2000 AUG -7 PM 3: 07

RONALD D. LEONHARDT CITY CLERK OFFICE OF

CITY-OF MILWAUKEE RECEIVED

August 5, 2008

City Clerk Attn: Claims 200 E Wells Street, Room 205 Milwaukee, WI 53202-3567

On June 6th, 2008 our lower level of 4222 W Capitol Drive, Milwaukee, Wisconsin began to have sewage backing up into it. We were informed that it was a blockage down the street that was causing it and until it was repaired there was nothing we could do. I telephoned Emergency Restoration Specialists and they were there to start clean up when the blockage was removed and the sewage could drain back out of the building.

Attached please find the invoice for those services. We would like relief of \$18,404.65.

You may telephone me at 414-434-6101 days to discuss. We have not submitted invoices for restoring baseboard moldings, painting, or carpet replacement. We have also discovered that our Insurance has a \$50,000.00 deductible for this type of loss. Your prompt attention to this matter would be most appreciated.

Sincerely,

Doris Hantke,

AP Properties, LLC

N72 W12922 Good Hope Road

Menomonee Falls, WI 53051

Phone (414) 434-6101

Fax (414) 434-6151

Email: Doris.h@Milwaukeeradio.com

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 statue 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:

- Proof of the amount of the claim by means of either itemized receipts or two itemized estimates.
- A phone number where the claims at can be reached during business hours.
- As detailed a description of the incident as possible, including the date, time and place.

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 chim 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 hinding on the City.



EMERGENCY RESTORATION SPECIALISTS INC.

1100 Menomonee Avenue, South Milwaukec WI 53172 414-571-9977, 414-571-9804 fax 24 HOUR DISASTER RECOVER TEAM

(E.R.S. representatives' signature)

SEE BACK SIDE FOR NOTICE OF LIEN RIGHTS.

THE COMPANY

Print name: Bill
Title: (24/e) - Jech.

Form 1205 revised 12/05

EMERGENCY RESTORATION SPECIALISTS INC.

1100 Menomonee Avenue, South Milwaukee WI 53172 414-571-9977, 414-571-9804 fax 24 HOUR DISASTER RECOVER TEAM

Date of Agreement: 6/5/2009	·			AM	
Between the Contractor:				Dio Alliere 129	vo
•			Namo W- Ca	8.461 20	
Emergency Restoration Specialis	st Inc	•	Address	. ندومتر بد	_
1100 Menomonee Ave.			M. / WOURTH		
South Milwaukee, WI 53172	·		City 414 - 444 - 1254		
24hour Phone Number: (414) 5	71-9977 OR (877) I-CAN	I-DRY	Home Phone	Work Phone	
The undersigned is the Property Ov					
Specialist Inc., (hereinafter referred to	as "E.K.S") to do the emerge	ency repairs, caused			er's
Property located at: 4 222 W	Cq γ', λωε ργ ργ	<u>)∝∽⊬46 ~7</u>	53262.	ZIP	_
VISS	(0111	.) 131.		Lif	
on 6/5/08	.Owner's insurance carrier	is: Chub			
Owner understands that they will b			ce deductible. Thi	s deductible amour	 st is
	cost over the deductible will				
directs the insurance carrier to pay E.F.					
the event the insurance carrier denies					
will pay E.R.S upon completion of en		CWHOI IS TOSPOID	tote for the cost of the	c emergency repairs;	шк
with pay 13.74.5 apon completion of on	reignicy services provided.				
Owner understands that these repairs	and charges may be billed or	n a Time and Mate	mial hocic a couare f	ant amining on a nor .	ă
rental charge or a combination of all, p					
remai charge or a combination of air, p	inds Overhead and Front. Soi	me of E.K.2.8 Labo	or Rates and Daily E	quipment Charges are) :
LABOR/EQUIPMENT	WORK DAY HOURS	AFTER HO	URS & WEEKENI	OS DAILY	
	• •				
PROJECT MANAGER	\$65.00	\$9	7.50		
CARPENTER	\$47.50		1,25		
WATER LOSS TECHNICIAN	\$35.50		3.25		
CARPENTER HELPER	\$37.50		6.25		
LABORER/TECHNICIAN	\$32.75				
AIRMOVER/FAN	\$3Z.73	⊅ 4:	9.25	ም ንድ ለለ	
LARGE DEHUMIDIFIER				\$35.00	
X-LARGE or LGR DEHUMIDII	L71 L713			\$85.00	
	IER			\$140.00	
OTHER			···		
Pricing subject to change to be wit					
Total Labor comprised of employ	ees and subcontractors is	calculated on ba	sis of number of r	nan-hours on the j	ob
plus travel time to and from job lo					
is calculated at the overtime rate.	Materials and equipment	used are in addit	tion to the hourly l	abor rate and will	be
included in the Emergency Service					
-		_			
This Emergency Service is to pro-	ovide Temporary Repairs	to the damage	area. Æhis is NOʻ	Γa Bermanent	
Repair. The Owner should have I	-	_	, ,		
Contractor signature:	1	Owner Signature	x luia D	/a. s	
Contractor Print: 11 / felection		Owner Print; X	1/10/ 0 11 V	7 10	-
Title: water fich.		Fitle: X' / ////	1 / landa	W	-
TIME, USE CE,			IN WINDE	<u>~</u>	-
		Cell:	· · · · · · · · · · · · · · · · · · ·		-
	•		Fo-	_ 120¢	

1100 Menomonee Ave. South Milwaukee, WI 53172 24hr Disaster Recovery Team www.RemoveWater.com

Customer

Carolyn M Spinks

Milwaukee Radio Alliance am 1290

4222 W. Capitol Drive Milwaukee, WI 53216

Invoice

Number: 2291

Date:

June 28, 2008

Job Address

Carolyn M Spinks

Milwaukee Radio Alliance am 1290

4222 W. Capitol Drive Milwaukee, WI 53216

DATE OF LOSS	PAYMENT TERMS	CLAIM NUMBER	CONTACT PERSON	DATE OF SERVICES	LOSS CODE
6 5 08 ?	Upon Reciept	Chubb	?	64208	Water

Description	Quantity/Hours	Price/Rate	ax	ax	Amount
see original invoice		18,404.65			18,404.65

Thank you for choosing E.R.S. for your mitigation, drying, and emergency service needs

Sub-Total

\$18,404.65

State Tax 5.00% on 0.00

0.00

City Tax 0.60% on 0.00

0.00

\$18,404.65 Total

This is your invoice. Payment due upon receipt. Please make check payable to E.R.S. Thank You. 2% interest per month or \$40.00, whichever is greater, on all past due bills. 24% per year.

