



CITY OF MILWAUKEE

2016 MAY 16 P 3:21

CITY CLERK'S OFFICE

RECEIVED

MAY 17 2016

OFFICE OF CITY ATTORNEY

Date : 5/9/16

Attn: City Clerk

RE: Our Insured: Student Transportation of America

Our Claim Number: STA-WI-031616

Date of Loss: 03/16/16

Your Insured: City of Milwaukee

Your Policy/Claim Number: N/A

Dear City Clerk:

We have completed our investigation of this accident and found that your insured was legally responsible for our vehicle's damages.

On March 3rd, 2016 at the intersection of 9th and Hadley in Milwaukee, WI a ROTTED tree fell on top of our school bus that was carrying students. There is extensive damage to the bus and we feel the City of Milwaukee is responsible for this claim. It is the city's job to maintain the trees and this tree as indicated is rotted at the roots and could have caused more severe damage and/or injury. We have repaired our vehicle and paid for the damage and are requesting reimbursement as indicated below. Our supporting documentation is enclosed. We are still waiting for the police report QQCD869 and it is still pending by the police report.

Damages:	\$16,190.36
Subrogation Total:	\$16,190.36

Please make your check payable to:
Student Transportation of America
 Attn: Courtney Bounassi
 3349 Highway 138 Building A Suite C
 Wall, NJ 07719
 P: 732-280-4200 x179
 F: 732-233-7956

Courtney Bounassi
 Subrogation Adjuster

Enclosures:
 Estimate
 Pictures → better pictures can be emailed

OFFICE OF THE CITY CLERK
Milwaukee Wisconsin

INSTRUCTIONS FOR FILING A CLAIM AGAINST THE CITY OF MILWAUKEE

To file a claim against the City a claimant must comply with Section 893.80(1), Wis. Stats., a copy of which is printed on the reverse side of this instruction sheet. Generally the 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

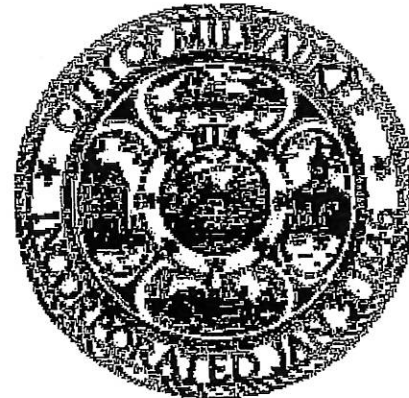
ADDITIONAL INFORMATION

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.





ESTIMATE

6131 N. 84th Street
Milwaukee, WI 53225
(414)358-9980 FAX(414)358-9985

DBI 3850 North Holton MILWAUKEE WI 53212 Business: 963-8770 Business Fax: 963-1910	08 IH #0870 Mileage in: 119251 out: Lic: 4811B/WI Cyl Eng Vin: 4DRBVAAN17A461637 Eq: Fleet # 0870
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Quotes
1 04/01/16 10:54am 16190.36
DBI in person.

Job01 REPAIR ROOF DAMAGE Labor: 124.0 hrs @ \$75.00/hr = \$9,300.00

Item	Description	Qty	Unit	Rate	Total
MISC11	PAINT/MATERIALS-S	24.0	@	40.00 = \$	960.00
MISC13	DRIP RAIL-S	1.0	@	85.99 = \$	85.99
MISC15	DRIP RAIL COVER-S	2.0	@	41.51 = \$	83.02
MISC16	CEILING PANEL-S	3.0	@	1013.51 = \$	3040.53
MISC17	ROOF BOW-S	4.0	@	300.00 = \$	1200.00
MISC18	PANEL-S	3.0	@	381.11 = \$	1143.33
MISC19	INSULATOR-S	3.0	@	25.83 = \$	77.49
					6590.36

R & I RIGHT WINDOWS, RUB RAILS, SIDE PANELS, EXT.
REPLACE 3 INTERMEDIATE ROOF PANELS
REPLACE 4 ROOF BOWS
REPLACE 3 INTERIOR CEILING PANELS
REPLACE 2 RIGHT SIDE HEADER PANELS
REPLACE RIGHT SIDE DRIP RAIL

COVER/MASK FOR OVERPRAY-INSIDE AND OUT
PREP AND PAINT REPAIRS INSIDE AND OUT
BUFF AND BLEND

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Payments to F-S TRUCK & TRAILER REPAIR **Cost Summary**

Status: Estimate

Payments:

Labor	9300.00
Parts	6590.36
Shop Supplies	300.00
Total	\$16190.36
Payments	0.00
Bal Due	16190.36

Thank you for choosing F-S TRUCK & TRAILER REPAIR

