR4A01	60.73	0.3	1
RI 0229	MIRROR, OUTER R/C	LT R&I ASSEMBLY		INC	1
E 0211	HINGE, FRONT DOOR UP	LT 67410SH0A00ZZ	30.60	0.2	1
L 0211	HINGE, FRONT DOOR UP	LT REFINISH		0.4	4
		0.3 SURFACE			
		0.1 TWO STAGE			
E 0213	HINGE, FRONT DOOR LW	LT 67450SH0A00ZZ	30.60	0.2	1
L 0213	HINGE, FRONT DOOR LW	LT REFINISH		0.4	4
		0.3 SURFACE			
		0.1 TWO STAGE			
E 0249	ROD, FRONT DOOR CHEC	LT 75750SE7003	42.05	INC	1
RI 0227	HANDLE, FRONT DOOR O	LT R&I ASSEMBLY		0.1	1
I 0287	DOOR SHELL, REAR	LT REPAIR		1.0*	1
L 0287	DOOR SHELL, REAR	LT REFINISH		2.0	4
		1.7 SURFACE			
		0.3 TWO STAGE			
RI 0264	MLDG, REAR DOOR BELT	LT R&I ASSEMBLY		0.8	1
RI 0307 01	PNL, INNER DOOR TRIM	LT R&I ASSEMBLY		INC	1
RI 0305	HANDLE, RR DOOR OUTE	LT R&I ASSEMBLY		0.1	1
I M31	SET-UP FOR REALIGN.	REPAIR		1.5*	3
I	ROUGH PULL	REPAIR		1.5*1*	

35 ITEMS

1995 HONDA CIVIC LX 4DOOR SEDAN
CD LOG NO 9257-1

MC MESSAGE(S)
01 CALL DEALER FOR EXACT PART NUMBER / PRICE
07 STRUCTURAL PART AS IDENTIFIED BY I-CAR
13 INCLUDES 0.6 HOURS FIRST PANEL TWO-STAGE ALLOWANCE

FINAL CALCULATIONS & ENTRIES

GROSS PARTS				1,397.22
PAINT MATERIAL				443.70
PARTS & MATERIAL TOTAL				1,840.92
TAX ON PARTS & MATERIAL @			5.600%	103.09

LABOR	RATE	REPLACE HRS	REPAIR HRS	
1-SHEET METAL	48.00	11.4	5.5	811.20
2-MECH/ELEC	98.85			
3-FRAME	50.00		1.5	75.00
4-REFINISH	50.00	15.3		765.00
5-PAINT MATERIAL	29.00			
LABOR TOTAL				1,651.20
TAX ON LABOR		@	5.600%	92.47
SUBLET REPAIRS				
TOWING				
STORAGE				

GROSS TOTAL 3,687.68

NET TOTAL 3,687.68

ADP SHOPLINK U1732 ES CD LOG 9257-1 DATE 01/06/06 01:19:29PM R6.37 CD 12/05
EDU: 0103 HOST LOG
(C) 1998 - 2005 ADP CLAIMS SOLUTIONS GROUP, INC.

3.3 HRS WERE ADDED TO THIS EST. BASED ON ADP TWO-STAGE REFINISH FORMULA.

THIS ESTIMATE HAS BEEN PREPARED BASED ON THE USE OF ONE OR MORE REPLACEMENT PARTS SUPPLIED BY A SOURCE OTHER THAN THE MANUFACTURER OF YOUR MOTOR VEHICLE. WARRANTIES APPLICABLE TO THESE REPLACEMENT PARTS ARE PROVIDED BY THE MANUFACTURER OR DISTRIBUTOR OF THE REPLACEMENT PARTS RATHER THAN BY THE MANUFACTURER OF YOUR MOTOR VEHICLE.

NOTICE: WHEN SELECTING A REPAIR FACILITY, THE VEHICLE OWNER SHOULD CONSIDER THAT THE REPAIRS TO THIS VEHICLE MAY REQUIRE SPECIFIC WELDING EQUIPMENT AND THE RESTORATION OF CORROSIVE RESISTANT COATINGS AS RECOMMENDED BY THE MANUFACTURE. FAILURE TO HAVE THE VEHICLE PROPERLY REPAIRED COULD RESULT IN A SAFETY HAZARD

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*:

You will need the following information

DATE of Incident 12-9-05

"City" Vehicle Number 25217