

To Whom it MAY Concern

I Johnnie Ashley live at 3526/3528 W Highland and has been living here for over 14 years BLV my vehicle was parked and has been parked for a long time with no problems until recently. The parking structure changed as of 11-8-23 and we were told our vehicle would now be parked in the streets instead of on side of street so on 11-11-23 my 2020 Nissan Maxima was rained by an unknown driver ~~and~~ in front of my address because there was no signs of anything available to let people know that the traffic had changed so my car has been deemed Total. I have no way to get around now and this is a big inconvenience.

Please Help

414-510-6217

Johnnie

CITY OF MILWAUKEE

2023 DEC -7 AM 8:31

CITY CLERK'S OFFICE

OFFICE OF CITY ATTORNEY
68 DEC 28 AM 10:55

J9L2TDXVVB
233153124

WISCONSIN MOTOR VEHICLE
CRASH REPORT

MILWAUKEE POLICE DEPARTMENT
749 WEST STATE STREET
MILWAUKEE, WI 53201
(414) 933-4444

Location

ON 3528 W HIGHLAND BLVD 252 FT W OF USH18 WB (HOUSE/BUILDING 3528)	Latitude 43.04454929	Longitude -87.958614459
IN THE CITY OF MILWAUKEE IN MILWAUKEE COUNTY	X Coordinate 421921.125	Y Coordinate 4766208
	Structure Type HOUSE/BUILDING	

Crash Scene

First Harmful Event PARKED MOTOR VEHICLE	First Harmful Event Location ROADSIDE	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DARK/LIGHTED	
Road Surface Condition(s) DRY	Roadway Factor(s)	
Environment Factor(s) NONE	NONE	
Weather Condition(s) CLEAR		
Animal Type	Relation To Trafficway TRAFFICWAY - NOT ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION

Unit Summary

01 UNIT	Unit Status HIT AND RUN	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE		
	Vehicle Type PASSENGER CAR			Operating As Endorsements		
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? UNKNOWN	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 30	Total Lanes 1	
	Most Harmful Event: Collision With PARKED MOTOR VEHICLE		Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE		
	Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER		Traffic Control NO CONTROL	Traffic Control Inoperative/Missing NO		
	Surface Type CONCRETE		Road Curvature STRAIGHT	Road Grade LEVEL		
	Truck Bus or HazMat NO					
	01 VEHICLE	Vehicle				
		License Plate Number		Plate Type	St	Country of Issuance
Vehicle Identification Number		Make	Year	Model		
Color		Body Style	Bus Use			
Initial Contact Point 99 - UNKNOWN		Vehicle Damage				
Extent Of Damage VEHICLE NOT AT SCENE		16 - VEHICLE NOT AT SCENE				



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UNIT VEHICLE 01 01	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
	What Driver Was Doing UNKNOWN		Vehicle Factors	
	Driver Prior Action Other		UNKNOWN	
	Driver Actions FAILURE TO CONTROL, RAN OFF ROADWAY			
UNIT VEHICLE 01 01	Owner Name		Owner Address	
	Sequence Of Events			
	Event PARKED MOTOR VEHICLE			
	Event			
UNIT VEHICLE 01 01	Event			
	Event			
	Event			
	Event			
UNIT INDIVIDUAL 01 001	Individual			
	Driver		Citations Issued 0	Sex
	Address		Date of Birth	Race
	On Duty Crash		Driver License Number	
UNIT INDIVIDUAL 01 001	Safety Equipment		Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	RESTRAINT USE UNKNOWN	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
UNIT INDIVIDUAL 01 001	Injury		Injury Severity NO APPARENT INJURY	Airbag NOT APPLICABLE
	Ejected NOT APPLICABLE	Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT APPLICABLE
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #
	Hospital		Date of Death	Time of Death
UNIT INDIVIDUAL 01 001	Distracted By		Distracted By Source	
	Distracted By Action			
	Non Motorist			
	Striking Unit #		Location	

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UNIT 01 001	INDIVIDUAL	Prior Action			
		Action			
		Action Other			To/From School
		Suspected Alcohol Use		Suspected Drug Use	
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	Alcohol Test Results
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results
		Drug Type			
		Individual Condition NOT OBSERVED			

