



City of West Allis Matter Summary

7525 W. Greenfield Ave. West Allis, WI 53214

File Number	Title	Status
2009-0431	Claim	Claim Report
	Donald Wiedmann communication and West Walker Streets on June 5,	regarding vehicle damage allegedly sustained at South 105 2009.
	Introduced: 7/7/2009	Controlling Body: Administration & Finance Committee

COMMITTEE	RECOMM	ENDATION _	PLA	CE ON FI	ÈE		
ACTION	MOVER	SECONDER	D	AYE	NO	PRESENT	EXCUSED
DATE:			Barczak Czaplewski	·			
SEP 0 1 2009		-	Kopplin Lajsic	/			
	X		Narlock	~			
			Reinke Roadt				
			Sengstock				
			Vitale Weigel				
			TOTAL	5			
Chair Chair	OF COMMIT	Vice-0	Chair		- Memb	per	
COMMONICO	DINCH AC	TION	PLAC	E ON FILE			
COMMON CO	OUNCIL AC	TION	PLAC	E ON FILE			
	OUNCIL AC	TIONSECONDER		AYE	NO	PRESENT	EXCUSED
ACTION DATE:			PLAC Barczak Czaplewski			PRESENT	EXCUSED
ACTION DATE:			Barczak Czaplewski Kopplin	AYE		PRESENT	EXCUSED
ACTION DATE:			Barczak Czaplewski Kopplin Lajsic	AYE		PRESENT	EXCUSED
ACTION DATE:			Barczak Czaplewski Kopplin Lajsic Narlock Reinke	AYE		PRESENT	EXCUSED
ACTION			Barczak Czaplewski Kopplin Lajsic Narlock Reinke Roadt	AYE		PRESENT	EXCUSED
ACTION DATE:			Barczak Czaplewski Kopplin Lajsic Narlock Reinke Roadt Sengstock	AYE		PRESENT	EXCUSED
ACTION DATE:			Barczak Czaplewski Kopplin Lajsic Narlock Reinke Roadt	AYE		PRESENT	EXCUSED





OFFICE OF THE CITY ATTORNEY

Scott E. Post City Attorney

Sheryl L Kuhary Jeffrey J. Warchol Jenna R. Merten Assistant City Attorneys

August 10, 2009

Common Council City of West Allis

RE: City Attorney's Report of Claim

Dear Council Members:

The enclosed claim has been referred to this office in accordance with Section 3.05(8) of the Revised Municipal Code. This office has examined the facts of the claim and the applicable law. Our Opinion regarding liability is as follows:

It is the recommendation of this office that the following claim be paid and placed on file:

Donald Wiedmann - Amount \$1,918.12

This is a claim for property damage to the claimant's vehicle on June 5th, 2009, when it was struck by a garbage truck operated by a City employee in the 1000 Block of South 105th Street, West Allis, WI. As a result of the accident, the claimant's passenger side rear door and bumper were damaged. The claimant obtained two estimates for repair and submitted a claim against the City on June 17th, 2009.

Our investigation of this claim indicated that the City employee was primarily at fault for failing to keep a proper look out and have his vehicle under control while moving his vehicle in a forward manner. The claimant tried to carefully maneuver around the refuse truck, which was stopped in the middle of the road to collect garbage when the truck pulled forward striking the claimant's vehicle. An independent witness standing in his yard verified the facts to have occurred as discovered in our investigation and stated by the claimant in his claim. Pursuant to settlement guidelines, the City Attorney's Office settled this claim in the amount stated above and obtained a Property Damage Only Release signed by the claimant.

Based upon the above, it is the recommendation of the City Attorney's Office to place this claim on file.

Respectfully submitted,

Jeffrey J. Warchol Assistant City Attorney

JJW:da

PROPERTY DAMAGE ONLY RELEASE

KNOW ALL MEN BY THESE PRESENTS that DONALD WIEDMANN, for and in consideration of One Thousand Nine Hundred Eighteen and 12/100 Dollars (\$1,918.12) the receipt whereof is hereby acknowledged, do hereby forever release, acquit and discharge the City of West Allis, Wisconsin, a municipal corporation, its departments, commissions, officials, agents and employees, his, her, its or their successors and assigns and all others directly or indirectly liable, from any and all claims and demands, actions and causes of action, damages, both known and unknown, including future developments thereof, costs, loss of service and compensation on account of, or in any way growing out of, any and all known and unknown property damage resulting or to result from an accident on or about June 5th, 2009, in the 1000 block of South 105th Street, when a City garbage truck, after being stopped in the middle of the street, began to move forward and did not see the vehicle being driven by Donald Wiedmann slowing attempting to pass it on the truck's left side resulting in contact between the garbage truck and Mr. Wiedmann's vehicle, causing damage to the passenger side rear door and bumper of Mr. Wiedmann's vehicle.

I agree that this settlement is in full compromise of a doubtful and disputed claim both as to the question of liability and damages and that the payment is not to be construed as an admission of liability.

I agree that this is a complete release of property damage only and it is understood and agreed that it doesn't constitute a release for any bodily injury resultant from this accident as there were no bodily injuries as a result of this accident.

I further agree that this release and payment pursuant thereto is not to be construed as a waiver by or an estoppel of any party released to prosecute a claim or action against the undersigned for any damages sustained.

