



August 24, 2022

City of Milwaukee
200 E. Wells St Room 205
Milwaukee, WI 53202-3567

Original Via First Class Mail
Copy Via Email:

RE: Date of Loss: June 21, 2022
Description of Vehicle: 2017 Ford Transit
Creditor/ACM's Client: Bell Ambulance - WI
ACM File #: 00540285-PD-122706

Dear City of Milwaukee,

Alternative Claims Management has been retained by Bell Ambulance - WI to handle the processing of a claim relating to damage to one of its vehicles all as referenced above. The total amount due our client as a result of the damage and loss is as shown on the enclosed Payment Demand Summary.

Your personal auto insurance policy may provide coverage for the loss. Please report this claim to your insurance as soon as possible to expedite payment or contact our office for further assistance.

Federal law requires that this letter have the 30-day verification notice as shown below.

Pursuant to 15 USC Section 1692g, be advised that Alternative Claims Management is attempting to collect a debt and any information obtained will be used for that purpose. Within thirty (30) days after receipt of this notice you must dispute the validity of this debt, or any portion thereof, or this debt will be assumed to be valid by the debt collector. Upon your written request within thirty (30) days after receipt of this notice, we will furnish you with the name and address of the original creditor, if different from the "Creditor/ACM Client" listed above. If you notify us, in writing, within thirty (30) days after receipt of this notice that the above debt, or any portion thereof, is disputed, we will obtain verification of the debt and a copy of such verification will be mailed to you.

Sincerely,

ACM Damage Recovery Team
Phone | (210) 340-4400
Email | Mail@altclaim.com

OFFICE CITY ATTORNEY
20 AUG 2022 09:03 AM

CITY OF MILWAUKEE
2022 AUG 29 PM 3:52
CITY CLERK'S OFFICE



Payment Demand Summary

August 24, 2022

City of Milwaukee
200 E. Wells St Room 205
Milwaukee, WI 53202-3567

ACM #: 00540285-PD-122706
ACM Client: Bell Ambulance - WI
Vehicle Information: 2017 Ford Transit
VIN: 1FDBW2XM1HKA37727
Loss Date: June 21, 2022

| PAYMENT DEMAND LINE ITEMS | AMOUNT DUE |
|----------------------------------|-------------------------|
| ACV | \$44,826.18 |
| LESS SALVAGE VALUE | -\$450.00 |
| LOSS OF USE | \$503,467.20 |
| TOWING | \$346.18 |
| APPRAISAL FEE | \$260.00 |
| ADMINISTRATIVE FEE | \$500.00 |
| SALES TAX | \$105.50 |
| REGISTRATION AND TITLE | \$144.50 |
| DRUG FEE | \$500.00 |
| BALANCE DUE | \$549,699.56 USD |

At this time, we do hereby request that you send payment of the total amount due. For your convenience, we have enclosed a credit card authorization form. Please sign the authorization and return to us if you would like to take advantage of this option. Or, you may pay by sending a cashier's check or money order payable to:

Alternative Claims Management
Attn: 00540285-PD-122706
16404 San Pedro Ave.
San Antonio, TX 78232

| CREDIT CARD AUTHORIZATION | |
|--|-----------------------------------|
| NAME (As it appears on card) _____ | |
| CARD TYPE: <input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> DISCOVER <input type="checkbox"/> AMERICAN EXPRESS | AMOUNT (USD): \$ _____ |
| CARD #: _____ | EXPIRATION DATE: _____ CVV# _____ |
| BILLING ADDRESS _____ | CITY _____ STATE _____ ZIP _____ |
| I hereby authorize the amount above to be charged to my credit card for damage sustained to the vehicle. | |
| Signature _____ | Date _____ |

Client & Claim Information

Client: **Alternative Claims Management**
Account #: **6026**
Adjuster: **Janet Delgado**
Submitted By: **Janet Delgado**
Requested: **Aug 9, 2022 9:07 AM**

Valuator: **Robert Rzeppa**

Claim: **00540285**
Customer Ref:
Owner: **Bell Ambulance**
Location:
Milwaukee, WI 53207
Vehicle: **2017 Ford Transit Van**
VIN: **1FDBW2XM1HKA37727**
Mileage: **153000**
Loss Date: **Jun 21, 2022**
Type: **Collision**

Valuation Summary

| | |
|----------------------------------|--------------------|
| Fair Market Valuation | \$44,826.18 |
| + Unique Customizations: | |
| - Prior Damage/Other Deductions: | |
| - Deductible: | |
| Adjusted Market Valuation | \$44,826.18 |

Valuation Comments

The loss is a 2017 Ford T-350 Transit Van with a Type II Ambulance Body.

No additional repairs refurbishments or accessories are reported for the loss.

Search expanded beyond local markets to find comparable units for sale.

Due to limited or no availability of comparable vehicles for sale, DCI contacted qualified licensed Dealer(s) for Price Quotation(s).

DCI used Standard/Average for options/equipment not provided.

Valuation Methodology

DCI Solution's *Valu-Rite®* Report reflects its opinion as to the market value of the loss vehicle/asset based upon the information provided by client and/or insured and does not warrant the accuracy of such information as provided. This valuation and said process meets the *Uniform Standards of Professional Appraisal Practices (USPAP)*.

Our methodology to determine such market value incorporates the search and comparison to "like" vehicle/assets, for sale or having recently been sold, and/or dealer quotations, and/or previously valued vehicle/assets in the DCI Solution database, in the market area. "Like" vehicle/assets are determined by a number of factors including but not limited to year, make, and model.

Adjustments (Price Factors) are made for variances between the Loss vehicle/asset and Comparable vehicle/assets, which may include but are not limited to Mileage/Hours, Equipment/Accessories, Model Year, Condition, Refurbishments, and Unique Customizations. These Price Factor adjustments are made on a line-by-line basis, calculated so that each vehicle is adjusted to a "standard/average" vehicle for comparison purposes. This includes mileage and all standard equipment.

If no information has been provided on certain price factors, DCI Solution will use average/standard options. When model year variances are necessary, adjustments will be made at each non-standard option level and at the Model level for all standard options. Industry standards and resources are used for all valuations.

The valuation does not include tax or prior damage unless so stated and provided or requested by client. The sales tax rate, if provided by DCI Solution, is the general sales tax rate and DCI makes no representations or warranties concerning the accuracy of such sales tax information. Title and licensing fees are not included.

This report contains proprietary information of DCI Solution and shall not be disclosed to any third party (other than the insured or claimant) without DCI Solution's prior written consent.

DCI Solution certifies, to the best of its knowledge and belief: 1) the statements of fact contained in this report are true and correct; 2) the reported analyses, opinions, and conclusions are limited only by the reported assumptions and limiting conditions and our impartial and unbiased professional analyses, opinions, and conclusions; 3) it has no present or prospective interest in the property that is the subject of this report and no personal interest with respect to the parties involved; 4) it has no bias with respect to the property that is the subject of this report or to the parties involved with this assignment; 5) engagement in this assignment was not contingent upon developing or reporting predetermined results; 6) compensation for completing this assignment is not contingent upon the development or reporting of a predetermined value or direction in value that favors the cause of the client, the amount of the value opinion, the attainment of a stipulated result, or the occurrence of a subsequent event directly related to the intended use of this appraisal; 7) analyses, opinions, and conclusions were developed, and this report has been prepared, in conformity with the Uniform Standards of Professional Appraisal Practice; 8) it has not made a personal inspection of the property that is the subject of this report; 9) Name(s) and signature(s) are on file.

Vehicle Description & VIN Decoding

Vehicle/Asset

Overview

| | |
|--------------------------|--------------------------|
| Model Year | 2017 |
| Make | Ford |
| Model | Transit Van |
| Overall Condition | 3 - Average |
| GVWR Class | Class H: 9,001-10,000 lb |
| Odometer | Miles |
| Trim Level | Base |
| Series | T-350 High Roof Slide |
| Body Type | 4 Door Van; Cargo |

Emergency Make/Model/Type

| | |
|-------------|-------------------|
| Type | Ambulance Type II |
|-------------|-------------------|

Powertrain

Engine

| | |
|----------------------------|-------------------------|
| Engine Manufacturer | Ford |
| Engine Type | V6, 3.7L; FFV; DOHC 24V |
| Fuel Type | Gasoline |
| Drive Line Type | RWD |
| Engine Condition | 3 - Average |

Transmission

| | |
|-------------------------------|-------------|
| Transmission Type | Automatic |
| Transmission Condition | 3 - Average |

Tires/Axles

Tires

| | |
|-----------------------------------|---------------|
| Front Tire Tread Remaining | 50% (2 Tires) |
| Rear Tire Tread Remaining | 50% (2 Tires) |

Interior Features

Trim and Interior Extras

| | |
|---------------------------|-------------|
| Interior Condition | 3 - Average |
|---------------------------|-------------|

Electronics/Power Accessories

Sound

System/Communications

| | |
|---------------------|-----------------------|
| Audio System | Standard Audio System |
|---------------------|-----------------------|

Power Accessories

Backup Camera Systems

Rear View Camera

Comparable Vehicles

| | <i>Loss Vehicle</i> 1FDBW2XM1HKA37727 | <i>Comp</i> {UNKNOWN} | <i>Comp</i> {UNKNOWN} | <i>Comp</i> {UNKNOWN} |
|------------------------|---|----------------------------------|--------------------------------------|--|
| Location | Milwaukee, WI 53207 | Camp Hill, PA 17011 (598 mi) | Henderson, NV 89074 (1,522 mi) | South El Monte, CA 91733 (1,734 mi) |
| Owner | Bell Ambulance | Pilip Customs (866) 374-9012 | Fire Trucks Unlimited (866) 876-0979 | Leader Emergency Vehicles (626) 575-0880 |
| Source | DCI Solution | <i>Commercialtrucktrader.com</i> | <i>Dealer Quotes</i> | <i>Dealer Quotes</i> |
| Stock Number | | 17 | Brian | Bob |
| Market Value: | \$44,826.18 | \$45,000.00 | \$45,000.00 | \$42,500.00 |
| Total Adjustments | | <i>\$1,978.53</i> | <i>\$0.00</i> | <i>\$0.00</i> |
| Adjusted Value: | | \$46,978.53 | \$45,000.00 | \$42,500.00 |