Unit Summary

UNIT 02	Unit Status LEGALLY PARKED		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR				Operating As Endorsements	
	Total Occs 0	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel NOT ON ROADWAY	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit N/A	Total Lanes 1	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type CONCRETE		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

UNIT 02 VEHICLE	Vehicle				
	License Plate Number AHF9570		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1N4AA6DV9LC369880		Make NISSAN	Year 2020	Model MAXIMA
	Color BLK - BLACK		Body Style SD - SEDAN		Bus Use
	Initial Contact Point 06 - REAR		Vehicle Damage 05 - RIGHT REAR CORNER, 06 - REAR, 07 - LEFT REAR CORNER		
	Extent Of Damage DISABLING DAMAGE				
	Towed Due To Damage NOT TOWED		Vehicle Removed By LEGALLY PARKED		
	What Driver Was Doing LEGALLY PARKED				



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UNIT	VEHICLE	Vehicle Factors	
		Driver Prior Action Other	NOT APPLICABLE
		Driver Actions NO CONTRIBUTING ACTION	
02	02	Owner Name JOHNNIE MAE ASHLEY (414) 554-7078	Owner Address 3528 W HIGHLAND BLVD MILWAUKEE, WI 53208 , US
Sequence Of Events			
	01	Event MOTOR VEH IN TRANSPORT	
	02	Event	
	03	Event	
	04	Event	
UNIT	Policy Holder		
	Insurance Company AUTO-CLUB-INS-ASSOC	Individual JOHNNIE ASHLEY	

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Document Number Override		Primary Crash Document #		Agency Crash Number		Investigating Officer/Deputy A. GOLLUP	
Crash Date 11/11/2023		Crash Time 08:00 PM		Date Arrived 11/11/2023		Time Arrived 09:28 PM	
Date Notified 11/11/2023		Time Notified 09:28 PM		Total Units 02		Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input checked="" type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone	<input type="checkbox"/> Trailer or Towed		<input type="checkbox"/> Reporting Threshold	
<input type="checkbox"/> Government Property		<input type="checkbox"/> Active School Zone		School Bus Related NO		Tags SUPERVISOR APPROVED, HIT & RUN	
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

Description

Diagram		Reconstruction By
<p>DIAGRAM NOT TO SCALE</p>		Photos By
		Additional Information NONE
<input checked="" type="checkbox"/> I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.		
UNIT 1 (NO DESCRIPTION) WAS WESTBOUND ON THE 3500 BLOCK OF W HIGHLAND AVE. UNIT 2 WAS LEGALLY PARKED AND UNOCCUPIED IN FRONT OF 3528 W HIGHLAND BLVD. UNIT 1 STRUCK UNIT 2 THEN FLED IN AN UNKNOWN DIRECTION. NO CAMERAS. NO WITNESSES. NO REPORTED INJURIES.		

Sedgwick Appraisals

**Please email all supplement requests to
autosupps@sedgwick.com**

2521 Technology Drive, Suite 201
Elgin, IL 60124

Phone: (888) 863-0001 x2, FAX:(847) 594-0244

Workfile ID: 0216601e

For:

AUTO CLUB INSURANCE ASSOCIATION**Estimate of Record****Owner: ASHLEY, JOHNNIE****Job Number:**

Written By: Paul Greene

Insured: ASHLEY, JOHNNIE

Policy #:

Claim #: 401809985ZCOL001-01

Type of Loss: Collision

Date of Loss: 11/11/2023 12:00 AM

Days to Repair: 0

Point of Impact: 15 Total Loss

Owner:

ASHLEY, JOHNNIE
3526 W. HIGHLAND BLVD
MILWAUKEE, WI 53208
(414) 510-6217 Business

Inspection Location:

ASHLEY, JOHNNIE
3526 W. HIGHLAND BLVD
MILWAUKEE, WI 53208
Home
(414) 510-6217 Business