This Release contains the ENTIRE AGREEMENT between the parties hereto, and the terms of this Release are contractual and not a mere recital.

I HAVE READ THE FOREGOING RELEASE AND FULLY UNDERSTAND IT. I FURTHER UNDERSTAND THAT I HAVE THE OPPORTUNITY TO DISCUSS AND NEGOTIATE THE TERMS OF THIS RELEASE WITH THE WEST ALLIS CITY ATTORNEY AND SPECIFICALLY WAIVE SUCH OPPORTUNITY.

Signed and sealed this 31 day of <u>July</u>, 2009.

Donald Wiedmann

L/Jeff/Claims/Releases/PD Only-





CITY CLERK/TREASURER'S OFFICE

414/302-8200 or 414/302-8207 (Fax)

www.ci.west-allis.wi.us

Paul M. Ziehler

City Admin. Officer, Clerk/Treasurer

Monica Schultz

Assistant City Clerk

Rosemary West

Treasurer's Office Supervisor

June 18, 2009

Mr. Donald E. Wiedmann 1213 S. 90 Street West Allis, WI 53214

Dear Mr. Wiedmann:

This letter acknowledges receipt of your communication regarding vehicle damage allegedly sustained at South 105 and West Walker Streets on June 5, 2009.

The original document will be submitted to the Common Council at its meeting of July 7, 2009.

It is not anticipated that a decision regarding this matter will be made on this date. Generally, all communications are directed to the City Attorney's office for investigation. Common Council action regarding your communication will not be taken until the City Attorney's investigation is completed. Any questions you may have regarding this matter should be directed to their attention.

Sincerely,

Monica Schultz Assistant City Clerk

Munin Shulk

/j1

cc: City Attorney

my Report of my accident on 6-05-09. as the report indicated I was proceeding South and approaching the Sarbage truck . I Showed down to 1-2 miles per hour and Cautionisty drove between a Parked Viehicle on my left and the Harbage truck on my right. O I was not as close to the Sarbage truck as indicated on the Police Photo. I saw his front end turning left but it was too late to prevent the Contact. There was a Vehicle about 50-80 feet in front of the Harlage truch so he had to turn left to clear the Vehicle.
The driver told my wife it was his fault and apolized to her. He also told me