SEE BACK SIDE FOR NOTICE OF LIEN RIGHTS.

PLEASE REMIT **BALANCE DUE**

1100 Menomonee Ave. South Milwaukee, WI 53172 414-571-9977 414-571-9804 fax TAX ID #39-1964961

Client:

MILWAUKEE RADIO ALLIANCE

Home:

(414) 444-1290

Property:

4222 W CAPITOL DR

MILWAUKEE, WI 53262

Operator Info:

Operator:

ALR

Estimator:

AL RADKE CMR

Business:

(414) 571-9977

Type of Estimate:

Water Damage

Dates:

Date Assigned:

06/05/08

Price List:

WIMW2S8A

Restoration/Service/Remodel with Service Charges

Factored In

Estimate:

2008-06-14-0816

Thank you for allowing Emergency Restoration Specialists Inc. the opportunity to provide you with the following scope of DRYING SERVICES. The services listed have been priced accordingly to encompass all of the services listed as related to providing the materials and proform the labor in their entirety. Any additions or subtraction from the line items listed will affect not only the pricing for the invoice but may also directly or indirectly affect the amount of time it will take to complete the services.

For any questions about the preparation of this scope/Invoice please contact Al Radke at 414-571-9977

For questions about the billing please contact Mike Messmer 414-571-9977 BETWEEN THE HOURS OF 9:00 AM AND 3:00 PM (M-F)

For any questions about the scheduling please contact Tom Hofstetter at 414-571-9977

Please Visit our WEB SITE AT: www.RemoveWater.com

TAX ID #39-1964961

1100 Menomonee Ave. South Milwaukee, WI 53172 414-571-9977 414-571-9804 fax TAX ID #39-1964961

2008-06-14-0816

Room: GENERAL CONDITIONS

CAT	SEL	ACT DESCRIPTION			
	CALC	QNTY	REMOVE	REPLACE	TOTAL
WTR	ESRVD	+ Emergency service call - during	ng business hours		
	1	1.00 EA		108.64=	108.64
WTR	EQ	* + Equipment setup, monitoring	g (hourly charge)		100.04
	12.75	12.75 HR		35.27=	449.69
WTR	LABS	+ Cleaning & Remediation - Sup	pervisory - per hr		715.05
	3.5	3.50 HR	• •	42.43=	148.51
FEE	FLSRCHG	* + Fuel surcharge			
	1	1.00 EA		40,00=	40.00
WTR	EQ	* + Equipment take down(hourl	y charge)		10.00
	7.25	7.25 HR	,	35.27=	255.71
WTR	RM	+ Remote monitoring sys. w/up t	to 10 sensors (per 24 l		233.71
	4	4.00 DA	•	55.00=	220.00
· .		4.00 DA		55.00=	22

Room Totals: GENERAL CONDITIONS

1,222.55

Room: Foyer/Entry		LxWxH 18'1" x 15'5" x 8'2"
Subroom 1: OFFSET		LxWxH 8'6" x 2'11" x 8'2"
Missing Wall: 1 - 8'6" X 8'2" Subroom 2: OFFSET	Opens into 0	Goes to Floor/Ceiling LxWxH 3'2" x 3'1" x 7'1"
Subroom 3: ELEVATOR		LxWxH 6'9" x 4'6" x 4'0"
773.35 SF Walls 343.72 SF Floor 266.53 SF Long Wall	343.72 SF Ceiling 38.19 SY Flooring 189.56 SF Short Wall	1,117.06 SF Walls & Ceiling 107.83 LF Floor Perimeter 107.83 LF Ceil. Perimeter

1100 Menomonee Ave. South Milwaukee, WI 53172 414-571-9977 414-571-9804 fax TAX ID #39-1964961

				•		
CAT	SEL	A	CT DESCRIPTION			
	CALC		QNTY	REMOVE	REPLACE	TOTAL
WTR	EXTS	+	Water extraction from floor -	Category 3 water		
	F		343.72 SF	emegaly a mater	1.03=	354.03
WTR	GRM	+	Apply anti-microbial agent		1.05	334.03
	F+PF		451.55 SF	·	0.21=	94.83
CLN	F-+	+	·	•	0.21	94.63
	F+PF		451.55 SF		0.42=	189.65
WTR	DRY+	+	Air mover axial fan (per 24 h	our period) - No mor		109.03
	3*4		12.00 EA	1	29.78=	357.36
3 Air mover	s for 4 days				25.10	337.30
WTR	DHM>>	+	Dehumidifier (per 24 hour per	riod) - XLarge - No	monitoring	
	1*4		4.00 EA		114.72=	458.88
WTR	EQD	+	Equipment decontamination of	harge - per piece of		150.00
	4		4.00 EA	• • •	27.73=	110.92
Note: Labo	r cost to wash equipme	nt used o	on projects that have Category	2 water.	- .	110.52
Room Tota	ls: Foyer/Entry					
1100111011	is. Poyel/Entry					
	-		•			1,565.67
	•		•			
Room: Wo	nens room				LxWxH 9'6" x	6'0" x 7'4"
Subroom 1:	OFFSET				LxWxH 7'8" x	3'1" x 7'4"