Vehicle/Asset

Overview

| | 2017 | 2017 | 2017 | 2017 |
|-------------------|---------------------------------|--|---------------------------------|---------------------------------|
| Model Year | 2017 | 2017 | 2017 | 2017 |
| Make | Ford | Ford | Ford | Ford |
| Model | Transit Van | Transit Van | Transit Van | Transit Van |
| Overall Condition | 3 - Average | 3 - Average | 3 - Average | 3 - Average |
| GVWR Class | Class H: 9,001-10,000 lb | Class H: 9,001-10,000 lb | Class H: 9,001-10,000 lb | Class H: 9,001-10,000 lb |
| Odometer | 153000 Miles | 227000 Miles <i>\$1,978.53</i> | 153000 Miles | 153000 Miles |
| Trim Level | Base | Base | Base | Base |
| Series | T-350 High Roof Slide | T-350 High Roof Slide | T-350 High Roof Slide | T-350 High Roof Slide |
| Body Type | 4 Door Van; Cargo | 4 Door Van; Cargo | 4 Door Van; Cargo | 4 Door Van; Cargo |

Emergency Make/Model/Type

| Type | Ambulance Type II | Ambulance Type II | Ambulance Type II | Ambulance Type II |
|------|--------------------------|--------------------------|--------------------------|--------------------------|
|------|--------------------------|--------------------------|--------------------------|--------------------------|

Powertrain

Engine

| | Ford | Ford | Ford | Ford |
|---------------------|--------------------------------|--------------------------------|--------------------------------|--------------------------------|
| Engine Manufacturer | Ford | Ford | Ford | Ford |
| Engine Type | V6, 3.7L; FFV; DOHC 24V | V6, 3.7L; FFV; DOHC 24V | V6, 3.7L; FFV; DOHC 24V | V6, 3.7L; FFV; DOHC 24V |
| Fuel Type | Gasoline | Gasoline | Gasoline | Gasoline |
| Drive Line Type | RWD | RWD | RWD | RWD |
| Engine Condition | 3 - Average | 3 - Average | 3 - Average | 3 - Average |

Transmission

| Transmission Type | Automatic | Automatic | Automatic | Automatic |
|------------------------|--------------------|--------------------|--------------------|--------------------|
| Transmission Condition | 3 - Average | 3 - Average | 3 - Average | 3 - Average |

| | <i>Loss Vehicle</i> 1FDBW2XM1HKA37727 | <i>Comp</i> {UNKNOWN} | <i>Comp</i> {UNKNOWN} | <i>Comp</i> {UNKNOWN} |
|------------------------|---|----------------------------------|--------------------------------------|--|
| Location | Milwaukee, WI 53207 | Camp Hill, PA 17011 (598 mi) | Henderson, NV 89074 (1,522 mi) | South El Monte, CA 91733 (1,734 mi) |
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| Adjusted Value: | | \$46,978.53 | \$45,000.00 | \$42,500.00 |

Tires/Axles

| Tires | | | | |
|----------------------------|---------------|---------------|---------------|---------------|
| Front Tire Tread Remaining | 50% (2 Tires) | 50% (2 Tires) | 50% (2 Tires) | 50% (2 Tires) |
| Rear Tire Tread Remaining | 50% (2 Tires) | 50% (2 Tires) | 50% (2 Tires) | 50% (2 Tires) |

Interior Features

| Trim and Interior Extras | | | | |
|--------------------------|-------------|-------------|-------------|-------------|
| Interior Condition | 3 - Average | 3 - Average | 3 - Average | 3 - Average |

Electronics/Power Accessories

| Power Accessories | | | | |
|-----------------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Backup Camera Systems | Rear View Camera | Rear View Camera | Rear View Camera | Rear View Camera |
| Sound System/Communications | | | | |
| Audio System | Standard Audio System | Standard Audio System | Standard Audio System | Standard Audio System |

Valu-Rite Report Invoice

Invoice **2295744**
Aug 10, 2022

Claim **00540285**
Claim Reference

Bill To: **Alternative Claims Management**
16404 San Pedro Avenue
San Antonio, TX 78232

Owner **Bell Ambulance**
Vehicle **2017 Transit Van Ford**
VIN **1FDBW2XM1HKA37727**

Adjuster: **Janet Delgado**

Type **Ambulance**

| Service Name | Description | Qty | Each | Extended |
|-----------------------------------|-------------------|-------------|-----------------|-----------------|
| Total Loss Valuation (ACV) | ACV2295744 | 1.00 | \$110.00 | \$110.00 |
| | | | | \$110.00 |

Terms. **Payable upon Receipt**

Accounts not paid with 30 days of the invoice date are subject to a 1.5% monthly finance charge.

Payable To. **DCI Solution**
PO Box 9186
Rapid City, SD 57709
FEIN #46-2054780

Thank you for using DCI Solution, where Value is more than just a number.

Property Damage Appraisers, Milwaukee, WI

**P.O. Box 216
S. Milwaukee, WI 53172**



Phone: (414) 294-3683 Fax: (414) 294-3689

Salvage Bid Report

| | | | |
|--------------------|-------------------------------|----------------------|--------------|
| Carrier: | ALTERNATIVE CLAIMS MANAGEMENT | Reference #: | 041940000472 |
| Owner: | BELL AMBULANCE INC | Claim #: | 00540285 |
| Inspection: | , DESK REVIEW- ACV ONLY | Our Ref #: | 3502080059 |
| | | Date of Loss: | 8/1/2022 |

Year/Make/Model/Style: 2017 / Ford / Transit Van / Ambulance

| Salvage Buyer | Contact | Bid Amount | Date Received |
|---|----------------|-------------------|----------------------|
| H AND H SUSSEX, WI (262) 246-6400 | DAVID | \$201.00 | |
| JANTZ YARD KENOSHA, WI (262) 658-1392 | STEVE | \$345.00 | |
| HIRBAR STURTVANT, WI (262) 886-3757 | TOM | \$450.00 | |

REGISTRATION AND TITLE FEES BY STATE (2012 CHART)

Updated November 2012

[A-C](#) | [D-H](#) | [I-L](#) | [M](#) | [N](#) | [O-R](#) | [S-U](#) | [V-W](#)

Alabama

| Motor Vehicle Type | Registration Fee | Title Fee |
|--------------------|------------------|-----------|
| Motor Vehicle | \$23 | \$15 |
| Motorcycle | \$15 | \$15 |

Sources: [Alabama Tag Fee Schedule](#) and [Vehicle Title FAQs](#)

Alaska

| Motor Vehicle Type | Registration Fee | Title Fee |
|---|----------------------------|-----------|
| Motor Vehicle *Includes pickup trucks under 10,000 lbs. | \$100 once every two years | \$15 |
| Motorcycle | \$60 once every two years | \$15 |

Source: [Alaska Motor Vehicle Registration Fees & Taxes 2012](#)

Arizona

| Motor Vehicle Type | Registration Fee | Title Fee |
|--------------------|--|-----------|
| Motor Vehicle | \$8 (\$8.25 in Metro Tucson and Phoenix) + \$1.50 air quality research fee + vehicle license tax (assessed value of 60% of the MSRP - reduced by 16.25% each year) | \$4 |
| Motorcycle | \$9 | \$4 |

Source: [Arizona Title and Registration](#)

Arkansas

| Motor Vehicle Type | Registration Fee | Title Fee |
|--------------------|--|-----------|
| Motor Vehicle | \$17 cars 3,000 lbs. or less \$25 cars 3,000 lbs. - 4,500 lbs. \$30 cars over 4,500 lbs.+ \$2.50 validation decal for all automobiles. | \$5 |
| Motorcycle | \$3.00: 0 to 250cc engine \$7.00: 251cc+ engine +\$2.50 validation decal for all motorcycles | \$5 |

Source: [Arkansas Motor Vehicle Registration Fee Schedule](#)

California

NAVIGATE

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Share this:

NCSL is committed to the success of state legislatures and staff. Founded in 1975, we are a respect bipartisan organization providing states support, ideas, connections and a strong voice on Capitol Hill.



Source: West Virginia Department of Motor Vehicle

Wisconsin

| Motor Vehicle Type | Registration Fee | Title Fee |
|--------------------|------------------|-----------|
| Motor Vehicle | \$75 | \$69.50 |
| Motorcycle | \$23 biennially | \$69.50 |

Source: Wisconsin Department of Motor Vehicle - Fees and Title Fees

Wyoming

| Motor Vehicle Type | Registration Fee | Title Fee |
|--------------------|---|-----------|
| Motor Vehicle | \$15 (plus county registration that is calculated by a percentage of factory price of the vehicle and the age of the vehicle) | \$9 |
| Motorcycle | \$12 | \$9 |

Source: Larimer County Treasurer Vehicle Registration and Larimer County Clerk - Auto Titles and Park County Clerk - Certificate of Titles

Source: AAA, Digest of Motor Laws, 2011; State Motor Vehicle websites.

NCSL Member Toolbox

Members Resources

- Get Involved With NCSL
- Jobs Clearinghouse
- Legislative Careers
- Staff Directories
- StateConnect Directory

Policy & Research Resources

- Bill Information Service
- Legislative Websites
- NCSL Bookstore

Meeting Resources

- Calendar
- Online Registration

Press Room

- Media Contact
- NCSL in the News
- Press Releases

Denver

7700 East First Place
 Denver, CO 80230
 Tel: 303-364-7700 | Fax: 303-364-7800

Washington

444 North Capitol Street, N.W., Suite
 Washington, D.C. 20001
 Tel: 202-624-5400 | Fax: 202-737-1000

| | |
|---|---|
| Date | Jun 21, 2022 |
| Squad | 451 |
| Employee Name (Driver) | Andrea Beecher |
| Employee Number (Driver) | 4464 |
| Employee Name (Technician) | David chrisbaum |
| Employee Number (Technician) | 4578 |
| Date of Incident | Jun 21, 2022 |
| Police Department Investigating and squad number | Milwaukee police department 7212 |
| Police report number (if applicable) | M5L1CBQ6VV |
| Other party insurance information (if applicable) | Na |
| Were there any injuries sustained in the incident? | Yes |
| Description of what happened (Please only state known facts obtained during the investigation) | Squad 451 consisting of Andrea Beecher and David chrisbaum transporting Pamala Padgett dob 02/25/1959 from St. Joes to her residence. 451 was traveling east bound on Burleigh st approaching 30th st when a MPD squad 7 was heading north bound on on 30th st with lights and sirens activated in a pursuit of a homicide subject. The MPD squad blew through the intersection and collided with 451 on the front passenger side of the squad pushing the squad around facing north coming to a stop on the north east curb the mpd squad came to a stop facing east on the curb. The patient complained of right foot pain and was transported by squad 409 to froedtert. There was 2 MPD officers in their squad and 1 was transported to froedtert by MFD Med 5. Andrea and David were transported to Froedtert by 491. All electronics were removed from 451. The patient is still missing her glasses. I don't see any reason for any disciplinary action but per OPS investigation via the video. Rays |

towing towed 451 to the the shop with Jason Krueger taking care of that. Let me know if you have any questions.