Repair Facility:**VEHICLE**

2020 NISS Maxima SL 4D SED 6-3.5L Gasoline Gasoline Direct Injection BLACK

VIN: 1N4AA6DV9LC369880

Production Date: 11/2019

Interior Color: BLACK

License: AHF-9570

Odometer: 53,964

Exterior Color: BLACK

State: WI

Condition: Good

TRANSMISSION

Automatic Transmission

POWER

Power Steering

Power Brakes

Power Windows

Power Locks

Power Mirrors

Heated Mirrors

Power Driver Seat

Power Passenger Seat

DECOR

Dual Mirrors

Tinted Glass

Console/Storage

Overhead Console

Intermittent Wipers

Tilt Wheel

Cruise Control

Rear Defogger

Keyless Entry

Alarm

Message Center

Steering Wheel Touch Controls

Telescopic Wheel

Heated Steering Wheel

Climate Control

Navigation System

Remote Starter

Backup Camera

Parking Sensors

Intelligent Cruise

AM Radio

FM Radio

Stereo

Search/Seek

CD Player

Auxiliary Audio Connection

Premium Radio

Satellite Radio

SAFETY

Drivers Side Air Bag

Passenger Air Bag

Anti-Lock Brakes (4)

4 Wheel Disc Brakes

Front Side Impact Air Bags

Head/Curtain Air Bags

Hands Free Device

Lane Departure Warning

ROOF

Electric Glass Sunroof

Skyview Roof

SEATS

Bucket Seats

Leather Seats

Heated Seats

WHEELS

Aluminum/Alloy Wheels

PAINT

Clear Coat Paint

OTHER

Traction Control

Stability Control

Signal Integrated Mirrors

Estimate of Record

Owner: ASHLEY, JOHNNIE

Job Number:

2020 NISS Maxima SL 4D SED 6-3.5L Gasoline Gasoline Direct Injection BLACK

CONVENIENCE

Air Conditioning

Home Link

RADIO

Rear Side Impact Air Bags

Blind Spot Detection

Xenon or L.E.D. Headlamps

Estimate of Record

Owner: **ASHLEY, JOHNNIE**

Job Number:

2020 NISS Maxima SL 4D SED 6-3.5L Gasoline Gasoline Direct Injection BLACK

Line	Oper	Description	Part Number	Qty	Extended Price \$	Labor	Paint
1		EXHAUST SYSTEM					
2	Repl	RT Rear muffler	201009DJ1B	1	775.35 m	0.5 M	
3		PILLARS, ROCKER & FLOOR					
4	R&I	RT Rocker molding				0.7	
5	R&I	LT Rocker molding				0.7	
6		REAR DOOR					
7	R&I	RT Belt molding				0.3	
8	R&I	RT Handle, outside painted, black w/o prem. pkg				0.4	
9	R&I	RT R&I trim panel				0.5	
10		BACK GLASS					
11	R&I	Back glass Nissan				Incl.	
12		QUARTER PANEL					
13	Repl	RT Quarter panel from 11/2017	781129DJ0A	1	1,292.53	16.5	3.0
14		Add for Clear Coat					1.2
15		Deduct for Rear Bumper R&I				-1.8	
16	Repl	RT Wheelhouse liner	767484RA0A	1	99.35	Incl.	
17	Repl	RT Pillar molding	788729DJ1A	1	357.04	0.6	
18	Repl	RT Inner panel assy (HSS)	G67009DJMA	1	1,377.24 s	7.5	1.2
19		REAR BODY & FLOOR					
20	Repl	Rear body panel	791109DJ0A	1	711.02	Incl.	1.5
21		Overlap Major Adj. Panel					-0.4
22		Add for Clear Coat					0.2
23		Add for Inside					0.8
24		Deduct for Overlap				-1.0	
25	Repl	Underbody shield	748A26CA0A	1	34.85		
26	Repl	Rear floor pan	745146CA0A	1	761.42	14.5	1.6
27		Overlap Major Non-Adj. Panel					-0.2
28	Repl	RT Sidemember assy from 09/2015 (HSS)	G55109DLMA	1	860.78 s	8.0	1.0
29		Overlap Major Non-Adj. Panel					-0.2
30		Deduct for Overlap				-1.5	
31	*	Rpr LT Sidemember assy from 09/2015 (HSS)			s	1.0	1.0
32		Overlap Major Non-Adj. Panel					-0.2
33	Repl	RT Side panel	G45329DJMA	1	140.02	2.0	0.4
34		Add for Clear Coat					0.1
35	Repl	RT Gusset	748B43TA0A	1	88.24		
36	R&I	RT Trunk side trim				Incl.	
37	R&I	LT Trunk side trim				Incl.	
38	Repl	Rear panel trim	849204RA0A	1	104.65	Incl.	
39		TRUNK LID					
40	*	Repl LKQ trunk lid assy +25%	843004RA0A	1	812.50	0.9	2.4