Room: V	omens room			LxWxH 9'6" x 6'0" x 7'4"		
Subroom	1: OFFSET			LxWxH 7'8" x 3'1" x 7'4"		
Missing Subroom	Wall: 1 - 3'9 2: OFFSET)" X 7'4"	Opens into 0	Goes to Floor/Ceiling LxWxH 3'3" x 3'1" x 7'4"		
	422.89 SF Walls 90.66 SF Floor 149.72 SF Long Wall	10.07	SF Ceiling SY Flooring SF Short Wall	513.55 SF Walls & Ceiling 57.67 LF Floor Perimeter 57.67 LF Ceil. Perimeter		
САТ	SEL	ACT DESCRIPTION	· . [

CAI	SEL	ACT DESCRIPTION		•
	CALC	QNTY REMOVE	REPLACE	TOTAL
WTR	EXTS F	+ Water extraction from floor - Category 3 water 90.66 SF	1.03=	93.38

2008-06-14-0816

07/11/2008 Page: 3

1100 Menomonee Ave. South Milwaukee, WI 53172 414-571-9977 414-571-9804 fax TAX ID #39-1964961

CONTINUED - Womens room

CAT	SEL	A	CT DESCRIPTION			•
	CALC		QNTY	REMOVE	REPLACE	TOTAL
WTR	GRM	+	Apply anti-microbial agent			
	F+PF		148.33 SF		0.21=	01.4
CLN	F-+	+	Clean floor - Heavy		0.21-	31.15
	F+PF		148.33 SF		0.42=	
WTR .	DRY+	+		our neriod) - No monit		62.30
	1*4		4.00 EA	our portou) 140 moni	_	
WTR	DHM>	+		rind) - I arge - No mor	29.78=	119.12
	1*4		4.00 EA	riod) Large - 140 Hor	•	
1 Dehumid	ifier - Large - for 4 day	s			70.04=	280.16
WTR	EQD	+	Equipment decontamination c	harge - per piece of eo	llinment	
	2		2.00 EA	Be ber broce of ed	27.73=	
Note: Labo	or cost to wash equipme	nt used o	on projects that have Category	2 water.	27.75-	55.46

Room Tots	ils: Womens room					
20011 1012	113. 44 OHIGHS LUUIII					
						641.57

Room: Storage Area/Room

LxWxH 9'4" x 6'10" x 7'4"

63.78	SF Walls SF Floor SF Long Wall	7.09	SF Ceiling SY Flooring SF Short Wall	32.33	SF Walls & Ceiling LF Floor Perimeter LF Ceil. Perimeter
-------	--------------------------------------	------	--	-------	--

CAT	SEL CALC	ACT DESCRIPTION QNTY REMOVE	REPLACE	TOTAL
WTR	EXTS	+ Water extraction from floor - Category 3 water		
WTR	3 GRM	3.00 SF + Apply anti-microbial agent	1.03=	3.09
	F	63.78 SF	0.21=	13.39

1100 Menomonee Ave. South Milwaukee, WI 53172 414-571-9977 414-571-9804 fax TAX ID #39-1964961

CONTINUED - Storage Area/Room

CAT	SEL	ACT DESCRIPTION			
	CALC	QNTY	REMOVE	REPLACE	TOTAL
CLN	F-+	+ Clean floor - Heavy			
	· F	63.78 SF		0.42=	26.79
WTR	DRY	+ Air mover (per 24 hour period	d) - No monitoring		20.75
	1*4	4.00 EA		25.61=	102.44
WTR	EQD	+ Equipment decontamination c	harge - per piece of e	quipment	102.44
	1	- 1.00 EA		27.73=	27.73
Note: Lab	or cost to wash equipm	nent used on projects that have Category	2 water.		27.73
<u> </u>					_

Room Totals: Storage Area/Room

173.44

Room: Mens room

LxWxH 9'6" x 6'11" x 7'4"

Subroom 1: OFFSET

LxWxH 9'6" x 3'1" x 7'4"

Missing Wall:	1 - 3'9" X 7'4"		Opens into 0	Goes to Floor/Ceiling
370.33	SF Walls	95.00	SF Ceiling	465.33 SF Walls & Ceiling
95.00	SF Floor	10.56	SY Flooring	50.50 LF Floor Perimeter
139.33	SF Long Wall	73.33	SF Short Wall	50.50 LF Ceil. Perimeter

CAT	SEL	ACT DESCRIPTION		
•	CALC	QNTY REMOVE	REPLACE	TOTAL
WTR	EXTS	+ Water extraction from floor - Category 3 water	-	
	F	95.00 SF	1.03=	97.85
WTR	GRM	+ Apply anti-microbial agent		, 27,102
	F	95.00 SF	0.21=	19.95
CLN	F- +	+ Clean floor - Heavy		17.73
	F	95.00 SF	0.42=	3 9 .90

1100 Menomonee Ave. South Milwaukee, WI 53172 414-571-9977 414-571-9804 fax TAX ID #39-1964961

CONTINUED - Mens room

CAT	SEL CALC	ACT DESCRIPTION QNTY	REMOVE	REPLACE	TOTAL
WTR	DRY+	+ Air mover axial fan (per 24 he	our period) - No moni	toring	
W.C.D	1*4	4.00 EA		29.78=	119.12
WTR	DHM>	+ Dehumidifier (per 24 hour per	riod) - Large - No mo	nitoring	
	1*4	4.00 EA		70.04=	280,16
1 Dehumidif	ier - Large - for 4 days	•	4	, 0,0,	200.10
WTR	EQD	+ Equipment decontamination c	harge - per piece of e	Quipment	
	2	2.00 EA		27.73=	
Note: Labor	cost to wash equipment t	used on projects that have Category	2 water	21.15	55.46

Room Totals: Mens room

612.44

Room:	Titilita.	Dage
PK ()()TITE	EITHITT	Kaam

LxWxH 9'8" x 4'9" x 10'4"

45.92	SF Walls SF Floor SF Long Wall	5.10	SF Ceiling SY Flooring SF Short Wall	28.83	SF Walls & Ceiling LF Floor Perimeter LF Ceil. Perimeter
-------	--------------------------------------	------	--	-------	--