Drug test completed?

NO

Upload incident photos (include wide shots establishing scene, showing entire vehicle(s), and close-up shots of damage. Include all vehicles involved.

[File 1](#)
[File 2](#)
[File 3](#)
[File 4](#)
[File 5](#)
[File 6](#)
[File 7](#)
[File 8](#)
[File 9](#)

Supervisor name

Greg Rudoll

Supervisor employee number

3914

M5L1CBQ6VV
221721581

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

M5L1CBQ6VV

| | | | | | | | |
|---|--------------------------------------|--|------------------------------------|---|--|--|---------------------------|
| Document Number Override | | Primary Crash Document # | | Agency Crash Number | | Investigating Officer/Deputy A. FIGUEROA | |
| Crash Date 06/21/2022 | | Crash Time 08:09 PM | | Date Arrived 06/21/2022 | | Time Arrived 08:19 PM | |
| Date Notified 06/21/2022 | | Time Notified 08:09 PM | | Total Units 02 | | Total Injured 05 | Total Killed 00 |
| <input checked="" type="checkbox"/> On Emergency | <input type="checkbox"/> Hit and Run | <input checked="" type="checkbox"/> Lane Closure | <input type="checkbox"/> Work Zone | <input type="checkbox"/> Trailer or Towed | | <input type="checkbox"/> Reporting Threshold | |
| <input checked="" type="checkbox"/> Government Property | | <input type="checkbox"/> Active School Zone | | School Bus Related NO | | Tags SUPERVISOR APPROVED, SQUAD ACCIDEN | |
| <input checked="" type="checkbox"/> Reportable | | Crash Type DT4000 (STANDARD CRASH) | | <input type="checkbox"/> Amended | | <input type="checkbox"/> Secondary Crash | |

Description

| | | | |
|---------|--|---|--|
| Diagram | | Reconstruction By | |
| | | Photos By SQUAD 1828 (FI CERVERA) | |
| | | Additional Information PHOTOS | |
| | | <input checked="" type="checkbox"/> I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report. | |

UNIT 1 WAS TRAVELING NORTHBOUND ON 30TH ST APPROACHING WEST BURLEIGH ST, IN A FULLY MARKED POLICE VEHICLE WITH ACTIVATED RED/BLUE LIGHTS AND AUDIBLE SIRENS. UNIT 2 WAS TRAVELING EASTBOUND ON BURLEIGH ST APPROACHING NORTH 30TH ST. UNIT 1 STRUCK UNIT 2. UNIT 1 OPERATOR COMPLAINED OF PAIN ON LEFT SIDE OF BODY, AND THE PASSENGER COMPLAINED OF PAIN THROUGHOUT BODY. UNIT 2 OPERATOR COMPLAINED OF LEG PAIN, UNIT 2 PASSENGERS 2 AND 3 COMPLAINED OF LEG PAIN. ALL WERE TRANSPORTED TO FROEDTERT HOSPITAL FOR MEDICAL CLEARANCE.

M5L1CBQ6VV
221721581

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

Location

| | | |
|--|---------------------------------------|-----------------------------------|
| INTERSECTION ON N 30TH ST AT W BURLEIGH ST IN THE CITY OF MILWAUKEE IN MILWAUKEE COUNTY | Latitude 43.075217955 | Longitude -87.950987948 |
| | X Coordinate 422580.90625 | Y Coordinate 4769606.5 |
| | Structure Type NO STRUCTURE | |

Crash Scene

| | | | |
|---|--|---|---------------------------------------|
| First Harmful Event MOTOR VEH IN TRANSPORT | | First Harmful Event Location ON ROADWAY | |
| Manner of Collision 01 - ANGLE | | Light Condition DAYLIGHT | |
| Road Surface Condition(s) DRY | | Roadway Factor(s) NONE | |
| Environment Factor(s) NONE | | | |
| Weather Condition(s) CLEAR | | | |
| Animal Type | | Relation To Trafficway TRAFFICWAY - 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 INTERSECTION | Intersection Type FOUR-WAY INTERSECTION | |
| Closure Type FULL CLOSURE | | Reasons for Closure | |
| Date Initial Lane/Rd Closed 06/21/2022 | Time Initial Lane/Rd Closed 08:09 PM | LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS | |
| Date All Lanes Open 06/21/2022 | Time All Lanes Open 10:24 PM | Date Scene Cleared 06/21/2022 | Time Scene Cleared 10:24 PM |

Unit Summary

| | | | | | | |
|-------------|---|---|---|--|--------------------------------|---|
| UNIT | 01 | Unit Status ON EMERGENCY | Vehicle Operating As Classification D CLASS | | Unit Type AUTOMOBILE | |
| | | Vehicle Type POLICE EMERGENCY | Operating As Endorsements | | | |
| | Total Occs 2 | Train/Bus # Recorded | Total # Citations Issued 0 | Total Trailers 0 | Total HazMat Types 0 | |
| | Insurance? YES | Direction Of Travel NORTHBOUND | <input type="checkbox"/> Pre Crash Tire Mark | Speed Limit 25 | Total Lanes 2 | |
| | Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT | | Special Function POLICE | Emergency Motor Vehicle Use EMERGENCY OPERATION, EMERGEN | | |
| | Traffic Way TWO-WAY, NOT DIVIDED | | Traffic Control STOP SIGN | Traffic Control Inoperative/Missing NO | | |
| | Surface Type BLACKTOP (BITUMINOUS) | | Road Curvature STRAIGHT | Road Grade LEVEL | | |
| | Truck Bus or HazMat NO | | | | | |
| | 01 | 01 | Vehicle | | | |
| | | | License Plate Number E8573 | Plate Type OFF - MUNICIPAL OFFICI | St WI | Country of Issuance UNITED STATES |
| | | Vehicle Identification Number 1FM5K8AB6LGA97775 | Make FORD | Year 2020 | Model EXPLORER | |

M5L1CBQ6VV
221721581

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

| | | | | |
|---|---|--|--|--|
| UNIT VEHICLE | Color BLK - BLACK | Body Style UT - SPORT UTILITY VEHICLE | Bus Use | |
| | Initial Contact Point 11 - LEFT FRONT CORNER | Vehicle Damage 15 - ALL AREAS | | |
| | Extent Of Damage DISABLING DAMAGE | | | |
| | Towed Due To Damage TOWED DUE TO DISABLING DAMAGE | Vehicle Removed By CITY OF MILWAUKEE | | |
| UNIT VEHICLE | What Driver Was Doing GOING STRAIGHT | Vehicle Factors | | |
| | Driver Prior Action Other | NOT APPLICABLE | | |
| | Driver Actions LOOKED BUT DID NOT SEE | | | |
| | Owner Name MILWAUKEE POLICE DEPARTMENT (414) 933-4444 | Owner Address 749 W STATE ST MILWAUKEE, WI 53233 , US | | |
| Sequence Of Events | | | | |
| UNIT VEHICLE | Event MOTOR VEH IN TRANSPORT | | | |
| | Event | | | |
| | Event | | | |
| | Event | | | |
| UNIT VEHICLE | Policy Holder | | | |
| | Insurance Company CITY OF MILWAUKEE | Government CITY OF MILWAUKEE | | |
| UNIT INDIVIDUAL | Individual | | | |
| | Driver STEVEN JAMES MENGE (414) 935-7272 | Citations Issued 0 | Sex MALE | |
| | | Date of Birth 05/07/1992 | Race WHITE | |
| | Address 3626 W FOND DU LAC AVE MILWAUKEE, WI 53216 , US | Driver License Number M5207909216705 STATE: WISCONSIN COUNTRY: UNITED STATES | | |
| UNIT INDIVIDUAL | Safety Equipment | | | |
| | On Duty Crash POLICE | Safety Equipment | | |
| | Row 01 - FRONT ROW | Seat Position 07 - LEFT | SHOULDER & LAP BELT | |
| | Helmet Use | | Helmet Compliance | |
| | Eye Protection | | Tint Compliance | |
| | UNIT INDIVIDUAL | Injury | | |
| Injury Severity POSSIBLE INJURY | | Airbag DEPLOYED-FRONT | | |
| Ejected NOT EJECTED | | Ejection Path NOT EJECTED/NOT APPLICABLE | Trapped/Extricated NOT TRAPPED | |
| Medical Transport EMS GROUND | | EMS Agency Identifier 6001161 | EMS Run # MED 5 | |

M5L1CBQ6VV
221721581

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

| | | | | | | |
|--|--|---------------|--|------------------------------------|--|----------------|
| UNIT | Hospital FROEDTERT MEM LUTHERAN HOSP | | Date of Death | | Time of Death | |
| | Distracted By | | Distracted By Source NOT APPLICABLE (NOT DISTRACTED) | | | |
| | Distracted By Action NOT DISTRACTED | | | | | |
| | Non Motorist | | Striking Unit # | | Location | |
| | Prior Action | | | | | |
| | Action | | | | | |
| | Action Other | | | | | To/From School |
| | Drug & Alcohol | | Suspected Alcohol Use NO | | Suspected Drug Use NO | |
| | 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 | Individual | | | | | |
| | Passenger STEVEN KENNETH CAMPBELL (414) 935-7272 | | | Citations Issued 0 | Sex MALE | |
| | Address 3626 W FOND DU LAC AVE MILWAUKEE, WI 53216 , US | | | Date of Birth 08/21/1981 | Race WHITE | |
| | Driver License Number C5147918130103 STATE: WISCONSIN COUNTRY: UNITED STATES | | | | | |
| | Safety Equipment | | On Duty Crash POLICE | | Safety Equipment SHOULDER & LAP BELT | |
| | Row 01 - FRONT ROW | | Seat Position 09 - RIGHT | | | |
| | Helmet Use | | Helmet Compliance | | | |
| | Eye Protection | | Tint Compliance | | | |
| | Injury | | Injury Severity POSSIBLE INJURY | | Airbag DEPLOYED-FRONT | |
| | Ejected NOT EJECTED | | Ejection Path NOT EJECTED/NOT APPLICABLE | | Trapped/Extricated NOT TRAPPED | |
| Medical Transport LAW ENFORCEMENT | | | EMS Agency Identifier | | EMS Run # | |
| Hospital FROEDTERT MEM LUTHERAN HOSP | | Date of Death | | Time of Death | | |