CITY OF WEST ALLIS
CLERVTREASURER

2009 TT NUL

KECEINED

11089

Labourde

not angry as

Was sarry and we then

Accident Report M	IV4000e
-------------------	---------

rcciaent	Kehoir
	4.
ンとつのハフ	

	Reportable Accide	nt	Or	n Emer	gency	A	mended		Docui	ment N	umber	Doc	ument O	verride l	Number
	Agency Accident Number A09060502				Police Number 09024602										
	4 - Accident Date 06/05/2009		5 - Time of Accident (Milita 0910		ilitary Time) 6 - Total Unit		otal Units	7 - Total Injured		8 - Total Killed 00					
	2 - County MILWAUKEE - 40		3 - Municipality WEST ALLIS - 60, CITY			•					and the second of	cident L		4 9 4 4 4	
	14 - On Hwy No. 14 - Or 105Th		eet Name			14 - Bus/Frnt/Rmp		/Rmp	15 - Es 375	15 - Est. Dist Ft/Mi 15 - Hwy 375 F NORT		-			
2 2 2	16 - Fr/At Hwy No. 16 - F		Street Na	ame				' 	16 - Bu	siness/	/Frontage	/Ramp		<u> </u>	
MA	17 - Structure Type 17 HOUSE # 10		ure Num	ber	12 - Lai	titude				13 -	Longitud	e			
7	80 - First Harmful Event MOTOR VEHICLE IN T	RANSF	PORT		I			r of Collis PE. SAN		RECTI	ON				
AL	112 - Access Control NO CONTROL		- Road RAIGH		-	S - Road VEL/FL		Surface CONC		-1					
GENERAL INFORMATION	115 - Traffic Way NOT-PHYSICALLY-DIV	IDED-(2-WAY	TRAF	FIC)										
פ	117 - Relation To Roadway ON-ROADWAY														
	114 - Light Condition DAYLIGHT			116 - Ro DRY	ad Surfac	ce Condit	tion	1 1	- Wea	ther .					
		overni	ment P	roperty		Fire	9 Pho	otos Tak	en	9 T	railer o		d.		
	Truck, Bus, or Haza	rdous	Materi	als	D Lo	ad Spill	age [Con:	struct	tion Z	one	9 N	ames i	Exchan	ged
	101 Supplemental Repo	rts	102 ⊠ W	/itness	Statem	ents	103	easurem	ents '	Taken	- 1	-EMS	Numbe	r	
	Operator/Pedestria		L				1								
<u> </u>		ı													
-	Unit Status							ent: Collisi			23 - SOL	Dir Of T J TH	I	24 - Spe 25	eed Limi
	Unit Status 36 - Operating as Classified B CLASS	•	37 - Er	ndorsen	MC	TOR V	EHICLE	IN TRAI	Ope	RT erating	SOL	JTH ercial		25	
	36 - Operating as Classified		37 - Er	ndorsem	MC	TOR V	EHICLE	IN TRAI	Ope	RT erating	SOL	JTH ercial		25	
	36 - Operating as Classified B CLASS 29 - Driver's License Number B4527705425506 25 - Operator/Pedestrian La BELLING	r st Name		ndorsen	MC nents	State	EHICLE	35 ration Yea	Ope	RT erating	SOL Comm Outy Accid	JTH ercial dent 5 - Midd	Motor	25 Vehicle	
	36 - Operating as Classified B CLASS 29 - Driver's License Number B4527705425506 25 - Operator/Pedestrian La	r st Name		ndorsem	MC nents	State	31 - Expl 2015 rst Name	35 ration Yea	Ope	RT erating	SOL Comm Outy Accid	JTH ercial dent 5 - Midd	Motor	25 Vehicle	
	36 - Operating as Classified B CLASS 29 - Driver's License Number B4527705425506 25 - Operator/Pedestrian La BELLING 32 - Date Of Birth	r st Name 33 M/	- Sex	ndorsem	MC nents	State	31 - Expl 2015 rst Name	35 ration Yea	Ope	RT erating	SOL Comm Outy Accid	JTH ercial dent 5 - Midd	Motor	25 Vehicle 25 - S	
	36 - Operating as Classified B CLASS 29 - Driver's License Numbe B4527705425506 25 - Operator/Pedestrian La BELLING 32 - Date Of Birth 07/15/1954 26 - Address Street & Num	r st Name 33 M/	- Sex	ndorsem	MC nents	State	31 - Expl 2015 rst Name	IN TRAI	Ope ar 34	RT erating 1 - On E	SOU Comm Duty Accid	JTH ercial dent 5 - Middl 26	Motor le Initial - PO Be	25 Vehicle 25 - S	Suffix
	36 - Operating as Classified B CLASS 29 - Driver's License Number B4527705425506 25 - Operator/Pedestrian La BELLING 32 - Date Of Birth 07/15/1954 26 - Address Street & Number 3186 S 112 ST 27 - City	st Name	- Sex ALE		MC nents	State	31 - Expi 2015 rst Name ERT	IN TRAI	Ope Gip Coo	erating	SOU Comm Duty Accid	ercial dent 26 - Middle 28 - Tele 414) 3 ont	Motor le Initial - PO Beephone 21-679	25 - S OX Number 17 EXT.	Suffix
	36 - Operating as Classified B CLASS 29 - Driver's License Number B4527705425506 25 - Operator/Pedestrian Land BELLING 32 - Date Of Birth O7/15/1954 26 - Address Street & Number Ballong Street & Num	st Name 33 M/	- Sex ALE	NGINE 41- NO	MC anents 30 - WI	State 25 - Fi ROBE	31 - Expi 2015 rst Name ERT	State	Opear 340	erating	SOL Comm Duty Accidents 25 J	ercial dent 26 - Middl 26 414) 3 of HICLE-	Motor le Initial - PO Beephone 21-679	25 - S OX Number 17 EXT.	Suffix