CAT	SEL CALC	ACT DESCRIPTION QNTY REMOVE	REPLACE	TOTAL
CON	ROOM<	+ Contents - move out then reset - Small room		
WTR	1 EXTS	1.00 EA + Water extraction from floor - Category 3 water	34.98=	34.98
WTR	F GRM	45.92 SF + Apply anti-microbial agent	1.03=	47.29
CLN	F F-+	45.92 SF + Clean floor - Heavy	0.21=	9.64
	F	45.92 SF	0.42=	19.29

2008-06-14-0816

ACT DESCRIPTION

1100 Menomonee Ave. South Milwaukee, WI 53172 414-571-9977 414-571-9804 fax TAX ID #39-1964961

SEL

CONTINUED - Utility Room

CALC		ACI DESCRI	QNT	Y	REMOVE	RE	PLACE	TOTAL
WTR DR	 Y+	+ Air mover ax	tial fan (p	er 24 hour p	eriod) - No	monitoring	-	
1*4			4.00 E				29.78=	110.10
WTR EQI	D .	+ Equipment d			e - ner niece	of equipment		119.12
1		• •	1.00 E		por proce	or equipment	27.73=	27.72
Note: Labor cost to was	h equipment u	sed on projects tha	it have Ca	ategory 2 was	ter.		21.15-	27.73
Room Totals: Utility R	oom		74					
								258.05
·								
Room: Office Hallway						L	xWxH 44'8''	x 4'11" x 8'0"
Subroom 1: ENTRY O	FFSET						LxWxH 5'6	" x 3'6" x 8'0"
Missing Wall: Subroom 2: WAITING		" X 8'0"		Opens into	0	Goes to Floo		" x 9'7" x 8'0"
Missing Wall: Subroom 3: OFFSET	1 - 5'6'	' X 8'0"		Opens into	0	Goes to Floo		x 5'11" x 8'0"
Missing Wall: Subroom 4: OFFSET	1 - 6'2'	' X 8'0"		Opens into	2	Goes to Floo Formula		' x 5'7'' x 8'0''
Missing Wall:	1 - 8'0"	' X 8'0"		Opens into	n	Goes to Floo	/C.:li	
1,305.33 SF			32.28 SI		U		SF Walls &	Cailina
432.28 SF	Floor			Y Flooring			LF Floor Pe	
632.67 SF	Long Wall			Short Wall			LF Ceil. Per	
CAT SEL		ACT DESCRIPT	TION					
CALC			QNTY	R	EMOVE	REPI	LACE	TOTAL
						KEI I	LACE	IUIAL

A WIRELESS REMOTE MONITORING SYSTEM (#11) WAS PLACED IN THIS ROOM TO MONITOR THE RELATIVE HUMIDITY AND TEMPATURE TO ACCURATELY DEPICT THE EXACT NUMBER OF DAYS THAT THE

CAT ·

1100 Menomonee Ave. South Milwaukee, WI 53172 414-571-9977 414-571-9804 fax TAX ID #39-1964961

DRYING EQUIPMENT WAS NEEDED TO PROPERLY DRY. The placement of the drying equipment is calculated by the number of dehumidifiers or air movers multiplied by the number of days that the equipment is on site. The actual amount of drying equipment placed is calculated using the formulas published by the HCRC using the S500 standard industry guidelines . EXAMPLE 2*4 is (2 units) of drying equipment multiplied by 4 (the number of days that the equipment is invoiced for)

CON	ROOM<	+ Contents - move out then reset - Small room		
	1	1.00 EA	34.98=	34.98
WTR	BLK<	+ Block and pad furniture in room - Small amount	54.50**	34.98
	1.5	1.50 EA	25.58=	20.25
WTR	BASED	+ Baseboard - Detach	23. 36—	38.37
	49	49.00 LF	0.58=	20.42
WTR	WALLH	+ Drill holes for wall cavity drying	–ود.۷	. 28.42
	37	37.00 EA	0.26=	
WTR	GRMH	+ Inject antimicrobial into holes drilled for cavity de	U.20=	9.62
	37	37.00 EA		
WTR	EXTS	+ Water extraction from floor - Category 3 water	0.89=-	32.93
	F	432.28 SF		
WTR	GRM	+ Apply anti-microbial agent	1.03=	445.25
•	F	432.28 SF		
CLN	F -	+ Clean floor	0.21=	90.78
	F	432.28 SF		
WTR	DHM>>	· ·	0.29=	125.36
	1*4	+ Dehumidifier (per 24 hour period) - XLarge - No n 4.00 EA		
WTR	DRY+		114.72=	458.88
	4*4	+ Air mover axial fan (per 24 hour period) - No mon		•
4 Air movers	•	16.00 EA	29.78=	476.48
WTR	WALLD	WI-II		
,, 110	2*4	+ Wall cavity drying-Dctd type (per 24 hr period) No	monit.	
WTR	• •	8.00 DA	80.00=	640.00
** 1 K	EQD 7	+ Equipment decontamination charge - per piece of e	quipment	
Motor Labour	•	7.00 EA	27.73=	194.11
CLN	cost to wash equipme	nt used on projects that have Category 2 water.		
CLIV	DODRSP	+ Apply odor counteractant - liquid spray		
•	F	432.28 SF	0.17=	73.49

Room Totals: Office Hallway

2,648.67

1100 Menomonee Ave. South Milwaukee, WI 53172 414-571-9977 414-571-9804 fax TAX ID #39-1964961

Room: OFFICE Storage Area/Room

LxWxH 9'6" x 8'0" x 8'0"