Estimate of Record

Owner: ASHLEY, JOHNNIE

Job Number:

2020 NISS Maxima SL 4D SED 6-3.5L Gasoline Gasoline Direct Injection BLACK

41		Overlap Major Adj. Panel					-0.4
42		Add for Clear Coat					0.4
43		Repl RT Hinge	H44004RAMA	1	195.55	0.5	0.5
44		Overlap Minor Panel					-0.2
45		Repl LT Hinge	H44014RAMA	1	195.55	0.5	0.5
46		Overlap Minor Panel					-0.2
47		Repl Trunk lid switch	253804RA0B	1	94.13		
48		Repl Nameplate "MAXIMA"	848944RA0B	1	78.27	0.2	
49		Repl Nameplate "SL"	848963TG3A	1	70.91	0.2	
50		Repl Emblem	848909DJ0A	1	82.03	0.2	
51		R&I Trunk lid trim				0.3	
52		REAR LAMPS					
53	**	Repl A/M RT Tail lamp assy	265509DJ0A	1	313.00	Incl.	
54	**	Repl A/M CAPA LT Tail lamp assy	265559DJ0A	1	348.00	0.4	
55	**	Repl A/M CAPA RT Backup lamp assy	265409DJ0A	1	201.00	0.4	
56	**	Repl A/M CAPA LT Backup lamp assy	265459DJ0A	1	236.00	0.4	
57		REAR BUMPER					
58		O/H rear bumper				2.5	
59	** <>	Repl A/M CAPA Bumper cover w/prk sensor	850229DK0H	1	500.00	Incl.	3.0
60		Overlap Major Non-Adj. Panel					-0.2
61		Add for Clear Coat					0.6
62		Add for park sensor			m	0.4 M	
63		Repl RT Side retainer	852204RA0A	1	36.53	0.2	
64	**	Repl A/M CAPA Lower bumper	850B29DJ0E	1	249.00	Incl.	
65	** <>	Repl A/M CAPA Lower panel	850B29DJ0H	1	254.00	Incl.	1.0
66		Overlap Major Non-Adj. Panel					-0.2
67	*	Add for Clear Coat					0.2
68		Repl RT Lamp reflector	265608990C	1	62.02	Incl.	
69		R&I LT Lamp reflector				Incl.	
70	**	Repl A/M CAPA Absorber	850909DJ0A	1	132.00	Incl.	
71	**	Repl A/M CAPA Impact bar	850309DL6A	1	347.00	0.3	
72	*	Repl Park sensor black w/o prem. pkg	284386CA4B	1	74.93 m	Incl.	0.0
73		Repl RT Blind spot radar	284K09HU0A	1	731.95 m	0.2 M	
74		Repl Wire harness	240959DJ0A	1	123.80	Incl.	
75		Repl Prep unprimed bumper		1			0.8
76		Repl Add for park sensor		1	m	0.4 M	
77	#	Rpr Setup & measure				2.0	
78	#	Rpr Rough pull				4.0	
SUBTOTALS					11,740.66	62.9	19.2

NOTES

Prior Damage Notes:
NO UPD

Estimate of Record

Owner: **ASHLEY, JOHNNIE**

Job Number:

2020 NISS Maxima SL 4D SED 6-3.5L Gasoline Gasoline Direct Injection BLACK

ESTIMATE TOTALS

Category	Basis	Rate	Cost \$
Parts			11,740.66
Body Labor	61.4 hrs @	\$ 67.00 /hr	4,113.80
Paint Labor	19.2 hrs @	\$ 67.00 /hr	1,286.40
Mechanical Labor	1.5 hrs @	\$ 105.00 /hr	157.50
Paint Supplies	19.2 hrs @	\$ 46.00 /hr	883.20
Subtotal			18,181.56
Sales Tax	\$ 18,181.56 @	5.5000 %	999.99
Total Cost of Repairs			19,181.55
Deductible			500.00
Total Adjustments			500.00
Net Cost of Repairs			18,681.55

