## SERVICE AND PROCESSING OF CLAIMS

Plaintiff or Claimant: Tempo Heating / Elizabeth	Blg
Date: 9/89/17	
In-person	
Process Server	
Claimant	
Other	
☐ By mail	
☐ By email	
☐ By fax	
Received by: Unity Stivka	
Hand deliver to: Ann Marie or Janel	
Forwarded to Attorney's Office by Ann Marie or Janel	
Response from Attorney's Office	
Common Council Agenda: Yes No No	

## CITY OF WEST ALLIS

## NOTICE OF CLAIM

Name: Tempo Heating \$ A/C Incident/Accident Information
Address: 5707-09 W Matisdal Ave Date: July 12, 2017
Wooh Allis WI 53214 Time:
Phone: 414-771-5248 Place: 5707-09 W National Ave
CIRCUMSTANCES OF CLAIM
In the space below briefly describe the circumstances of your claim. (Attach additional sheets, if
necessary). Some helpful information may be the police report, pictures of the incident or damage, a
diagram of the location, a list of injuries, a list of property damage, names and contact information for
witnesses to the incident, and any other information relevant to the circumstances.
Our basement flooded 2-3 feet from water backung up through the
Our bosement flooded 2-3 feet from water backung up through the sewer. Road construction por Joe Birth was the lause of this.
The City's sanitation dopt. pumped out our basement from the
strect.
We use our basement to store a large assortment of heating
and air conditioning parts, supplies, and tools. Being submerged in water or even exposure to excessive humidity causes controls
in water or even exposure to excessive humidity course conducts
andmotals to corrode. We have left the basement "as is "if anyone should need to inspect.
should need to inspect.
Signed:
<b>医多多形成原染剂 医皮肤 医眼球 医眼球 电影 医 医 医 医 医 医 医 医 医 E E E E E E E E E E </b>
CLAIM
NOTE: You are not required to make a claim at this time. As long as you have filed the above
Notice of Claim you may file a claim with the City of West Allis at any time consistent with the
applicable statute of limitations. However, no action will be taken by the City of West Allis to
formally accept or deny your claim until the following information is provided:
The undersigned hereby makes a claim against the City of West Allis of arising out of the circumstances
described above.
The amount sought is: \$ 32,591.00 (Please attach an itemized statement of damages sought
The amount sought is: \$ 32,591.00 (Please attach an itemized statement of damages sought including at least 2 estimates for repairs.)
C C C C C C C C C C C C C C C C C C C
Signed:
Address: 5707 W National Rive
West Alis Wi 53214



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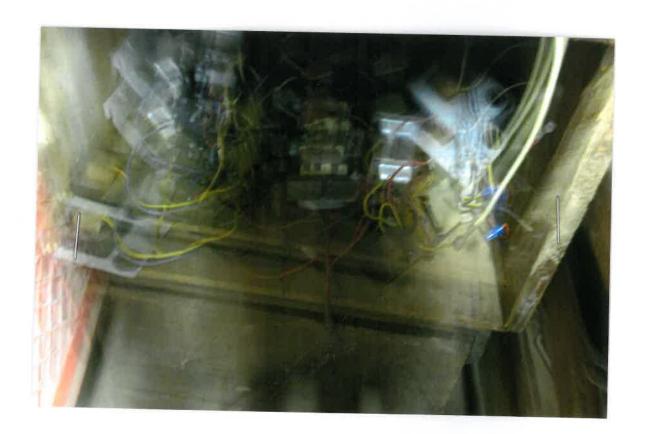
















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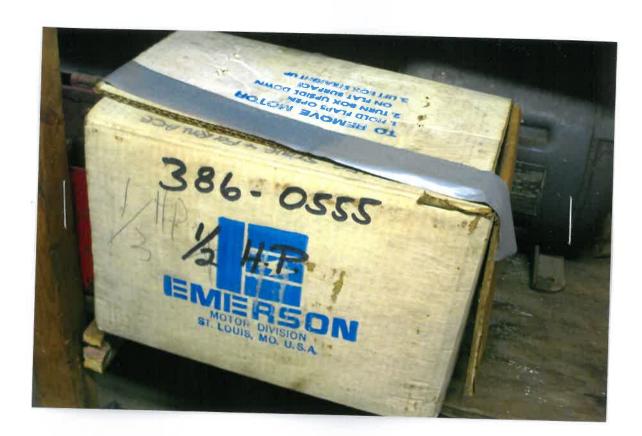












Bearing Assemblies 400 "







1000 av





\$25000





\$2000 00









5000 1





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540 W









