280.00	SF Walls
76.00	SF Floor
76.00	SF Long Wall

76.00	SF Ceiling
8.44	SY Flooring
64.00	SF Short Wall

35.00 SF Walls & Ceiling 35.00 LF Floor Perimeter 35.00 LF Ceil. Perimeter

CAT	SEL	A	CT DESCRIPTION			
	CALC		QNTY	REMOVE	REPLACE	TOTAL
CON	ROOM<	. +	Contents - move out then res	et - Small room		
,	.5		0.50 EA		34.98=	17.49
WTR	EXTS	+	Water extraction from floor	Category 3 water		
	12		12.00 SF	•	1.03=	12.36
WTR	GRM	+	Apply anti-microbial agent			
	14		14.00 SF		0.21=	2.94
CLN	F-+	+	Clean floor - Heavy			
	14		14.00 SF		0.42=	5.88
WTR	DRY	+	Air mover (per 24 hour perio	od) - No monitoring		
	1*4		4.00 EA		25.61=	102.44
WTR	DHM>>	+	Dehumidifier (per 24 hour pe	eriod) - XLarge - No m	onitoring	
	1*4		4.00 EA		114.72=	458.88
WTR	EQD	+	Equipment decontamination	charge - per piece of e	quipment	
	2		2.00 EA		27.73=	55.46
Note: Labo	r cost to wash equipme	ent used	on projects that have Category	2 water.		

Room Totals: OFFICE Storage Area/Room

655.45

Room: CONFERENCE ROOM

LxWxH 22'10" x 11'10" x 8'0"

Subroom 1: OFFSET

LxWxH 12'8" x 9'6" x 8'0"

Missing Wall:

1 - 12'8" X 8'0"

Opens into 0

Goes to Floor/Ceiling

1100 Menomonee Ave. South Milwaukee, WI 53172 414-571-9977 414-571-9804 fax TAX ID #39-1964961

Subroom 2: OFFSET

Formula Triangle 14'3" x 9'6" x 8'0"

Missing Wall:	1 - 9'6" X 8'0"		Opens into 0	Goes to Floor/Ceiling
Missing Wall:	1 - 9'6" X 8'0"		Opens into 1	Goes to Floor/Ceiling
668.67	SF Walls	435.30	SF Ceiling	1,103.97 SF Walls & Ceiling
435.30	SF Floor	48.37	SY Flooring	83.58 LF Floor Perimeter
398.00	SF Long Wall	246.67	SF Short Wall	83.58 LF Ceil. Perimeter

CAT	SEL	ACT DESCRIPTION			
	CALC	QNTY	REMOVE	REPLACE	TOTAL
CON	ROOM<	+ Contents - move out then rese	et - Small room		
	1	1.00 EA		34.98=	34.98
WTR	BASED	+ Baseboard - Detach			
	33	33.00 LF		0.58=	19.14
WTR	WALLH	 Drill holes for wall cavity dry 	ring		
	24	24.00 EA		0.26=	6.24
WTR	GRMH	 Inject antimicrobial into hole 	s drilled for cavity dry	ring	
	24	24.00 EA		0.89=	21.36
WTR	EXTS	+ Water extraction from floor -	Category 3 water		
	F	435.30 SF	•	1.03=	448.36
WTR	GRM	+ Apply anti-microbial agent			
	F	435.30 SF	•	0.21=	91.41
WTR	DRY+	+ Air mover axial fan (per 24 he	our period) - No monit	oring	
	3*4	12.00 EA		29.78=	357.36
3 Air movers	for 4 days				
WTR	DHM>>	+ Dehumidifier (per 24 hour per	riod) - XLarge - No m	onitoring	
	1*4	4.00 EA		114.72=	458.88
WTR	EQD	+ Equipment decontamination c	harge - per piece of eq	uipment	
	4	4.00 EA	,	27.73=	110.92

Room Totals: CONFERENCE ROOM

1,548.65

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Room: LUNCH RM

LxWxH 22'10" x 12'9" x 8'0"

569.33 SF Wa	ls 291.13	SF Ceiling 860.4	5 SF Walls & Ceiling
291.13 SF Floo	- 04.55		LF Floor Perimeter
182.67 SF Lon	g Wall 102.00	SF Short Wall 71.1	7 LF Ceil. Perimeter

CAT	SEL	ACT D	ESCRIPTION			
-	CALC		QNTY	REMOVE	REPLACE	TOTAL
CON	ROOM<	+ Con	tents - move out then res	et - Small room		<u></u>
	1		1.00 EA		34.98=	34.98
WTR	BASED	+ Base	eboard - Detach			0 112 0
•	25		25.00 LF		0.58=	14.50
WTR	WALLH	+ Dril	holes for wall cavity dry	ying	,	100
	23		23.00 EA	•	0.26=	5.98
WTR	GRMH	+ Inje	ct antimicrobial into hole	es drilled for cavity dry		3. 50
	23		23.00 EA	•	0.89=	20.47
WTR	EXTS	+ Wate	er extraction from floor -	Category 3 water		20.47
	15*12		180.00 SF	5 ,	1.03=	185.40
WTR	GRM	+ App	ly anti-microbial agent			103,10
	200		200.00 SF		0.21=	42.00
WTR	DRY+	+ Airı	nover axial fan (per 24 h	our period) - No moni		12.00
	1*4		4.00 EA	1 , ,	29.78=	119.12
1 Air mover	s for 4 days				251.0	115.12
WTR	DRY	+ Air r	nover (per 24 hour period	d) - No monitoring		
	2*4		8.00 EA	,	25.61=	204.88
1 Air mover	s axil fans for 4 days	•		,		
WTR	DHM>>	+ Dehu	ımidifier (per 24 hour pe	riod) - XLarge - No m	onitoring	
•	1*4		4.00 EA		114.72=	458.88
WTR	WALLD	+ Wall	cavity drying-Dctd type	(per 24 hr period) No	monit.	
	1*4		4.00 DA	- ,	80.00=	320.00
WTR	EQD	+ Equi	pment decontamination o	harge - per piece of ed		220.00
	5		5.00 EA		27.73=	138.65
Note: Labor	cost to wash equipmen	nt used on pro	jects that have Category	2 water.		,
CLN	DODRSP		y odor counteractant - liq			
	F		291.13 SF		0.17=	49.49
			,			.2.13