	36 - Operating as Classified B CLASS 29 - Driver's License Number B4527705425506 25 - Operator/Pedestrian Lase BELLING 32 - Date Of Birth 07/15/1954 26 - Address Street & Number 186 S 112 ST 27 - City WEST ALLIS 39 - Seat Position FRONT-SEAT-RIGHT-S 38 - Injury Severity	st Name 33 M/	- Sex ALE	NGINE 41- NO	MC anents 30 - WI	State 25 - Fi ROBE	31 - Expi 2015 rst Name ERT	IN TRAI 35 37 37 37 37 38 38 38 38 38 38	Opear 340	erating	SOL Comm Duty Accidents 25 J	ercial dent 26 - Middl 26 414) 3 of HICLE-	Motor le Initial - PO Beephone 21-679	25 - S OX Number 17 EXT.	Suffix
	36 - Operating as Classified B CLASS 29 - Driver's License Number B4527705425506 25 - Operator/Pedestrian Last BELLING 32 - Date Of Birth 07/15/1954 26 - Address Street & Number 186 S 112 ST 27 - City WEST ALLIS 39 - Seat Position FRONT-SEAT-RIGHT-S 38 - Injury Severity N - NO APPARENT INJURY 197 - What Driver Was Doin GOING-STRAIGHT	st Name 333 MJ eer DE-(TI	- Sex ALE RAIN E	NGINE 41 - NO	MC anents 30 - WI EER) Airbag T APPLI an Location 120 - NO-0	State 25 - Fi ROBE	31 - Expi 2015 rst Name ERT 27 - State WI	aration Year 27 - Z 5322 42 - Ejecte NOT-EJI destrian A	Opear 34 Sip Coc. 7 40 NON ed ECTE ction	erating 1 - On E	SOL J Comm Duty Acci 25 J	ercial dent 26 28 - Tele 414) 3 ant HICLE- 44 M	Motor le Initial - PO Be ephone 21-679 DRIVE Medica	25 - S Vehicle 25 - S ox Number 7 EXT. R/OCC I Trans	UPAN'
	36 - Operating as Classified B CLASS 29 - Driver's License Number B4527705425506 25 - Operator/Pedestrian Last BELLING 32 - Date Of Birth 07/15/1954 26 - Address Street & Number Street & Num	T St Name 33 M/ M/ Per DE-(TI JRY - 2nd S	- Sex ALE	NGINE 41 - NO	MC anents 30 - WI EER) Airbag T APPLI an Location 120 - NO-0	State 25 - Fi ROBE	31 - Expi 2015 rst Name ERT 27 - State WI	aration Year 27 - Z 5322 42 - Ejecte NOT-EJI destrian A	Opear 34 Sip Coc. 7 40 NON ed ECTE ction	erating	SOL J Comm Duty Acci 25 J	ercial dent 26 28 - Tele 414) 3 ant HICLE- 44 M	Motor le Initial - PO Be ephone 21-679 DRIVE Medica	25 - S 25 - S ox Number of EXT. R/OCC	UPAN'
	36 - Operating as Classified B CLASS 29 - Driver's License Number B4527705425506 25 - Operator/Pedestrian Last BELLING 32 - Date Of Birth 07/15/1954 26 - Address Street & Number 186 S 112 ST 27 - City WEST ALLIS 39 - Seat Position FRONT-SEAT-RIGHT-S 38 - Injury Severity N - NO APPARENT INJURY 197 - What Driver Was Doin GOING-STRAIGHT	T St Name 33 M/ M/ Per DE-(TI JRY - 2nd S	- Sex ALE RAIN E	NGINE 41 - NO	MC anents 30 - WI EER) Airbag T APPLI an Location 120 - NO-0	State 25 - Fi ROBE	31 - Expi 2015 rst Name ERT 27 - State WI	aration Year 27 - Z 5322 42 - Ejecte NOT-EJI destrian A	Opear 34 Sip Coc. 7 40 NON ed ECTE ction	erating 1 - On E	SOL J Comm Duty Acci 25 J	ercial dent 26 28 - Tele 414) 3 ant HICLE- 44 M	Motor le Initial - PO Be ephone 21-679 DRIVE Medica	25 - S Vehicle 25 - S ox Number 7 EXT. R/OCC I Trans	UPAN'
	36 - Operating as Classified B CLASS 29 - Driver's License Number B4527705425506 25 - Operator/Pedestrian Lase BELLING 32 - Date Of Birth 07/15/1954 26 - Address Street & Number 186 S 112 ST 27 - City WEST ALLIS 39 - Seat Position FRONT-SEAT-RIGHT-S 38 - Injury Severity N - NO APPARENT INJURY Severity N - NO APPARENT INJURY SEVERIT SEAT SEAT SEAT SEAT SEAT SEAT SEAT SEA	Total Name 33 M/ M/ Per DE-(TI JRY - 2nd S	- Sex ALE RAIN E	NGINE 41- NO Pedestri	MC nents 30 - WI EER) Airbag T APPLI an Location NO-(64 - 3rd	State 25 - Fi ROBE CABLE Traffic C CONTR	31 - Expi 2015 rst Name ERT 27 - State WI	aration Year 27 - Z 5322 42 - Ejecte NOT-EJI destrian A	Opear 340-1 NON Section 1 NON	erating 1 - On E	SOL J Comm Duty Acci 25 J	ercial dent 26 28 - Tele 414) 3 ant HICLE- 44 M	Motor le Initial - PO Be ephone 21-679 DRIVE Medica	25 - S Vehicle 25 - S ox Number 7 EXT. R/OCC I Trans	UPAN'