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221721581

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

| | | | | | |
|---|--------------------------------------|--|-----------------------------|--------------------------|----------------------|
| UNIT INDIVIDUAL 01 002 | Distracted By | | Distracted By Source | | |
| | Distracted By Action | | | | |
| | Non Motorist | | Striking Unit # | Location | |
| | Prior Action | | | | |
| | Action | | | | |
| | Action Other | | | To/From School | |
| | Drug & Alcohol | | Suspected Alcohol Use NO | Suspected Drug Use NO | |
| | 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 APPEARED NORMAL | | | | | |

Unit Summary

| | | | | | | |
|------------|--|----------------------------------|--|---------------------|---|--|
| UNIT 02 | Unit Status IN TRANSIT | | Vehicle Operating As Classification D CLASS | | Unit Type AUTOMOBILE | |
| | Vehicle Type PASSENGER VAN | | | | Operating As Endorsements | |
| | Total Occs 3 | Train/Bus # Recorded | Total # Citations Issued 0 | Total Trailers 0 | Total HazMat Types 0 | |
| | Insurance? NOT APPLICABLE | Direction Of Travel EASTBOUND | <input type="checkbox"/> Pre Crash Tire Mark | Speed Limit 35 | Total Lanes 2 | |
| | Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT | | Special Function AMBULANCE | | Emergency Motor Vehicle Use NON-EMERGENCY, TRANSPORT | |
| | Traffic Way TWO-WAY, NOT DIVIDED | | Traffic Control NO CONTROL | | Traffic Control Inoperative/Missing NO | |
| | Surface Type BLACKTOP (BITUMINOUS) | | Road Curvature STRAIGHT | | Road Grade LEVEL | |
| | Truck Bus or HazMat NO | | | | | |

Vehicle

| | | | | | |
|----------|--|--|--------------------------------|--------------|--------------------------------------|
| 02 02 | License Plate Number BELL451 | | Plate Type AUT - AUTOMOBILE | St WI | Country of Issuance UNITED STATES |
| | Vehicle Identification Number 1FDBW2XM1HKA37727 | | Make FORD | Year 2017 | Model TRANSIT |
| | Color WHI - WHITE | | Body Style AM - AMBULANCE | | Bus Use |
| | Initial Contact Point 02 - RIGHT SIDE FRONT | | | | |

M5L1CBQ6VV
221721581

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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



| | | |
|--|---|--|
| UNIT VEHICLE | Vehicle Damage | |
| | Extent Of Damage DISABLING DAMAGE | 15 - ALL AREAS |
| | Towed Due To Damage TOWED DUE TO DISABLING DAMAGE | Vehicle Removed By RAYS TOWING |
| | What Driver Was Doing GOING STRAIGHT | Vehicle Factors |
| UNIT VEHICLE | Driver Prior Action Other | NOT APPLICABLE |
| | Driver Actions NO CONTRIBUTING ACTION | |
| | Owner Name BELL AMBULANCE INC (414) 264-2355 | Owner Address 549 E WILSON ST PO 070550 MILWAUKEE, WI 53207 , US |
| | Sequence Of Events | |
| UNIT VEHICLE | Event MOTOR VEH IN TRANSPORT | |
| | Event | |
| | Event | |
| | Event | |
| UNIT INDIVIDUAL | Individual | |
| | Driver ANDREA KATHERINE BEECHER (414) 264-2355 | Citations Issued 0 |
| | Date of Birth 10/14/1999 | Sex FEMALE |
| | Address 4152 WESTVIEW LN OSHKOSH, WI 54904 , US | Race WHITE |
| Driver License Number B2600119987403 STATE: WISCONSIN COUNTRY: UNITED STATES | | |
| UNIT INDIVIDUAL | Safety Equipment | |
| | On Duty Crash EMT/FIRST-RESPONDER | Safety Equipment SHOULDER & LAP BELT |
| | Row 01 - FRONT ROW | Seat Position 07 - LEFT |
| | Helmet Use | Helmet Compliance |
| Eye Protection | | Tint Compliance |
| UNIT INDIVIDUAL | Injury | |
| | Injury Severity POSSIBLE INJURY | Airbag DEPLOYED-FRONT |
| | Ejected NOT EJECTED | Ejection Path NOT EJECTED/NOT APPLICABLE |
| | Trapped/Extricated NOT TRAPPED | |
| Medical Transport EMS GROUND | | EMS Agency Identifier 6001146 |
| Hospital FROEDTERT MEM LUTHERAN HOSP | | EMS Run # 491 |
| Date of Death | | Time of Death |
| Distracted By | | Distracted By Source NOT APPLICABLE (NOT DISTRACTED) |

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221721581

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

| | | | |
|--|---|--|---|
| UNIT INDIVIDUAL | Distracted By Action NOT DISTRACTED | | |
| | Non Motorist | Striking Unit # | Location |
| | Prior Action | | |
| | Action | | |
| | Action Other | | To/From School |
| | Drug & Alcohol | Suspected Alcohol Use NO | Suspected Drug Use NO |
| | 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 APPEARED NORMAL | | |
| UNIT INDIVIDUAL | Individual | | |
| | Passenger DAVID WILLIAM CHRISBAUM (414) 264-2355 | Citations issued 0 | Sex MALE |
| | | Date of Birth 03/21/2001 | Race WHITE |
| | Address 2800 N 72ND ST MILWAUKEE, WI 53210 , US | Driver License Number C6211790110101 STATE: WISCONSIN COUNTRY: UNITED STATES | |
| | Safety Equipment | On Duty Crash EMT/FIRST-RESPONDER | Safety Equipment NONE USED - VEHICLE OCCUPANT |
| | Row 11 - OTHER ENCLOSED | Seat Position | |
| | Helmet Use | Helmet Compliance | |
| | Eye Protection | Tint Compliance | |
| | Injury | Injury Severity POSSIBLE INJURY | Airbag DEPLOYED-FRONT |
| | Ejected NOT EJECTED | Ejection Path NOT EJECTED/NOT APPLICABLE | Trapped/Extricated NOT TRAPPED |
| Medical Transport EMS GROUND | EMS Agency Identifier 8001146 | EMS Run # 491 | |
| Hospital FROEDTERT MEM LUTHERAN HOSP | Date of Death | Time of Death | |
| Distracted By | Distracted By Source | | |
| Distracted By Action | | | |

M5L1CBQ6VV
221721581

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

| | | | | |
|--|--|--|---------------------------------|--|
| UNIT INDIVIDUAL | Non Motorist | | Striking Unit # | Location |
| | Prior Action | | | |
| | Action | | | |
| | Action Other | | | To/From School |
| | Drug & Alcohol | | Suspected Alcohol Use NO | Suspected Drug Use NO |
| | 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 APPEARED NORMAL | | | |
| | UNIT INDIVIDUAL | Individual | | |
| Passenger PAMELA L PADGETT | | Citations Issued 0 | Sex FEMALE | |
| | | Date of Birth 02/25/1959 | Race WHITE | |
| Address 2551 N 23RD ST #A MILWAUKEE, WI 53206 , US | | Driver License Number P3236725958504 STATE: WISCONSIN COUNTRY: UNITED STATES | | |
| Safety Equipment | | On Duty Crash | Safety Equipment | |
| Row 11 - OTHER ENCLOSED | | Seat Position | OTHER | |
| Helmet Use | | Helmet Compliance | | |
| Eye Protection | | Tint Compliance | | |
| Injury | | Injury Severity POSSIBLE INJURY | Airbag DEPLOYED-FRONT | |
| Ejected NOT EJECTED | | Ejection Path NOT EJECTED/NOT APPLICABLE | | Trapped/Extricated NOT TRAPPED |
| Medical Transport EMS GROUND | | EMS Agency Identifier 6001146 | EMS Run # 405 | |
| Hospital FROEDTERT MEM LUTHERAN HOSP | | Date of Death | Time of Death | |
| Distracted By | | Distracted By Source | | |
| Distracted By Action | | | | |
| Non Motorist | | Striking Unit # | Location | |

M5L1CBQ6VV
221721581

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

| | | | |
|----------------------------|--|------------------------------------|---------------------------------|
| UNIT INDIVIDUAL | Prior Action | | |
| | Action | | |
| | Action Other | | To/From School |
| | Drug & Alcohol | Suspected Alcohol Use NO | Suspected Drug Use NO |
| | 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 APPEARED NORMAL | | |

| | |
|---|---|
| Property Owner | |
| PROP OWNER 01 | Government CITY OF MILWAUKEE (414) 286-2489 |
| Address 200 E WELLS ST MILWAUKEE, WI 53202 , US | |

| | | | |
|-----------------------------|---------------------|---|-------------------|
| Fixed Objects Struck | | | |
| 01 | Striking Unit 02 | Struck Object OTHER OBJECT - NOT FIXED | Damage Tag Number |

Charge Type Detail Report (Trip Date)