Room Totals: LUNCH RM

1,594.35

1100 Menomonee Ave. South Milwaukee, WI 53172 414-571-9977 414-571-9804 fax TAX ID #39-1964961

Room: ROOM 103

LxWxH 11'4" x 9'1" x 8'0"

Subroom 1: offset

LxWxH 7'8" x 3'7" x 8'0"

Sanloom 1: ouset	·			LxWxH 7'8" x 3'7" x 8'0"
Missing Wall: Subroom 2: offset	1 - 7'8" X 8'0"		Opens into 0	Goes to Floor/Ceiling Formula Triangle 5'2" x 3'7" x 8'0"
Missing Wall:	1 - 3'7" X 8'0"		Opens into 0	Goes to Floor/Ceiling
Missing Wall:	1 - 3'7" X 8'0"		Opens into 1	Goes to Floor/Ceiling
368.00	SF Walls	136.83	SF Ceiling	504.83 SF Walls & Ceiling
	SF Floor	15.20	SY Flooring	46.00 LF Floor Perimeter
193.33	SF Long Wall	130.00	SF Short Wall	46.00 LF Ceil. Perimeter

CAT	SEL	A	CT DESCRIPTION			
	CALC		QNTY	REMOVE	REPLACE	TOTAL
CON	ROOM<	+	Contents - move out then rese	et - Small room		
	1		1.00 EA		34.98=	34.98
WTR	BLK<	+	Block and pad furniture in ro	om - Small amount		2.30
	1.5		1.50 EA		25.58=	38.37
WTR	BASED	+	Baseboard - Detach			50.57
	11	٠. ٠	11.00 LF		0.58=	6.38
WTR	WALLH	. +	Drill holes for wall cavity dry	ing		0.50
	10		10.00 EA		0.26=	2.60
WTR	GRMH	+	Inject antimicrobial into hole	s drilled for cavity dry	ring	2.00
	10		10.00 EA		0.89=	8.90
WTR	EXTS	+	Water extraction from floor -	Category 3 water		0.50
	8*5		40.00 SF	• •	1.03=	41.20
WTR	GRM	+	Apply anti-microbial agent			.1.20
	50		50.00 SF		0.21=	10.50
WTR	DRY+	+	Air mover axial fan (per 24 h	our period) - No monit		
	1*4		4.00 EA	• /	29.78=	119.12
l Air movers	s for 4 days		•			117.72
WTR	WALLD	+	Wall cavity drying-Dctd type	(per 24 hr period) No	monit.	
	1*4		4.00 DA		80.00=	320.00
WTR	EQD	+	Equipment decontamination of	harge - per piece of eq	uipment	0_0,00
	2		2.00 EA	_	27.73=	55.46

2008-06-14-0816

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CONTINUED - ROOM 103

CAT	SEL	ACT DESC	RIPTION			
	CALC		QNTY	REMOVE	REPLACE	TOTAL
Note: Labo	or cost to wash equ	uipment used on project	s that have Categor	y 2 water.		
CLN	DODRS		lor counteractant - I			
	F	•	136.83 SF		0.17=	23.26
Room Total	ls: ROOM 103		· · · · · · · · · · · · · · · · · · ·			
						660.77
	•					
Room: RO	OM 105				LxWxH 12'10"	x 11'1" x 8'0"
Subroom 1	: offset				LxWxH 8'6	" x 2'7" x 8'0"
Missing Washing Subroom 2		1 - 8'6" X 8'0"	Ope	as into O	Goes to Floor/Ceiling Formula Triangle 3'9	" x 2'7" x 8'0"
Missing Wa		1 - 2'7" X 8'0"	Ope	ıs into 0	Goes to Floor/Ceiling	
Missing Wa		1 - 2'7" X 8'0"	-	ns into 1	Goes to Floor/Ceiling	
	412.67 SF Wa 167.53 SF Flo		167.53 SF Ceil		580.19 SF Walls &	
	200.67 SF Lor		18.61 SY Floo 130.00 SF Shor		51.58 LF Floor Po 51.58 LF Ceil. Pe	
CAT	SEL	. CT Decor				
CAI	CALC	ACT DESCI	QNTY	REMOVE	REPLACE	TOTAL
CON	ROOM<	+ Contents	move out then rese	t - Small room		
	.5		0.50 EA	t - Sman 100m	34.98=	15.40
WTR	EXTS	+ Water extr	action from floor -	Category 3 water	J4.70—	17.49
•	8*4		32.00 SF	category 5 water	1.03=	20.06
WTR	GRM	+ Apply anti	-microbial agent		1.05-	32.96
	40	11 7	40.00 SF		0.21=	8.40
WTR	DRY+	+ Air mover	axial fan (per 24 he	our period) - No m		0.40

4.00 EA

2008-06-14-0816

1*4

119.12

29.78=

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CONTINUED - ROOM 105

CAT	SEL	ACT DESCR	RIPTION			
	CALC		QNTY	REMOVE	REPLACE	TOTAL
1 Air movers	for 4 days		·		•	
WTR	EQD	+ Equipmen	t decontamination of	charge - per piece o		
	1		1. 00 EA		27.73=	27.73
Note: Labor o	cost to wash equipment t	ised on projects	that have Category	2 water.		
CLN	DODRSP	+ Apply odd	or counteractant - li	quid spray		
	32		32.00 SF		0.17=	5.44
Poom Totals	: ROOM 105		 			
NOOM TOTALS	. ROOM 103					211.14
			•			
Room: ROO	OM 0				LxWxH 18'6" x	15'10" x 8'0"
Subroom 1:	offset				LxWxH 11'10	" x 4'1" x 8'0"
Missing Wal		'10" X 8'0"	Ope	ns into 0	Goes to Floor/Ceiling Formula Triangle 5'8	" x 4'1" x 8'0"
Missing Wa	ıı: 1 - 4'	1" X 8'0"	Ope	ns into 0	Goes to Floor/Ceiling	,
Missing Wa		1" X 8'0"	_	ns into 1	Goes to Floor/Ceiling	
J	594.67 SF Walls		349.57 SF Ceil		944.23 SF Walls &	-
•	349.57 SF Floor	•	38.84 SY Flo		74.33 LF Floor P 74.33 LF Ceil. Pe	
	288.00 SF Long Wall		192.00 SF Sho	rt Wali	74.33 EF Cell. Fe	rimeter
CAT	SEL	ACT DESC	RIPTION			
	CALC		QNTY	REMOVE	REPLACE	TOTAL
CON	ROOM<	+ Contents	- move out then res	et - Small room		
5011	1		1.00 EA		34.98=	34.98
WTR	BLK<	+ Block and	d pad furniture in re	oom - Small amour	ıt	
	.5		0.50 EA		25.58=	12.79