Accident Report	MV4000e	01/200
-----------------	---------	--------

WIEDMANN

33 - Sex MALE

32 - Date Of Birth 03/14/1921

	91 - Drugs	Reported										
		way Factors	RED									
	Vehicle											
	21 - Unit T	уре				ehicle Type		v (Meti	RT TRUCK	`	22	- Total C
	TRUCK 56 - Licens	se Plate Numi	ber /	57 - Plate Typ		State 59	- Exp Ye	ar 55	- Vehicle Ide	entification	Number.	115.14
	55825 50 - Year 2000	51 - Make		MUN 52 - Model	WI	Francisco (Francis	10 Body Styl	Committee of the second	54 - Colo YEL	<u> Городо да развал</u> Г	41 100 - Skidn 0	narks to I
LE 01	94 - Vehic		ÞΕ						1		_	
VEHICLE		t Of Damage	96	Vohiala Tay	wod Duo	To Dame	ngo.	97 - Veh	icle Remove	d By		
	NONE 123 - Vehic	cle Factors	لــا	Vehicle Tov	wed Due	10 Daine	ige	OPERA	TOR			
	İ	e Owner Last				46 - Fi	st Name			46 -	Middle Initia	al 46 -
VEH OWNER	47- Addres 7525 W G	any Name WEST ALL ss Street & Nu BREENFIEL	IS ımber		4	18 - State	47 - F			49 - Tel	ephone Nu	mber
VEH OWNER	CITY OF 47- Addres 7525 W C 48 - City WEST AL	any Name WEST ALL ss Street & Nu GREENFIEL LLIS	IS ımber		4		47 - F	Code		49 - Tel		mber
VEH	CITY OF 47- Addres 7525 W G 48 - City WEST AL Insuranc	any Name WEST ALL ss Street & Nu GREENFIEL LLIS	IS Imber D AVE	-INS-CO	4	18 - State	47 - F	Code	60 Police	49 - Tel (414) 3	ephone Nu	mber EXT.
	CITY OF 47- Addres 7525 W C 48 - City WEST AL Insurance 63 - Liabilit CITIES-& 61 - Policy	any Name WEST ALL ss Street & Nu GREENFIEL LIS Ce ty Insurance Co -VILLAGES Holder Last N	IS Imber D AVE Company S-MUTUAL	-ins-co	4	I8 - State WI	47 - F 48 - Zip 53214	Code	⊠ Polic	49 - Tel (414) 3	ephone Nu 802-8200 i	mber EXT.
01 VEH	CITY OF 47- Addres 7525 W C 48 - City WEST AL Insurance 63 - Liability CITIES-& 61 - Policy	any Name WEST ALL is Street & Nu GREENFIEL LLIS Ce ty Insurance C	IS Imber D AVE Company S-MUTUAL Name	-ins-co	4	I8 - State WI	47 - F 48 - Zip 53214) Code	⊠ Polic	49 - Tel (414) 3	ephone Nu 802-8200 i	mber EXT.
01 VEH	CITY OF 47- Addres 7525 W G 48 - City WEST AL Insuranc 63 - Liabilit CITIES-& 61 - Policy CITY OF School I	any Name WEST ALL ss Street & Nu BREENFIEL LIS Ce ty Insurance Co-VILLAGES Holder Last N Holder Comp WEST ALL Bus	IS Imber ID AVE Company S-MUTUAL Name Dany IS		4	I8 - State WI	47 - F 48 - Zip 53214	o Code	Me Polic	49 - Tel (414) 3	ephone Nu 802-8200 i er Same A	mber EXT.
01 INS 01 VEH	CITY OF 47- Addres 7525 W G 48 - City WEST AL Insuranc 63 - Liabilit CITIES-& 61 - Policy CITY OF School I Bus Travel To	any Name WEST ALL ss Street & Nu BREENFIEL LIS Ce sy Insurance C L-VILLAGES Holder Last N Holder Comp WEST ALL Bus ling to/from	IS Imber ID AVE Company S-MUTUAL Name IS School Na		4	I8 - State WI	47 - F 48 - Zip 53214	o Code	⊠ Polic	49 - Tel (414) 3	ephone Nu 802-8200 i er Same A	mber EXT.
INS 01 VEH	CITY OF 47- Addres 7525 W G 48 - City WEST AL Insuranc 63 - Liabilit CITIES-& 61 - Policy CITY OF School I Bus Travel To G School Dis	any Name WEST ALL ss Street & Nu BREENFIEL LIS Ce ty Insurance C -VILLAGES Holder Last N WEST ALL Bus ling to/from From	IS Imber ID AVE Company S-MUTUAL Name Pany IS School Na		4	I8 - State WI	47 - F 48 - Zip 53214	o Code	Me Polic	49 - Tel (414) 3	ephone Nu 802-8200 i er Same A	mber EXT.
01 INS 01 VEH	CITY OF 47- Addres 7525 W G 48 - City WEST AL Insuranc 63 - Liabilit CITIES-& 61 - Policy CITY OF School I Bus Travel To G School Dis	any Name WEST ALL SS Street & Nu GREENFIEL LIS Ce by Insurance Co-VILLAGES Holder Last N Holder Comp WEST ALL Bus ling to/from From trict Contracte	IS Imber ID AVE Company S-MUTUAL Name Pany IS School Na		81 -	I8 - State WI	47 - F 48 - Zig 53214	er First Na	me Police	49 - Tel (414) 3	ephone Nu 802-8200 i er Same A	mber EXT.
01 INS 01 VEH	CITY OF 47- Addres 7525 W C 48 - City WEST AL Insuranc 63 - Liabilit CITIES-& 61 - Policy CITY OF School I Bus Travel To (School Dis Operato Unit Status	any Name WEST ALL ss Street & Nu GREENFIEL LIS Ce by Insurance Country Insurance C	IS Imber ID AVE Company S-MUTUAL Name Pany IS School Na ed With		81 - MO	8 - State WI 61 - Pc	47 - F 48 - Zig 53214	er First Na B It: Collision N TRANS	me Police	49 - Tel (414) 3 Cy Holde 23 - Di SOUT	ephone Number Same A	mber EXT. As Owner Seating C