Trip Date IS BETWEEN 03/20/2022 AND 06/20/2022; AND Vehicles IS BELL AMBULANCE INC: 451

| | <u>Count</u> | <u>Dollars</u> |
|--|----------------|----------------------|
| BELL AMBULANCE INC | | |
| Base Rate | | |
| ALS SCT Base Rate | 0.0 | 0.00 |
| ALS-1 Emerg Base Rate Res - F | 5.0 | 4,399.45 |
| ALS-1 Emergency Base Rate - P | 0.0 | 0.00 |
| ALS-1 Non-Emerg Base Rate - P | 0.0 | 0.00 |
| BLS Emerg Base Rate NonRes - F | 5.0 | 4,280.00 |
| BLS Emerg Base Rate Res - F | 78.0 | 57,720.00 |
| BLS Emerg First Resp NonRes-F | 0.0 | 0.00 |
| BLS Emerg First Response Res-F | 3.0 | 711.00 |
| BLS Emergency Base Rate - P | 32.0 | 34,048.00 |
| BLS Non-Emerg Base Rate - P | 89.0 | 94,696.00 |
| Copy Fee-HIPAA SafeHarbor | 2.0 | 13.00 |
| Totals For Type: Base Rate | 214.0 | \$ 195,867.45 |
| Mileage | | |
| Mileage - ALS - F | 43.0 | 866.02 |
| Mileage - BLS - F | 417.6 | 8,410.46 |
| Mileage - Emer - BLS - P | 442.0 | 10,834.00 |
| Mileage - Non Emer - BLS - P | 741.5 | 17,794.25 |
| Totals For Type: Mileage | 1,644.1 | \$ 37,904.73 |
| Misc. Services | | |
| Aspirin (per 81 mg) - F | 4.0 | 163.12 |
| Decontamination - BLS - P | 1.0 | 175.25 |
| Extra Attendant - BLS - P | 5.0 | 1,297.50 |
| Face Mask - BLS - P | 309.0 | 5,793.75 |
| Oxygen - BLS - F | 7.0 | 746.41 |
| Oxygen - BLS - P | 11.0 | 1,716.00 |
| Stair Chair - BLS - P | 2.0 | 260.00 |
| Thermometer Shield - P | 4.0 | 31.00 |
| Totals For Type: Misc. Services | 343.0 | \$ 10,183.03 |
| Misc. Supplies | | |
| Adult Nasal Cannula - BLS - P | 2.0 | 54.00 |
| Airway - F | 1.0 | 27.07 |
| Bag Mask - BLS - P | 1.0 | 130.00 |
| Bandages/Trauma - F | 2.0 | 46.10 |
| BLS Supplies - F | 1.0 | 35.00 |

RescueNet™ Reporting

Charge Type Detail Report (Trip Date)

Trip Date IS BETWEEN 03/20/2022 AND 06/20/2022; AND Vehicles IS BELL AMBULANCE INC: 451

| | <u>Count</u> | <u>Dollars</u> |
|---|----------------|----------------------|
| BELL AMBULANCE INC (cont.) | | |
| Chemstick - BLS - P | 14.0 | 742.00 |
| Emesis - BLS - P | 1.0 | 22.25 |
| Gloves (Pair) - BLS - P | 484.0 | 2,904.00 |
| Goggles (Eye Shield) - BLS - P | 45.0 | 450.00 |
| Linens - BLS - P | 120.0 | 5,280.00 |
| PPE- F | 91.0 | 3,185.00 |
| Splinting/Immobilization - F | 1.0 | 496.98 |
| | <hr/> | <hr/> |
| Totals For Type: Misc. Supplies | 763.0 | \$ 13,372.40 |
| <hr/> | | |
| Totals For Company: BELL AMBULANCE INC | 2964.1 | \$257,327.61 |
| | | |
| Report Totals: | 2,964.1 | \$ 257,327.61 |

Ray's Towing Inc.

833 W. Waterford Ave.
 Milwaukee, WI 53221
 Phone: 414-481-4600
 Fax: 414-481-1242

Invoice

| DATE | INVOICE # |
|------------|-----------|
| 06/21/2022 | 663372 |

Bill To

Bell Ambulance Service
 Attn:Accounts Payable Dept
 P.O. Box 070550
 Attn:Accounts Payable Dept
 Milwaukee, WI 53207 0550

| SERVICE DATE | P.O. NUMBER | REF # | TERMS | TRUCK # | TRAILER # |
|--|---------------------------|---|----------------|--|-------------|
| 06/21/2022 | | | Due On Receipt | 451 | |
| QUANTITY | DESCRIPTION | | | PRICE EACH | AMOUNT |
| 1 | Medium Duty Towing Charge | | | \$312.50 | \$312.50 |
| 1 | Fuel SurCharge | | | \$15.63 | \$15.63 |
| PAYMENT DATE | PAYMENT DESCRIPTION | | | | PAYMENT AMT |
| | | | | | |
| CALL DETAILS: | | | | Sub Total (\$): | 328.13 |
| LOC: N. 30th St & W. Burleigh St, Milwaukee, WI, In Traffic!!! | | | | Tax (\$): | 18.05 |
| DES: 2832 S. 5th Ct, Milwaukee, WI, Bell Ambulance Maintenance | | | | Total (\$): | 346.18 |
| 2017 Ford Transit T-350 White | | | | | |
| BELL451 | | | | Payments (\$): | 0.00 |
| ODO: N-A | | | | Total Due (\$): | 346.18 |
| VIN#: 1FDBW2XM1HKA37727 | | | | | |
| NOTES: | | APPROVED | | | |
| | | By Chris Anderson at 10:35 am, Jul 07, 2022 | | | |
| RECEIVED | | | | Approved for Payment | |
| By Angie at 8:36 am, Jun 22, 2022 | | | | GL Acct <u>53222</u> | |
| | | | | Amt <u>\$346.18</u> | |
| | | | | Memo <u>Squad 451 Accident</u> | |
| | | | | Tow | |
| | | | | Apvd By <u>CK</u> Date <u>06/27/2022</u> | |

1.5 hours of wait time on scene for Milwaukee Police to take pictures of the crash scene.

INVOICE

Aro Appraisal Service

401 N. Gardiner Ave

Rockford, IL 61107

Phone (779) 200-0669

Email eric@aroappraisal.com

Date : 08/02/2022

File # : 2400989

Invoice # : 2057558

Claim # : 00540285

Policy # :

Loss Date : 06/21/2022

Insured/Claimant : Bell Ambulance

Adjuster : Tom Wray

| Type | Description | Units | Unit Price | Total |
|----------------|----------------|-------|------------|-----------------|
| Full Appraisal | Full Appraisal | 1.00 | \$150.00 | \$150.00 |
| Total | | | | \$150.00 |

Make all checks payable to Aro Appraisal Service
Thank you for your business.

ARO APPRAISAL SERVICE

Workfile ID: 0754d352

P.O. Box 6574
 Rockford, IL 61125
 Phone: (779) 200-0669
 eric@aroappraisal.com

For:

Estimate of Record**Owner: Bell Ambulance****Job Number: 2400989**

Written By: Eric Dreyer
 Adjuster: TOM, WRAY

Insured: Bell Ambulance
 Type of Loss: Collision
 Point of Impact: 15 Total Loss

Policy #:
 Date of Loss: 6/21/2022 12:00 PM

Claim #: 00540285
 Days to Repair:

Owner:

Bell Ambulance
 2832 S 5th Ct
 Milwaukee, WI 53207
 (414) 486-4044 Business
 (414) 339-1381 Business

Inspection Location:**Repair Facility:****VEHICLE**

2017 FORD Transit Van T-350 High Roof 148" WB 9500# GVWR w/Sliding Right Hand Door 3D VAN 6-3.7L Flex Fuel Sequential MPI White

VIN: 1FDBW2XM1HKA37727
 License:
 State:

Production Date: 1/2017
 Odometer: 153,000
 Condition:

Interior Color:
 Exterior Color: White

TRANSMISSION

Automatic Transmission
 Overdrive

POWER

Power Steering
 Power Brakes
 Power Windows
 Power Locks
 Power Mirrors

DECOR

Dual Mirrors
 Tinted Glass

Console/Storage

Overhead Console

CONVENIENCE

Air Conditioning
 Intermittent Wipers
 Tilt Wheel
 Keyless Entry
 Telescopic Wheel
 Backup Camera

RADIO

AM Radio
 FM Radio

Stereo

Search/Seek

Auxiliary Audio Connection

SAFETY

Drivers Side Air Bag
 Passenger Air Bag
 Anti-Lock Brakes (4)
 4 Wheel Disc Brakes
 Traction Control
 Stability Control
 Front Side Impact Air Bags
 Head/Curtain Air Bags

SEATS

Bucket Seats
 Reclining/Lounge Seats

WHEELS

Styled Steel Wheels

PAINT

Clear Coat Paint

OTHER

California Emissions

Estimate of Record

Owner: Bell Ambulance

Job Number: 2400989

2017 FORD Transit Van T-350 High Roof 148" WB 9500# GVWR w/Sliding Right Hand Door 3D VAN 6-3.7L Flex Fuel Sequential MPI White