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CONTINUED - ROOM 0

CAT	SEL CALC	ACT DESCRIPTION ONTY	REMOVE	DEDI A CE	
	<u>, , , , , , , ,</u>	V	REMIOVE	REPLACE	TOTAL
WTR	BASED	+ Baseboard - Detach			
	4	4.00 LF		0.58=	
WTR	EXTS	+ Water extraction from floor - (Category 3 water	0.56-	2.32
•	F	349.57 SF	- magazy 5 mator	1.02-	360.05
WTR	GRM	+ Apply anti-microbial agent		1.03=	
	F	349.57 SF		0.01	73.41
WTR	DRY	+ Air mover (per 24 hour period)) - No monitoring	0.21=	
	3*4	12.00 EA	, 140 monitoring	0,50	
3 Air movers	for 4 days			25.61=	307.32
WTR	DHM>>	+ Dehumidifier (per 24 hour peri	od) - XI arge - No m	onitorio e	
	1*4	4.00 EA	od) Andree - 140 III	114.72=	
WTR	EQD	+ Equipment decontamination ch	arge - per missa of		458.88
	4	4.00 EA	arge - per prece or eq		•
Note: Labor c	ost to wash equipme	ent used on projects that have Category 2	water	27.73=	110.92
CLN	DODRSP	+ Apply odor counteractant - liqu			
	F .	349.57 SF	a spiay	0.17	
<u>. </u>		2.5.67.61		0.17=	59.43

Room Totals: ROOM 0

1,420.10

Room: ROOM 101

LxWxH 15'10" x 14'11" x 8'0"

Subroom 1: offset

LxWxH 11'1" x 3'11" x 8'0"

Missing Wall:

1 - 11'1" X 8'0"

Opens into 0

Goes to Floor/Ceiling

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Subroom 2: offset

Formula Triangle 5'6" x 3'11" x 8'0"

750 77 CF Long Wall 100 00 GW mt	6 SF Walls & Ceiling 0 LF Floor Perimeter 0 LF Ceil. Perimeter
----------------------------------	--

	ACT DESCRIPTION	SEL	CAT
REMOVE	QNTY	CALC	
et - Small room	+ Contents - move out then res	ROOM<	CON
	1.00 EA	1	
om - Small amount	+ Block and pad furniture in ro	BLK<	WTR
	0.50 EA	.5	
•	+ Baseboard - Detach	BASED	WTR
	4.00 LF	4 .	
ying .	+ Drill holes for wall cavity dr	WALLH	WTR
. 3	3.00 EA	3	
es drilled for cavity d	+ Inject antimicrobial into hole	GRMH	WTR
	3.00 EA	3	
Category 3 water	+ Water extraction from floor -	EXTS	WTR
<i>y</i> • • • • • • • • • • • • • • • • • • •	287.26 SF	F	•
	+ Apply anti-microbial agent	GRM	WTR
	287.26 SF	· F	
d) - No monitoring	+ Air mover (per 24 hour perio	DRY	WTR
,	12.00 EA	3*4	
		s for 4 days	3 Air mover
riod) - XLarge - No 1	+ Dehumidifier (per 24 hour pe	DHM>>	WTR
	4.00 EA	1*4	
harge - per piece of	+ Equipment decontamination of	EQD	WTR
5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4.00 EA	4	
2 water.	t used on projects that have Category	cost to wash equipmen	Note: Labo
		DODRSP	CLN
• •	287.26 SF	F	
all room all amount for cavity of ry 3 water monitoring CLarge - No 1	ying es drilled Categor d) - No r riod) - X charge - r	+ Contents - move out then reset - Sma 1.00 EA + Block and pad furniture in room - Sm 0.50 EA + Baseboard - Detach 4.00 LF + Drill holes for wall cavity drying 3.00 EA + Inject antimicrobial into holes drilled 3.00 EA + Water extraction from floor - Categor 287.26 SF + Apply anti-microbial agent 287.26 SF + Air mover (per 24 hour period) - No m 12.00 EA + Dehumidifier (per 24 hour period) - X 4.00 EA + Equipment decontamination charge - M 4.00 EA t used on projects that have Category 2 water. + Apply odor counteractant - liquid spra	ROOM CALC ROOM Contents - move out then reset - Small 1 1.00 EA BLK BBLK BBASED Baseboard - Detach 4 4.00 LF WALLH WALLH WALLH Drill holes for wall cavity drying 3 3.00 EA GRMH EXTS F Water extraction from floor - Categor F 287.26 SF GRM Apply anti-microbial agent F 287.26 SF DRY Air mover (per 24 hour period) - No rest of 4 days DHM>> Dehumidifier (per 24 hour period) - X 1*4 4.00 EA EQD 4 Equipment decontamination charge - rest of 4 days DODRSP 4 Apply odor counteractant - liquid sprage

Room Totals: ROOM 101

1,335.69

1100 Menomonee Ave. South Milwaukee, WI 53172 414-571-9977 414-571-9804 fax TAX ID #39-1964961

Line Item Totals: 2008-06-14-0816

14,548.54

Grand Total Areas:

-	SF Walls	2,814.96	SF Ceiling	9,651.25	SF Walls & Ceiling
2,814.96	SF Floor	312.77	SY Flooring	869.00	LF Floor Perimeter
2,954.58	SF Long Wall	1,733.98	SF Short Wall	869.00	LF Ceil. Perimeter
0.00	Floor Area	0.00	Total Area	0.00	Interior Wall Area
0.00	Exterior Wall Area	0.00	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		Area of Face 1

2008-06-14-0816

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1100 Menomonee Ave. South Milwaukee, WI 53172 414-571-9977 414-571-9804 fax TAX ID #39-1964961

Summary for Water Damage

Line Item Total Services Mat'l Tax	@	5.600% x	235.40	14,548.54 13.18
Subtotal Overhead Profit Service Sales Tax	@ @ @	10.0% x 10.0% x 5.600% x	14,436.36 14,436.36 17,065.18	14,561.72 1,443.64 1,443.64 955.65
Grand Total			•	18,404.65

AL RADKE CMR

PLEASE REMIT BALANCE DUE



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HUMIDITY RECORD

Insured: Milw Radio Alliance Address:

Home Cell Work

Area Affected: Time Of Loss: Class: Category:

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	1	Day																				

EMERGENCY RESTORATION SPECIALISTS INC.

1100 Menomonee Ave, South Milwaukee, WI 53172 414-571-9977, 414-571-9804 fax 24 HOUR DISASTER RECOVERY TEAM

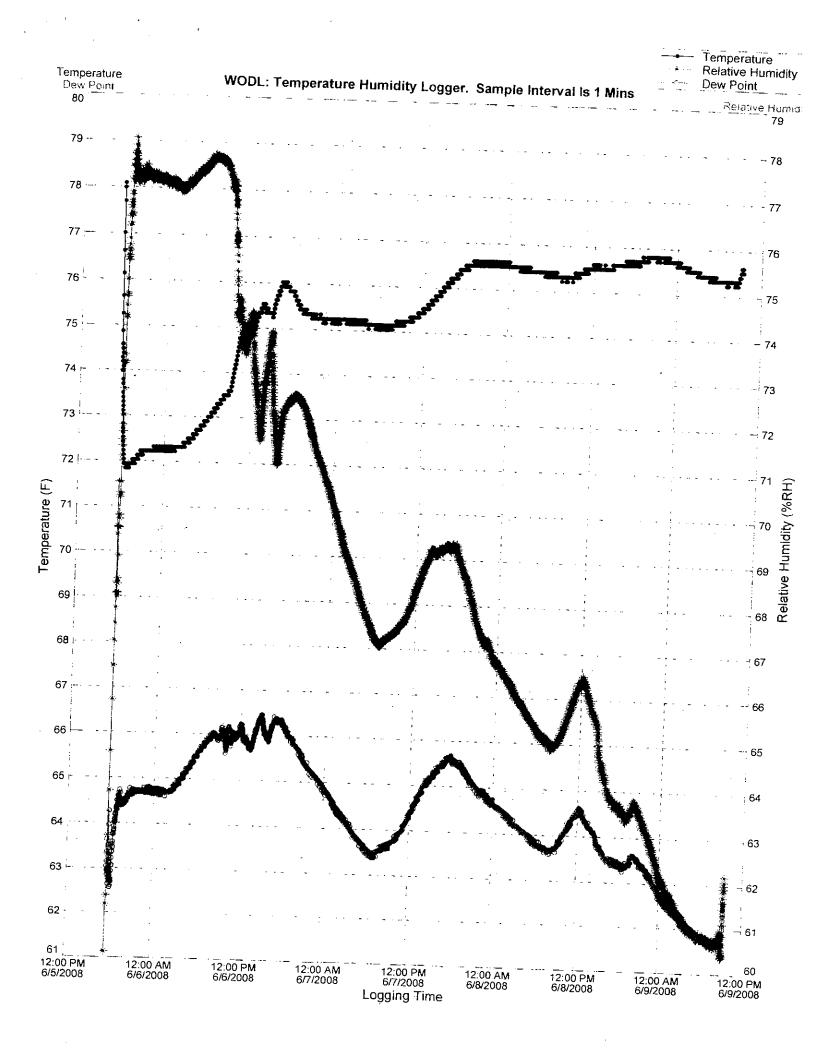
PERHICATION, ODORIZATION & WATER DAMAGE NOBODY DRIES FASTER—RESIDENTIAL & COMMERCIAL

www.RemoveWater.com

Enclosed please find the computer data logger readings for the water loss at your business in Milwaukee, Wisconsin. They show the drying progress for structurally drying the building. Please call if you have any questions.

Sincerely,

The E.R.S. Staff



Summary for Milwaukee Radio Alliance Hallway.elg: Temperature Humidity Logger

Logger Information

Logger ID:

0508CC2E

Total Recordings:

56

Logging Summary

Logging Started At:

5:37:17 PM, 6/5/2008

Last Sample Time:

9:25:17 AM, 6/9/2008

Logging Interval:

1 Mins

Recording Length:

3 Days, 15 Hrs, 48 Mins

Total Samples Stored:

5269

Total Samples Recorded:

5269

Data Summary

Temperature Min Value:

71.84 F

Temperature Max Value:

78.09 F

Relative Humidity Min Value:

60.14 %RH

Relative Humidity Max Value:

78.06 %RH

Dew Point Min Value:

61.67 F

Dew Point Max Value:

66.46 F

Alarm Summary

Low Alarm Did Not Occur

High Alarm Did Not Occur

Low Alarm Did Not Occur

High Alarm Did Not Occur

AP PROPERTIES LLC

2979 N. MAYFAIR ROAD MILWAUKEE, WI 53222 PH. (414) 771-1021

DATE AUG S, 2008 12-7133-2750

PAY TO THE EMERGENCY RESTORATION SPECIALISTS ORDER OF

J\$ 18404.65

EIGHTEEN THOUSAND FOUR HUNDRED FOUR AND LES/108

DOLLARS Deliver on Dark

Bank Mutual

Milwaukee, WI 53202 baekmutual.com

FOR INV JUSY PAID IN FALL

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