*** THIS IS NOT AN AUTHORIZATION TO REPAIR. ALL REPAIR COSTS ARE THE RESPONSIBILITY OF THE VEHICLE OWNER, WHO ULTIMATELY MUST AUTHORIZE ALL REPAIRS. NO ESTIMATE OR SUPPLEMENT WILL BE HONORED WITHOUT PRIOR INSPECTION AND AUTHORIZATION.***

*** COPY OF THIS APPRAISAL/SUPPLEMENT ONLY IS NOT AN ACCEPTANCE OF COVERAGE OR LIABILITY. ALL ISSUES OF COVERAGE OR LIABILITY ARE TO BE DETERMINED BY THE INSURANCE COMPANY. ***

*** THIS ESTIMATE/SUPPLEMENT IS SUBJECT TO AUDIT AND REVISION BY THE INSURANCE COMPANY ***

MOTOR VEHICLE REPAIR PRACTICES ARE REGULATED BY CHAPTER ATCP 132, WIS. ADM. CODE, ADMINISTERED BY THE BUREAU OF CONSUMER PROTECTION, WISCONSIN DEPT. OF AGRICULTURE, TRADE AND CONSUMER PROTECTION, P.O. BOX 8911, MADISON, WISCONSIN 53708-8911.

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.

Estimate of Record

Owner: ASHLEY, JOHNNIE

Job Number:

2020 NISS Maxima SL 4D SED 6-3.5L Gasoline Gasoline Direct Injection BLACK

Estimate based on MOTOR CRASH ESTIMATING GUIDE and potentially other third party sources of data. Unless otherwise noted, (a) all items are derived from the Guide ARF3752, CCC Data Date 11/15/2023, and potentially other third party sources of data; and (b) the parts presented are OEM-parts. OEM parts are manufactured by or for the vehicle's Original Equipment Manufacturer (OEM) according to OEM's specifications for U.S. distribution. OEM parts are available at OE/Vehicle dealerships or the specified supplier. OPT OEM (Optional OEM) or ALT OEM (Alternative OEM) parts are OEM parts that may be provided by or through alternate sources other than the OEM vehicle dealerships with discounted pricing. Asterisk (*) or Double Asterisk (**) Indicates that the parts and/or labor data provided by third party sources of data may have been modified or may have come from an alternate data source. Tilde sign (~) items indicate MOTOR Not-Included Labor operations. The symbol (<>) indicates the refinish operation WILL NOT be performed as a separate procedure from the other panels in the estimate. Non-Original Equipment Manufacturer aftermarket parts are described as Non OEM, A/M or NAGS. Used parts are described as LKQ, RCY, or USED. Reconditioned parts are described as Recond. Recored parts are described as Recore. NAGS Part Numbers and Benchmark Prices are provided by National Auto Glass Specifications. Labor operation times listed on the line with the NAGS information are MOTOR suggested labor operation times. NAGS labor operation times are not included. Pound sign (#) items indicate manual entries.

Some 2023 vehicles contain minor changes from the previous year. For those vehicles, prior to receiving updated data from the vehicle manufacturer, labor and parts data from the previous year may be used. The CCC ONE estimator has a list of applicable vehicles. Parts numbers and prices should be confirmed with the local dealership.

The following is a list of additional abbreviations or symbols that may be used to describe work to be done or parts to be repaired or replaced:

SYMBOLS FOLLOWING PART PRICE:

m=MOTOR Mechanical component. s=MOTOR Structural component. T=Miscellaneous Taxed charge category. X=Miscellaneous Non-Taxed charge category.

SYMBOLS FOLLOWING LABOR:

D=Diagnostic labor category. E=Electrical labor category. F=Frame labor category. G=Glass labor category. M=Mechanical labor category. S=Structural labor category. (numbers) 1 through 4=User Defined Labor Categories.