| Line | Oper | Description | Part Number | Qty | Extended Price \$ | Labor | Paint |
|------|------|---|--------------|-----|-------------------|-------|-------|
| 1 | | FRONT BUMPER & GRILLE | | | | | |
| 2 | Repl | Lower cover | CK4Z17757AA | 1 | 360.75 | 0.7 | |
| 3 | Repl | RT Mount bracket | BK3Z17C947H | 1 | 56.58 | Incl. | |
| 4 | Repl | LT Mount bracket | BK3Z17C947G | 1 | 57.98 | Incl. | |
| 5 | Repl | Impact bar | SEE FOOTNOTE | 1 | | | |
| 6 | Repl | License bracket | CK4Z17A385AA | 1 | 45.60 | 0.2 | |
| 7 | <> | Repl Bumper cover oxford white | HK4Z17D957BA | 1 | 475.08 | 1.1 | 2.8 |
| 8 | Repl | RT Side bracket | BK3Z17C947C | 1 | 17.07 | Incl. | |
| 9 | Repl | LT Side bracket | BK3Z17C947D | 1 | 17.58 | Incl. | |
| 10 | Repl | Reinf panel | CK4Z17C897BB | 1 | 247.22 | Incl. | |
| 11 | Repl | Grille w/chrome | CK4Z17E810BA | 1 | 1,172.45 | Incl. | |
| 12 | Repl | Ornament | CK4Z8213A | 1 | 85.38 | Incl. | |
| 13 | Repl | Impact bar (HSS) | LK4Z17757B | 1 | 422.22 | Incl. | |
| 14 | Repl | RT Mount plate | CK4Z6110112C | 1 | 21.63 | Incl. | |
| 15 | Repl | LT Mount plate | CK4Z6110112C | 1 | 21.63 | Incl. | |
| 16 | Repl | Lower impact bar (UHS) | LK4Z6110008B | 1 | 237.60 | 0.3 | |
| 17 | Repl | RT Lower extrn | CK4Z6110120C | 1 | 221.88 | 0.2 | |
| 18 | Repl | LT Lower extrn | CK4Z6110121C | 1 | 206.53 | 0.2 | |
| 19 | Repl | RT Trans mount brkt | CK4Z6110218B | 1 | 115.65 m | 0.1 | |
| 20 | Repl | LT Trans mount brkt | CK4Z6110219B | 1 | 115.65 m | 0.1 | |
| 21 | Repl | RT Mount bracket screw M4.8x19mm | W502671S450B | 1 | 1.50 | | |
| 22 | Repl | Lower cover screw | W705134S442 | 6 | 15.00 | | |
| 23 | Repl | LT Mount bracket screw M4.8x19mm | W502671S450B | 4 | 6.00 | | |
| 24 | Repl | RT Mount bracket screw M6x20mm | W705134S442 | 4 | 10.00 | | |
| 25 | Repl | LT Mount bracket screw M6x20mm | W705134S442 | 4 | 10.00 | | |
| 26 | Repl | License bracket nut | W520833S442 | 2 | 5.00 | | |
| 27 | Repl | License bracket screw | W714769S307 | 2 | 7.00 | | |
| 28 | Repl | Bumper cover screw | W712744S307 | 4 | 10.00 | | |
| 29 | Repl | Bumper cover retainer | W709176S300 | 15 | 22.50 | | |
| 30 | Repl | RT Side bracket screw | W502671S450B | 4 | 6.00 | | |
| 31 | Repl | LT Side bracket screw | W502671S450B | 4 | 6.00 | | |
| 32 | Repl | RT Side bracket nut | W715197S439 | 4 | 10.00 | | |
| 33 | Repl | LT Side bracket nut | W715197S439 | 4 | 10.00 | | |
| 34 | | FRONT LAMPS | | | | | |
| 35 | Repl | RT Headlamp assy w/chrome trim from 09/02/2015 | CK4Z13008K | 1 | 417.48 | 0.2 | |
| 36 | | Aim headlamps | | | | 0.5 | |
| 37 | Repl | LT Headlamp assy w/chrome trim from 09/02/2015 | CK4Z13008M | 1 | 409.87 | 0.2 | |
| 38 | Repl | RT Headlamp assy screw | W700843S442 | 2 | 5.00 | | |

Estimate of Record

Owner: Bell Ambulance

Job Number: 2400989

2017 FORD Transit Van T-350 High Roof 148" WB 9500# GVWR w/Sliding Right Hand Door 3D VAN 6-3.7L Flex Fuel Sequential MPI White

| | | | | | | | |
|----|-------------------------------------|---------------------------------|--------------|---|----------|-----|-------|
| 39 | Repl | LT Headlamp assy screw | W700843S442 | 2 | 5.00 | | |
| 40 | RADIATOR SUPPORT | | | | | | |
| 41 | Repl | Mount panel | BK3Z8A284F | 1 | 777.48 | 3.0 | 1.8 |
| 42 | Repl | RT Lower bracket | BK3Z16K038A | 1 | 15.75 | 0.2 | 0.2 |
| 43 | Repl | LT Lower bracket | BK3Z16K039A | 1 | 18.98 | 0.2 | 0.2 |
| 44 | Repl | RT Upper bracket | CK4Z16C198A | 1 | 14.45 | 0.2 | 0.2 |
| 45 | Repl | LT Upper bracket | CK4Z16C199A | 1 | 13.53 | 0.2 | 0.2 |
| 46 | Repl | Lower tie bar | CK4Z8125A | 1 | 85.73 | 0.4 | 0.8 |
| 47 | | Overlap Minor Panel | | | | | -0.2 |
| 48 | Repl | Temp sensor | 6M5Z15A022A | 1 | 50.55 | m | 0.1 |
| 49 | Repl | Lower deflector | CK4Z17626A | 1 | 202.32 | | Incl. |
| 50 | Repl | RT Deflector | CK4Z8310A | 1 | 40.40 | | Incl. |
| 51 | Repl | LT Deflector | CK4Z8311A | 1 | 40.60 | | Incl. |
| 52 | Repl | Air deflector | CK4Z8327A | 1 | 24.45 | | Incl. |
| 53 | Repl | RT Outer w'strip | CK4Z16A238A | 1 | 119.08 | | Incl. |
| 54 | Repl | LT Outer w'strip | CK4Z16A238B | 1 | 102.32 | | Incl. |
| 55 | Repl | RT Inner w'strip | CK4Z16A238D | 1 | 7.07 | | Incl. |
| 56 | Repl | LT Inner w'strip | CK4Z16A238C | 1 | 48.48 | | Incl. |
| 57 | COOLING | | | | | | |
| 58 | Repl | Radiator | CK4Z8005B | 1 | 282.88 | m | 2.5 M |
| 59 | Repl | RT Radiator lower insulator | 94BZ8125A | 1 | 7.30 | | |
| 60 | Repl | LT Radiator lower insulator | 94BZ8125A | 1 | 7.30 | | |
| 61 | Repl | RT Radiator upper insulator | 1S7Z8125E | 1 | 22.57 | | |
| 62 | Repl | LT Radiator upper insulator | 1S7Z8125E | 1 | 22.57 | | |
| 63 | Repl | Fan & motor | LK4Z8C607B | 1 | 387.27 | m | Incl. |
| 64 | Repl | Cooler pipe | CK4Z7R081D | 1 | 121.67 | m | 0.5 M |
| 65 | Repl | P/S cooler | CK4Z3D746A | 1 | 33.00 | m | 0.5 M |
| 66 | AIR CONDITTONER & HEATER | | | | | | |
| 67 | Repl | Condenser | CK4Z19712C | 1 | 243.64 | m | 1.0 M |
| 68 | | AC Service evacuate & recharge | | | | m | 1.4 M |
| 69 | | AC Service refrigerant recovery | | | | m | 0.4 M |
| 70 | Repl | Wire harness | BK3Z18B518B | 1 | 68.67 | | |
| 71 | HOOD | | | | | | |
| 72 | Repl | Hood | CK4Z16612C | 1 | 1,004.43 | | 1.2 |
| 73 | | Overlap Major Non-Adj. Panel | | | | | -0.2 |
| 74 | | Add for Underside(Complete) | | | | | 1.0 |
| 75 | Repl | RT Vent grille | CK4Z16C630BB | 1 | 78.63 | | Incl. |
| 76 | Repl | LT Vent grille | CK4Z16C630AC | 1 | 95.17 | | Incl. |
| 77 | Repl | RT Hinge | KK3Z16796B | 1 | 67.47 | | 0.3 |
| 78 | Repl | LT Hinge | KK3Z16797B | 1 | 61.22 | | 0.3 |
| 79 | Repl | Latch w/o anti theft | CK4Z16700A | 1 | 108.20 | | Incl. |
| 80 | FENDER | | | | | | |
| 81 | Repl | RT Fender | CK4Z16005A | 1 | 524.97 | | 1.4 |
| 82 | | Overlap Major Adj. Panel | | | | | -0.4 |
| 83 | | Add for Edging | | | | | 0.5 |

Estimate of Record

Owner: Bell Ambulance

Job Number: 2400989

2017 FORD Transit Van T-350 High Roof 148" WB 9500# GVWR w/Sliding Right Hand Door 3D VAN 6-3.7L Flex Fuel Sequential MPI White

| | | | | | | | | |
|-----|------|---|----------------|---|-----------------|---|-------|------|
| 84 | Repl | LT Fender | CK4Z16006A | 1 | 406.10 | | 1.4 | 2.0 |
| 85 | | Overlap Major Adj. Panel | | | | | | -0.4 |
| 86 | | Add for Edging | | | | | | 0.5 |
| 87 | Repl | RT Fender liner | BK3Z16102A | 1 | 12.80 | | Incl. | |
| 88 | Repl | LT Fender liner | BK3Z16102B | 1 | 13.58 | | Incl. | |
| 89 | Repl | RT Wheel opng mldg | BK3Z61278L00BB | 1 | 51.50 | | Incl. | |
| 90 | Repl | LT Wheel opng mldg | BK3Z61278L01BC | 1 | 57.28 | | Incl. | |
| 91 | Repl | RT Upper molding single rear wheels from 05/04/2016 | CK4Z16004CA | 1 | 71.92 | | Incl. | |
| 92 | Repl | LT Upper molding single rear wheels from 05/04/2016 | CK4Z16003CA | 1 | 71.62 | | Incl. | |
| 93 | Repl | RT Inner fender | CK4Z6102038B | 1 | 243.83 | s | 8.5 | 1.2 |
| 94 | Repl | RT Reinf panel | BK3Z16C274A | 1 | 144.35 | s | 5.7 | 1.2 |
| 95 | Repl | RT Apron assy fr 05/22/2015 (UHS) | LK4Z16054D | 1 | 40.13 | s | 7.0 | 1.3 |
| 96 | | Overlap Major Non-Adj. Panel | | | | | | -0.2 |
| 97 | Repl | RT Apron assy reinforcement | BK3Z6110008A | 1 | 77.17 | | | 1.3 |
| 98 | * | Repl LT Apron assy fr 05/22/2015 (UHS) | GK3Z16055D | 1 | <u>40.13</u> | s | 7.0 | 1.3 |
| 99 | | Overlap Major Non-Adj. Panel | | | | | | -0.2 |
| 100 | * | Repl RT Rail assy (BOR) | HK4Z16054E | 1 | <u>1,179.18</u> | s | 16.5 | 2.5 |
| 101 | | Overlap Major Non-Adj. Panel | | | | | | -0.2 |
| 102 | | Deduct for Overlap | | | | | -2.5 | |
| 103 | Repl | LT Rail assy (BOR) | HK4Z16055D | 1 | 1,179.18 | s | 16.5 | 2.5 |
| 104 | | Overlap Major Non-Adj. Panel | | | | | | -0.2 |
| 105 | | Deduct for Overlap | | | | | -2.5 | |
| 106 | Repl | LT Reinf panel | BK3Z16C275A | 1 | 144.35 | s | 5.7 | 1.2 |
| 107 | Repl | LT Inner fender | LK4Z6102039A | 1 | 202.02 | s | 8.5 | 1.2 |
| 108 | Repl | RT Reinforcement | CK4Z6110008B | 1 | 153.23 | s | 5.5 | 0.5 |
| 109 | | Overlap Minor Panel | | | | | | -0.2 |
| 110 | Repl | LT Reinforcement | CK4Z6110009B | 1 | 100.50 | s | 5.5 | 0.5 |
| 111 | | Overlap Minor Panel | | | | | | -0.2 |
| 112 | Repl | RT Reinf plate | CK4Z6113208A | 1 | 136.27 | s | 3.5 | 0.4 |
| 113 | Repl | LT Reinf plate | CK4Z6113209A | 1 | 136.27 | s | 3.5 | 0.4 |
| 114 | Repl | RT Front bracket | BK2Z6124386A | 1 | 8.18 | | | 0.4 |
| 115 | Repl | LT Front bracket | BK2Z6124386A | 1 | 8.18 | | | 0.4 |
| 116 | Repl | RT Front plate | BK3Z61108K34B | 1 | 7.58 | s | 1.0 | 0.2 |
| 117 | Repl | LT Front plate | BK3Z61108K34B | 1 | 7.58 | s | 1.0 | 0.2 |
| 118 | Repl | RT Rear brace | BK3Z61108K34A | 1 | 7.58 | s | 1.0 | 0.2 |
| 119 | Repl | LT Rear brace | BK3Z61108K34A | 1 | 7.58 | s | 1.0 | 0.2 |
| 120 | Repl | RT Inner rail | LK4Z6110120C | 1 | 229.40 | s | 5.5 | 0.5 |
| 121 | | Overlap Minor Panel | | | | | | -0.2 |
| 122 | | Deduct for Overlap | | | | | -2.0 | |
| 123 | Repl | LT Inner rail | CK4Z6110121B | 1 | 251.02 | s | 5.5 | 0.5 |
| 124 | | Overlap Minor Panel | | | | | | -0.2 |
| 125 | | Deduct for Overlap | | | | | -2.0 | |