Wisconsin Motor Vehicle Accident Report MV4000e 01/2005 PK2007

BRRVBM3

	26 - Addre	ss Street & N	Number								26 - PO I	Зох	
	27 - City WEST AL	_LiS					27 - State WI	27 - 2 532 1	Zip Code 14		- Telephone 14) 453-15		
05	39 - Seat F		-SIDE-(MC	C/BIKE DRIVER, TRAIN COI			DUCTOR	1	40 - Safety E SHOULDE			BELT-USED	
AN	38 - Injury			41 - Airbag NON-DEPLOYED			4	2 - Eject	ed ECTED		44 Medical Transport		
STRI	43 - Trappe	ed/Extricated	92 - Pedestrian Location 92 -			92 - Ped	estrian A	Action					
EDE		Driver Was	Doing	<u> </u>		Traffic C				'	62 - No. of Citations Issued 0		
ORVE	64 - 1st Sta	atute No.	64 - 2nd S	Statute No.	64 - 3r	d Statute	No.	64 -	4th Statute No	D.	64 - 5th St	atute No.	
OPERATOR/PEDESTRIAN	122 - Drive NOT-APF	Factors	L		ı			<u> </u>					
		or Pedestriai		89 - Substance I NEITHER-ALC			RUGS-PF	RESEN	т				
	90 - Alcoho	ol Test OT GIVEN	_l	90	- Alcohol	Content			Drug Test ST-NOT-GIV	EN			
	91 - Drugs	Reported		<u> </u>		- 1							
	Vehicle 21 - Unit Ty AUTOMO	•	per	57 - Plate:Type	P#	State 5	SER-CAR 9 - Exp Ye	ar : 5	5 - Vehicle Ide		2 Number	Fotal Occupants	
	348GAW 50 - Year	51 - Make		AUT 52 - Model	WI		009 Body Style		FAFP52S9V 54 - Color		Carlo Maria	ks to Impact (Ft)	
05	1998 94 - Vehicle	FORD		TAURUS		4D			GRN	0			
VEHICLE			ER SIDE, R	EAR PASSEN	IGER SI	IDE							
VE	95 - Extent MODERA	Of Damage TE	96	Vehicle Tow	97 - Vehicle Removed ed Due To Damage OPERATOR			ј Ву					
	123 - Vehic NOT-APP	ele Factors PLICABLE	•				•						
	Vehicle (Owner											
	45 Vehicle Owner Same As Operator												
~	∀ehic			perator									
R 02	Vehic 46 - Vehicle WIEDMAI	Owner Last		perator		46 - F	irst Name ALD			46 - M	liddle Initial	46 - Suffix	
	Vehic	Owner Last		perator		1	ALD			1	liddle Initial	46 - Suffix	
VEH OWNER 02	Vehic 46 - Vehicle WIEDMAI 46 - Compa	e Owner Last NN any Name s Street & Nu	Name	perator		1				E	liddle Initial		

Wisconsin Motor Vehicle Accident Report MV4000e 01/2005

r Vehicle BRRVBM3

- 2.	-		
DK	-	nſ	١.

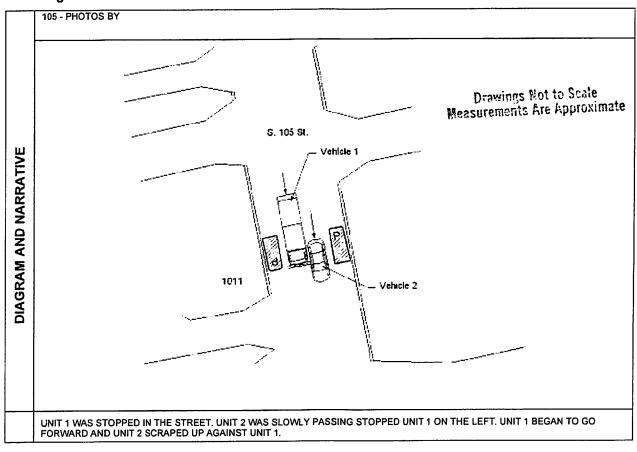
~	63 - Liability Insurance Company AIG-CENTENNIAL-INSURANCE-CO	60 ⊠ Policy Holder Same As Owner				
INS 02	61 - Policy Holder Last Name WIEDMANN	61 - Policy Holder First Na DONALD	ame			
=	61 - Policy Holder Company					
	School Bus		-			
02	Bus Travelling to/from School Name To From	В	Body Make	Seating Capacity		

Occupant

School District Contracted With

dress	Same As Operator							
t No	66 - Occupant Last Name WIEDMANN		66 - First Name 66 - Middle Initial 66 - S MARY R					
dress St			68 - PO Bo	х				
ALLIS			68 - State WI	68 - Zip Code 53214				
te of Birt 1926	h		69 - Sex FEMALE					
		NGINEER)		, , ,		-USED		
•	•	73 - Airbag NON-DEPLOYED			77 Medical T	ransport		
• •		78 - Agency Space						
	Iress St 90 ST ALLIS e of Birt 926 It Position T-SEAT ry Seve APPA	WIEDMANN Iress Street & Number 90 ST ALLIS e of Birth 926 t Position	I NO 66 - Occupant Last Name WIEDMANN Iress Street & Number 90 ST ALLIS e of Birth 926 tt Position T-SEAT-RIGHT-SIDE-(TRAIN ENGINEER) ry Severity APPARENT INJURY Deped/Extricated 78 - Agency Space	1 No	No	I NO 66 - Occupant Last Name WIEDMANN MARY 66 - First Name MARY 68 - PO Box 68 - State 68 - Zip Code 53214 69 - Sex FEMALE 172 - Safety Equipment SHOULDER-BELT-AND-LAP-BELT Proped/Extricated 775 - Ejected NOT-EJECTED 78 - Agency Space		

Diagram and Narrative



BRRVBM3

Page 5 of 5

WITNESS 01	107 - Witness Last Name BUCHMANN	107 - First Name KENNETH	107 - First Name KENNETH			107 - Middle Initial A		
	108 - Address Streeet & Number 8582 S 36 ST	108 - F	PO Box	•	109 - Date of Birth 04/02/1946			
	110 - City FRANKLIN			110 - Zip Code 53132		1 - Telephone Number 14) 828-3045 EXT.		