OTHER SYMBOLS AND ABBREVIATIONS:

Adj.=Adjacent. Algn.=Align. ALU=Aluminum. A/M=Aftermarket part. Blnd=Blend. BOR=Boron steel. CAPA=Certified Automotive Parts Association. D&R=Disconnect and Reconnect. HSS=High Strength Steel. HYD=Hydroformed Steel. Incl.=Included. LKQ=Like Kind and Quality. LT=Left. MAG=Magnesium. Non-Adj.=Non Adjacent. NSF=NSF International Certified Part. O/H=Overhaul. Qty=Quantity. Refn=Refinish. Repl=Replace. R&I=Remove and Install. R&R=Remove and Replace. Rpr=Repair. RT=Right. SAS=Sandwiched Steel. Sect=Section. Subl=Sublet. UHS=Ultra High Strength Steel. N=Note(s) associated with the estimate line.

CCC ONE Estimating - A product of CCC Intelligent Services Inc.

The following is a list of abbreviations that may be used in CCC ONE Estimating that are not part of the MOTOR CRASH ESTIMATING GUIDE:

BAR=Bureau of Automotive Repair. EPA=Environmental Protection Agency. NHTSA= National Highway Transportation and Safety Administration. PDR=Paintless Dent Repair. VIN=Vehicle Identification Number.

Estimate of Record

Owner: **ASHLEY, JOHNNIE**

Job Number:

2020 NISS Maxima SL 4D SED 6-3.5L Gasoline Gasoline Direct Injection BLACK

PARTS SUPPLIER LIST

Line	Supplier	Description	Price
53	Keystone-Complete-A-Milwaukee 9532 W.CARMEN AVENUE MILWAUKEE WI 53225 (800) 924-8230 (414) 463-1019	#NI2805119V A/M RT Tail lamp assy	\$ 313.00
54	Keystone-Complete-A-Milwaukee 9532 W.CARMEN AVENUE MILWAUKEE WI 53225 (800) 924-8230 (414) 463-1019	#NI2804119C A/M CAPA LT Tail lamp assy	\$ 348.00
55	Keystone-Complete-A-Milwaukee 9532 W.CARMEN AVENUE MILWAUKEE WI 53225 (800) 924-8230 (414) 463-1019	#NI2803122C A/M CAPA RT Backup lamp assy	\$ 201.00
56	Keystone-Complete-A-Milwaukee 9532 W.CARMEN AVENUE MILWAUKEE WI 53225 (800) 924-8230 (414) 463-1019	#NI2802122C A/M CAPA LT Backup lamp assy	\$ 236.00
59	Keystone-Complete-A-Milwaukee 9532 W.CARMEN AVENUE MILWAUKEE WI 53225 (800) 924-8230 (414) 463-1019	#NI1100333C A/M CAPA Bumper cover w/prk sensor	\$ 500.00
64	Keystone-Complete-A-Milwaukee 9532 W.CARMEN AVENUE MILWAUKEE WI 53225 (800) 924-8230 (414) 463-1019	#NI1195107C A/M CAPA Lower bumper	\$ 249.00
65	Keystone-Complete-A-Milwaukee 9532 W.CARMEN AVENUE MILWAUKEE WI 53225 (800) 924-8230 (414) 463-1019	#NI1144110C A/M CAPA Lower panel	\$ 254.00
70	Keystone-Complete-A-Milwaukee 9532 W.CARMEN AVENUE	#NI1170165C A/M CAPA Absorber	\$ 132.00

Estimate of Record

Owner: ASHLEY, JOHNNIE

Job Number:

2020 NISS Maxima SL 4D SED 6-3.5L Gasoline Gasoline Direct Injection BLACK

MILWAUKEE WI 53225

(800) 924-8230

(414) 463-1019

71	Keystone-Complete-A-Milwaukee 9532 W.CARMEN AVENUE MILWAUKEE WI 53225 (800) 924-8230 (414) 463-1019	#NI1106196C A/M CAPA Impact bar	\$ 347.00
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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 at the bottom of this instruction sheet. Generally the statute 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:

1. Proof of the amount of the claim by means of either itemized receipts or two itemized estimates.
2. A phone number where the claimant can be reached during business hours as well as the claimant's e-mail address, if any.
3. 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 claim 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 binding on the City.

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 employee 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 employee 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 employee; 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.