Estimate of Record

Owner: Bell Ambulance

Job Number: 2400989

2017 FORD Transit Van T-350 High Roof 148" WB 9500# GVWR w/Sliding Right Hand Door 3D VAN 6-3.7L Flex Fuel Sequential MPI White

| | | | | | | | |
|-----|--------------------------|---|----------------|---|----------|---------|-----|
| 126 | Repl | RT Inner rail reinforcement | BK2Z6110112B | 1 | 12.32 s | 1.0 | 0.2 |
| 127 | Repl | LT Inner rail reinforcement | BK2Z6110113A | 1 | 12.02 s | 1.0 | 0.2 |
| 128 | ELECTRICAL | | | | | | |
| 129 | Repl | Engine harness 3.7 liter | GU5Z12A581SK | 1 | 303.33 | | |
| 130 | Repl | Wire harness main 3.7 liter | HK4Z14401L | 1 | 1,575.00 | | |
| 131 | ENGINE | | | | | | |
| 132 | Repl | R&I engine assy | NONE | 1 | m | 9.5 M | |
| 133 | WHEELS | | | | | | |
| 134 | Repl | RT/Front Wheel, steel single rear wheels silver | LK4Z1015A | 1 | 691.28 m | 0.3 | |
| 135 | Repl | LT/Front Wheel, steel single rear wheels silver | LK4Z1015A | 1 | 691.28 m | 0.3 | |
| 136 | FRONT SUSPENSION | | | | | | |
| 137 | Repl | RT Hub assy single rear wheels | CK4Z1104G | 1 | 363.64 m | Incl. M | |
| 138 | Repl | LT Hub assy single rear wheels | CK4Z1104G | 1 | 363.64 m | 0.9 M | |
| 139 | Repl | RT Brake hose | CK4Z2078A | 1 | 16.07 m | 0.5 M | |
| 140 | | Bleed brake system | | | m | 0.5 M | |
| 141 | Repl | RT ABS sensor single rear wheels | BK2Z2C204A | 1 | 30.00 m | 0.4 M | |
| 142 | Repl | LT ABS sensor single rear wheels | BK2Z2C204A | 1 | 30.00 m | 0.4 M | |
| 143 | Repl | RT Knuckle single rear wheels | BK3Z3K185C | 1 | 301.82 m | 2.4 M | |
| 144 | | Wheel alignment align front wheels | | | m | 1.5 M | |
| 145 | | Wheel alignment check rear alignment | | | m | 0.6 M | |
| 146 | Repl | RT Lower cntrl arm | CK4Z3078A | 1 | 296.36 m | Incl. M | |
| 147 | | Deduct for Overlap | | | | -0.3 M | |
| 148 | Repl | Susp crossmember | CK4Z5019D | 1 | 368.47 m | 4.5 M | |
| 149 | | Deduct for Overlap | | | | -0.4 M | |
| 150 | Repl | RT Strut T350 | CK4Z18124G | 1 | 149.45 m | 2.2 | |
| 151 | | Deduct for Overlap | | | | -0.3 | |
| 152 | WINDSHIELD | | | | | | |
| 153 | Repl | Windshield FORD, w/o mirror w/o lane departure | CK4Z5403100E | 1 | 356.47 | 3.5 | |
| 154 | INSTRUMENT PANEL | | | | | | |
| 155 | R&I | Instrument panel | | | | 4.6 M | |
| 156 | * | R&I Storage compart w/o trailer brake w/o accessory swtch | | | | Incl. | |
| 157 | RESTRAINT SYSTEMS | | | | | | |
| 158 | Repl | Driver air bag | CK4Z14043B13AC | 1 | 341.12 m | Incl. M | |
| 159 | | Air bag system diagnosis ck system operation | | | m | 0.5 M | |
| 160 | | Air bag system diagnosis pinpoint test | | | m | 0.8 M | |
| 161 | Repl | Psngr air bag | CK4Z14044A74BC | 1 | 636.97 m | 0.8 M | |
| 162 | Repl | RT Ft seat air bag | CK4Z14611D10A | 1 | 275.97 m | 0.2 M | |
| 163 | Repl | LT Ft seat air bag | CK4Z14611D11A | 1 | 275.97 m | 0.2 M | |
| 164 | Repl | RT Head air bag van medium, | CK4Z14042D94E | 1 | 625.25 m | 0.6 M | |

Estimate of Record

Owner: Bell Ambulance

Job Number: 2400989

2017 FORD Transit Van T-350 High Roof 148" WB 9500# GVWR w/Sliding Right Hand Door 3D VAN 6-3.7L Flex Fuel Sequential MPI White

| | | | | | | | | |
|-----|------------------------------------|---|----------------|---|----------|--|-------|------|
| | | high roof | | | | | | |
| 165 | Repl | LT Head air bag van medium, high roof | CK4Z14042D95E | 1 | 622.22 m | | 0.6 M | |
| 166 | Repl | RT Head air bag bolt | W717570S439 | 1 | 2.50 | | M | |
| 167 | Repl | LT Head air bag bolt | W717570S439 | 1 | 2.50 | | | |
| 168 | Repl | Clockspring w/o lane departure | BK2Z14A664A | 1 | 175.97 m | | 1.0 M | |
| 169 | Repl | Ft impact sensor from 03/17/2015 | FR3Z14B004A | 1 | 45.64 m | | Incl. | |
| 170 | Repl | RT Side impact sens front door | CK4Z14B345B | 1 | 43.33 m | | Incl. | |
| 171 | Repl | LT Side impact sens front door | CK4Z14B345B | 1 | 43.33 m | | Incl. | |
| 172 | Repl | RT Side impact sens from 03/17/2015 | FR3Z14B004A | 1 | 45.64 m | | Incl. | |
| 173 | Repl | LT Side impact sens from 03/17/2015 | FR3Z14B004A | 1 | 45.64 m | | Incl. | |
| 174 | Repl | RT Side impact sens rear quarter | CK4Z14B345A | 1 | 38.48 m | | Incl. | |
| 175 | Repl | LT Side impact sens rear quarter | CK4Z14B345A | 1 | 38.48 m | | Incl. | |
| 176 | Repl | Control module w/head air bag level 2,3,4,5,6 | CK4Z14B321H | 1 | 528.28 m | | 1.0 M | |
| 177 | Repl | RT Seat belt assy w/o power seat, medium, high roof black | EK4Z14611B08EB | 1 | 172.02 | | 0.3 M | |
| 178 | Repl | LT Seat belt assy w/o power seat, medium, high roof black | EK4Z14611B09FB | 1 | 283.43 | | 0.3 M | |
| 179 | Repl | RT Buckle manual seat | CK4Z1460044D | 1 | 53.73 | | 0.2 M | |
| 180 | Repl | LT Buckle manual seat | CK4Z1461202E | 1 | 70.92 | | 0.2 M | |
| 181 | SEATS & TRACKS | | | | | | | |
| 182 | Repl | Seat back cover cloth, manual seat charcoal | HK4Z9964416KJ | 1 | 428.38 | | 1.0 | |
| 183 | Repl | Seat back cover cloth, manual seat charcoal | HK4Z9964417FK | 1 | 277.68 | | 1.0 | |
| 184 | PILLARS, ROCKER & FLOOR | | | | | | | |
| 185 | Repl | RT Aperture panel w/sliding door high roof | CK4Z61278A96D | 1 | 914.45 | | 18.0 | 3.2 |
| 186 | | Overlap Major Non-Adj. Panel | | | | | | -0.2 |
| 187 | Repl | RT Aperture panel upper bracket | BK3Z16094A | 1 | 16.27 | | 0.2 | 0.2 |
| 188 | Repl | RT Aperture panel lower bracket | BK2Z16C078A | 1 | 5.87 | | 0.2 | 0.2 |
| 189 | FRONT DOOR | | | | | | | |
| 190 | * | Repl RT Wire harness | JK4Z14631F | 1 | 123.83 | | 1.0 M | |
| 191 | Repl | RT Door shell medium, high roof | CK4Z6120124H | 1 | 996.90 | | 5.5 | 3.9 |
| 192 | | Overlap Major Non-Adj. Panel | | | | | | -0.2 |
| 193 | | Add for power units | | | | | 0.4 | |
| 194 | Repl | RT Door shell tape | 3M5Z5823726A | 1 | 6.77 | | | |
| 195 | Repl | RT Door shell bolt | W715006S450B | 1 | 2.50 | | | |
| 196 | Repl | RT Door shell plug | W710178S300 | 1 | 2.50 | | | |
| 197 | Repl | RT Vent | BK3Z61237A04M | 1 | 7.27 | | Incl. | |
| 198 | Repl | RT Side molding | BK3Z6120938AB | 1 | 120.80 | | Incl. | |
| 199 | Repl | RT Wheel opng mldg | BK3Z61278L00AA | 1 | 39.87 | | Incl. | |
| 200 | Repl | RT Mirror assy medium, high roof | CK4Z17682FB | 1 | 710.10 | | Incl. | |