Officer Information

	125 - Officer Last Name FARRELL		25 - First Name 125 - Middle MCHAEL			e Initial	131 - Officer ID 0158			
NOL	129 - Law Enforcement Agency N 4116		0 - Law Enforcement Age EST ALLIS POLICE I	orcement Agency Name S POLICE DEPARTMENT						
INFORMATION	126 - Law Enforcement Agency A 11301 WEST LINCOLN AVE		Street & Number							
FOF	127 - City WEST ALLIS		127 - State WI		127 - Zip Code 53227		128 - Telephone Number (414) 302-8000 EXT.			
	132 - Date Notified 06/05/2009	133 - T 0914	ime Notified (Military Tim	tary Time) 134 - Time Arrived (Military Time) 135 - Date 0919 06/05/20				Of Report 09		
FFICER	Agency Accident Number A09060502		Number 4602	19 - Special Study						
0	18 - Agency Space					•				

Truck and Bus

	136 A truck or truck combination GVWR/GCWR	on > 10,000 lbs	136 Any vehicle displaying a hazardous materials placard								
	136 A vehicle designed to carry 9 or more people, including the driver										
	136 136 Medical Tra	ansport 136 Towed	1								
	Unit Number										
	137 - Hazardous Materials Class Numbers										
	137 - Hazardous Materials "UN" Nos.	Hazardous Material Place	I Placard Displayed Hazardous Cargo Was Release								
TRUCK/BUS	137 - Name Of Hazardous Materials in	this Load	137 - Name Of Hazardous Materials Released								
UCK	138 140 - US Interstate Carrier	DOT No. 140 - ICC MC N	o. LC No.	C No. 14	141 - Source						
TR	139 - Carrier Name										
	142 - Carrier Address		City	State	Zip Code						
	143 - GVWR (Lbs) 144 - Total No. o	of Axles 145 - Vehicle Confi	onfiguration 147 - Cargo Body Type								
	146 - First Event		146 - Second Event								
	146 - Third Event		146 - Fourth Event								

Accident Investigation

Event #:

09024602

Date of Accident:

06/05/09

Time of Accident:

0910

Location:

1000 Block S. 105 St.

Investigating Officer(s):

MF0158

Assisting Officer(s):

None

Traffic Investigator:

MF0158 TI Michael Farrell

Investigation

Officer Farrell reporting...

Driver Statements:

Unit 1...Robert Belling said he was stopped in the street as they were picking up garbage. He was operating the truck from the right side. He began to pull forward and did not see unit 2 passing him on the left and they made contact.

Unit 2...Donald Wiedmann said he was S/B on 105th Street. The garbage truck was stopped in the middle of the street. Donald tried to pass the truck at about 1 MPH when the truck suddenly began to go and they made contact.

Witness Statements:

Kenneth Buchmann was outside by his truck getting some tools when he saw the accident. He confirms that the garbage truck was stopped and the car was passing it very slowly when the truck pulled forward and they made contact.

WEST ALLIS AUTO BODY 8808 W. NATIONAL AVE.

WEST ALLIS, WISC 53227

PHONE: 414-327-4140 FAX: 414-327-0033

CD LOG NO 3610-1 DATE 06/10/09

SHOP:

INSP DATE: 06/10/09 CITY STATE: , WI CONTACT: GLENN

OWNER:

WIEDMANN, DONALD E.

HOME PHONE: (414) 453-1582

ADDRESS:

1213 S 90TH ST CITY STATE: WEST ALLIS, WI

ZIP:

53214

POINT OF IMPACT: 11

DAYS TO REPAIR: 5

LIC#:

STATE:

VIN:

BODY COLOR: DARK GREEN

MILEAGE:

ACCTNG CTL#:

*=USER-ENTERED VALUE

CONDITION: GOOD

E=REPLACE OEM

NG=REPLACE NAGS UC=RECONDITIONED PRT

EP=REPLACE PXN

EC=REPLACE ECONOMY

UE=REPLACE OE SURPLUS

UM=REMAN/REBUILT PRT

EU=REPLACE SALVAGE

OE=REPLACE PXN OE SRPLS

PC=PXN RECONDITIONED

TE=PARTI REPT DETCE TE=PARTL REPL PRICE

ET=PARTL REPL LABOR

PM=PXN REMAN/REBUILT

I=REPAIR

L=REFINISH

IT=PARTIAL REPAIR

TT=TWO-TONE

CG=CHIPGUARD

BR=BLEND REFINISH SB=SUBLET

N=ADDITIONAL LABOR

RI=R&I ASSEMBLY

P=CHECK

AA=APPEAR ALLOWANCE

RP=RELATED PRIOR

UP=UNRELATED PRIOR

1998 FORD TAURUS SE 4DOOR SEDAN 6CYL GASOLINE 3.0

CODE: P3523F/C OPTNS B/24DO

OPTIONS:

TWO-STAGE - EXTERIOR SURFACES

TWO-STAGE - INTERIOR SURFACES

POWER DOOR LOCKS

CRUISE CONTROL

OP GDE	MC DESCRIPTION		MFG.PART NO.	PRICE	AJ% B%	HOURS R
I 0288	DOOR SHELL, REAR	RT	REPAIR			9.0*1
L 0288	DOOR SHELL, REAR	RT	REFINISH			2.4 4
RI0339	MLDG, REAR DOOR BELT	RT	R&I ASSEMBLY			0.2 1
I 0260	MLDG, REAR DOOR SIDE	RT	REPAIR			0.2*1
RI0260	01 MLDG, REAR DOOR SIDE	RT	R&I ASSEMBLY			0.3 1
L 0260	13 MLDG, REAR DOOR SIDE	RT	REFINISH			1.1 4
RI0306	# HANDLE, RR DOOR OUTE	RT	R&I ASSEMBLY			0.6 1
	# = 01, 02					
I 0390	PANEL, QUARTER	RT	REPAIR			12.0*1
L 0390	PANEL, QUARTER	RT	REFINISH			2.5 4