Estimate of Record

Owner: Bell Ambulance

Job Number: 2400989

2017 FORD Transit Van T-350 High Roof 148" WB 9500# GVWR w/Sliding Right Hand Door 3D VAN 6-3.7L Flex Fuel Sequential MPI White

| | | | | | | | |
|-----|--------------------------|---|----------------|---|----------|-------|------|
| | | w/power, w/heat | | | | | |
| 201 | Repl | RT Mirror cover | BK3Z17D742B | 1 | 62.43 | 0.2 | |
| 202 | Repl | RT Mirror filler | CK4Z15214A62AA | 1 | 87.88 | | |
| 203 | Repl | LT Lower cover w/o signal lamp | CK4Z17D743B | 1 | 24.75 | 0.1 | |
| 204 | Repl | RT Lower guide low roof | EK4Z61222A00A | 1 | 23.63 | Incl. | |
| 205 | Repl | RT Handle, outside | CV6Z5422404DA | 1 | 34.55 | Incl. | |
| 206 | Repl | RT Lock assy bolt | W715340S450B | 3 | 7.50 | | |
| 207 | Repl | RT Lock assy power locks | CK4Z61219A64D | 1 | 180.73 | Incl. | |
| 208 | Repl | RT Upper hinge | CK4Z6122800D | 1 | 108.28 | 0.3 | 0.4 |
| 209 | Repl | RT Lower hinge frm 12/02/2015 | CK4Z6122810D | 4 | 353.12 | 0.3 | 0.4 |
| 210 | Repl | RT Upper hinge upper bolt | W703666S439 | 4 | 26.00 | | |
| 211 | Repl | RT Check arm | BK3Z6123500D | 1 | 50.60 | Incl. | |
| 212 | SIDE LOADING DOOR | | | | | | |
| 213 | Repl | RT Door shell w/medium, high roof w/window | CK4Z6124622P | 1 | 1,179.52 | 7.3 | 5.6 |
| 214 | | Overlap Major Non-Adj. Panel | | | | | -0.2 |
| 215 | | Add for trnsfr glass | | | | 0.7 | |
| 216 | Repl | RT Lower molding | BK3Z6125532AC | 1 | 182.12 | Incl. | |
| 217 | Repl | RT Upper track | BK3Z6125006C | 1 | 90.05 | | |
| 218 | Repl | RT Roller assy medium, high roof | KK3Z1525028E | 1 | 127.68 | Incl. | |
| 219 | Repl | RT Center track w/o extended length | BK3Z1525004H | 1 | 287.58 | Incl. | |
| 220 | Repl | RT End cover w/o extended length | BK3Z9925094D | 1 | 13.03 | Incl. | |
| 221 | Repl | RT Roller | BK3Z1525028G | 1 | 122.53 | Incl. | |
| 222 | Repl | RT Roller & bracket | LK4Z1525000A | 1 | 88.78 | Incl. | |
| 223 | Repl | RT Door check | BK2Z1525054A | 1 | 25.25 | Incl. | |
| 224 | Repl | RT Terminal on pillar w/power locks | JK2Z14A658A | 1 | 14.47 | Incl. | |
| 225 | Repl | RT Terminal on door w/power locks | JK2Z14A658B | 1 | 22.91 | Incl. | |
| 226 | Repl | RT Limiter | 1L2Z14018AC | 1 | 58.73 | | |
| 227 | SIDE PANEL | | | | | | |
| 228 | Repl | RT Side panel w/sliding side door, w/o window high roof | BK3Z61279D46D | 1 | 1,179.80 | 22.6 | 4.4 |
| 229 | | Overlap Major Non-Adj. Panel | | | | | -0.2 |
| 230 | | Add for Inside | | | | | 3.8 |
| 231 | Repl | RT Lower panel | KK3Z6110128A | 1 | 80.13 | 6.5 | 1.0 |
| 232 | | Deduct for Overlap | | | | -1.5 | |
| 233 | Repl | RT Rear lower panel | BK3Z6110128B | 1 | 84.10 | 6.5 | 1.0 |
| 234 | Repl | RT Front pillar w/sliding side door high roof | CK4Z6124382C | 1 | 643.83 s | 6.0 | 1.3 |
| 235 | | Overlap Major Non-Adj. Panel | | | | | -0.2 |
| 236 | Repl | RT Outer pillar high roof | BK3Z6141038B | 1 | 239.70 | 9.0 | 2.1 |
| 237 | Repl | RT Corner molding | BK3Z6129396FA | 1 | 6.57 | Incl. | |
| 238 | Repl | RT Side molding | BK3Z6129396BA | 1 | 70.10 | Incl. | |

Estimate of Record

Owner: Bell Ambulance

Job Number: 2400989

2017 FORD Transit Van T-350 High Roof 148" WB 9500# GVWR w/Sliding Right Hand Door 3D VAN 6-3.7L Flex Fuel Sequential MPI White

| | | | | | | | |
|------------------|------|-------------------------------------|---------------------------------|---|------------------|-------|-------------------|
| 239 | Repl | RT Wheel opng mldg | CK4Z61280K96AC | 1 | 129.67 | Incl. | |
| 240 | Repl | RT Inner panel w/o window high roof | CK4Z6127864E | 1 | 485.75 | s | 9.0 1.0 |
| 241 | | Clear Coat | | | | | 2.5 |
| 242 | # | Repl | PreScan | 1 | | | 1.0 M |
| 243 | # | Repl | PostScan | 1 | | | 1.0 M |
| 244 | # | Rpr | Setup & measure | | | | 2.0 F |
| 245 | # | | Frame repair | 1 | | | 10.0 F |
| 246 | # | Rpr | Damage from unibody clamps | | | | 2.0 1.0 |
| 247 | # | Subl | Tire mount & wheel balance | 1 | 35.00 | T | |
| 248 | # | Subl | Tire mount & wheel balance | 1 | 35.00 | T | |
| 249 | # | Repl | Brake fluid | 1 | 25.00 | T | |
| 250 | ** | Repl | A/M Coolant (Extended life/OEM) | 1 | 35.00 | T | |
| 251 | # | Repl | Seam sealer/caulking | 1 | 150.00 | T | 3.5 |
| 252 | # | Repl | Decals/stickers/labels | 1 | 1,500.00 | T | |
| 253 | # | Repl | Self leveling seam sealer | 1 | 75.00 | T | |
| 254 | # | Repl | Panel bond adhesive | 1 | 125.00 | T | |
| 255 | # | Repl | Refridgerant R-134a | 1 | 65.00 | T | |
| 256 | # | | Test AC for freon leaks | 1 | | | 1.0 M |
| 257 | # | Repl | Cavity wax | 1 | | T | |
| 258 | # | Repl | Expansion foam | 1 | 15.00 | T | 0.5 |
| 259 | # | Repl | Weld-through primer | 1 | 22.00 | T | 0.3 |
| 260 | # | | Mask jams/openings | 1 | 5.00 | T | |
| 261 | # | | Cover interior | 1 | 150.00 | T | 2.0 |
| 262 | # | Repl | Protective coatings | 1 | 35.00 | T | 0.2 |
| 263 | # | Repl | Urethane kit | 2 | 250.00 | | |
| 264 | # | Rpr | Reset Electronics | | | | 1.0 M |
| 265 | # | Repl | Cover Car | 1 | 10.00 | T | 0.3 |
| 266 | # | | Color tint / color match | 1 | | | 0.5 |
| 267 | # | Repl | Corrosion protection primer | 1 | | T | 0.3 |
| 268 | # | Repl | Flex additive | 1 | 8.00 | T | |
| 269 | # | Subl | Hazardous waste removal | 1 | 5.00 | T | |
| SUBTOTALS | | | | | 36,759.99 | | 277.3 63.1 |

NOTES

Prior Damage Notes:
Written for all new O.E.M. parts.

Estimate of Record

Owner: Bell Ambulance

Job Number: 2400989

2017 FORD Transit Van T-350 High Roof 148" WB 9500# GVWR w/Sliding Right Hand Door 3D VAN 6-3.7L Flex Fuel Sequential MPI White

ESTIMATE TOTALS

| Category | Basis | Rate | Cost \$ |
|------------------------------|----------------|--------------|------------------|
| Parts | | | 34,464.99 |
| Body Labor | 222.2 hrs @ | \$ 64.00 /hr | 14,220.80 |
| Paint Labor | 63.1 hrs @ | \$ 64.00 /hr | 4,038.40 |
| Mechanical Labor | 43.1 hrs @ | \$ 85.00 /hr | 3,663.50 |
| Frame Labor | 12.0 hrs @ | \$ 75.00 /hr | 900.00 |
| Paint Supplies | | | 700.00 |
| Miscellaneous | | | 2,295.00 |
| Subtotal | | | 60,282.69 |
| Sales Tax | \$ 60,282.69 @ | 5.5000 % | 3,315.55 |
| Total Cost of Repairs | | | 63,598.24 |
| Deductible | | | 0.00 |
| Total Adjustments | | | 0.00 |
| Net Cost of Repairs | | | 63,598.24 |

MyPriceLink Estimate ID / Quote ID:

983725193094504448 / 109525830

This estimate reflects the parts and procedures necessary to restore the vehicle, to the extent possible, to pre-accident condition using ICAR/UPCR standards and Original Equipment (OEM) parts. Owner reserves the right NOT to conduct some or all of these repairs. All supplements must be approved.

Estimate of Record

Owner: Bell Ambulance

Job Number: 2400989

2017 FORD Transit Van T-350 High Roof 148" WB 9500# GVWR w/Sliding Right Hand Door 3D VAN 6-3.7L Flex Fuel Sequential MPI White

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 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 DO2LA79, CCC Data Date 01/03/2022, 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 2022 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: Bell Ambulance

Job Number: 2400989

2017 FORD Transit Van T-350 High Roof 148" WB 9500# GVWR w/Sliding Right Hand Door 3D VAN 6-3.7L Flex Fuel Sequential MPI White

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Estimate calculated using a preset user threshold amount for the paint and material cost.

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Estimate of Record

Owner: Bell Ambulance

Job Number: 2400989

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