1998 FORD TAURUS SE 4DOOR SEDAN CD LOG NO 3610-1

L'0397	DOOR, FUEL FILLER RT	REFINISH		0.4 4
RI0534	TAILLAMP ASSEMBLY RT	R&I ASSEMBLY		0.7 1
N 0566	REAR BUMPER COVER R&I	ADDNL LABOR OPERA		1.4 1
ECM14	CORROSION PROTECTION	ECONOMY PART	5.00*	4*
ECM17	COVER CAR EXTERIOR	ECONOMY PART	5.00*	*4*

14 ITEMS

MC MESSAGE(S)

- 01 CALL DEALER FOR EXACT PART NUMBER / PRICE
- 02 PART NO. DISCONTINUED, CALL DEALER FOR EXACT PART NO
- 13 INCLUDES 0.6 HOURS FIRST PANEL TWO-STAGE ALLOWANCE

FINAL CALCULATIONS & ENTRIES					
OTHER PARTS					10.00
PAINT MATERIAL					332.80
PARTS & MATERIAL TOTAL TAX ON PARTS & MATERIAL	a			E COO9	342.80
TAX ON PARTS & MATERIAL	e e			5.600%	19.20
LABOR	RATE	REPLACE	HRS	REPAIR HRS	
1-SHEET METAL	52.00		1.8	22.6	1,268.80
2-MECH/ELEC	65.00				•
3-FRAME	52.00				
4-REFINISH	32.00		6.4		204.80
5-PAINT MATERIAL	52.00				
LABOR TOTAL					1,473.60
TAX ON LABOR		9		5.600%	82.52
SUBLET REPAIRS					
TOWING					
STORAGE					
GROSS TOTAL					1,918.12
					1, 510.12
NET TOTAL					1,918.12

SHOPLINK U5370 ES CD LOG 3610-1 DATE 06/10/09 12:47:05AM R6.37 CD 05/09 PXN: Y/00/00/00/00 CUM 00/00/00/00 GEOCODE 53227 HOST LOG

(C) 1998 - 2008 AUDATEX NORTH AMERICA, INC.

1.6 HRS WERE ADDED TO THIS EST. BASED ON AUDATEX TWO-STAGE REFINISH FORMULA.

^{1.} ALL PARTS PRICES SUBJECT TO CHANGE.

^{2.} ALL WORK GUARANTEED FOR ONE YEAR FROM THE DATE OF COMPLETED REPAIRS

^{3.} PAYMENT IF FULL (INCLUDING DEDUCTIBLE) IS REQUIRED BEFORE THE VEHICLE WILL BE RELEASED.

^{4.} IF INSURANCE COMPANY ESTIMATES YOUR VEHICLE, WE HAVE TO FOLLOW INSURANCE CO. ESTIMATE, HIGHER OR LOWER. OUR ESTIMATE BECOMES NULL & VOID.

^{5.} PLEASE PROCEED WITH REPAIRS, BUT CALL ME BEFORE CONTINUING, IF THE PRICE WILL EXCEED THIS ESTIMATE. I HAVE READ AND UNDERSTAND THE ABOVE

1998 FORD TAURUS CD LOG NO 3610-1	SĘ	4DOOR SEDAN	••••	
STATEMENTS, AND	Ι	AUTHORIZE REPAIRS TO MY VEHICLE.		
*				
NAME:		DATE:		

Date: 6/16/2009.11:45 AM Estimate ID: 65

Estimate ID: `65
Estimate Version: 0
Preliminary
Profile ID: tomk

Estimate Totals

I.	Labor Subtotals Body Refinish	Units 23.4 12.3	Rate 52.00 52.00		or	Sublet Amount 0.00 0.00	Totals 1,216.80 1 639.60 1		Part Replacement Summary Taxable Parts Parts Adjustments Sales Tax	@	5.600%	Amount 509.84 112.50 34.85
		Taxable L	.abor				1,856.40		Sales lax	w.	3.000 /6	04.00
		Lat	or Tax	@	5.600	%	103.96		Total Replacement Parts Am	ount		657.19
	Labor Summary	35.7					1,960.36					
111.	Additional Costs						Amount	IV.	Adjustments			Amount
	Taxable Cost	_					396.60		Customer Responsib	ility		0.00
		Sales Tax		@	5.6	00%	22.21					
	Total Addition	nal Costs					418.81					
								i.	Total Labor:			1,960.36
							•	11. 111.	Total Replacement Part Total Additional Costs:	s:		657.19 418.81
								111.	Gross Total:			3,036.36
								IV.	Total Adjustments:			0.00 3,036.36
									Net Total:			3,030.30

This is a preliminary estimate.

Additional changes to the estimate may be required for the actual repair.





OFFICE OF THE CITY ATTORNEY

Scott E. Post City Attorney

Sheryl L Kuhary Jeffrey J. Warchol Jenna R. Merten Assistant City Attorneys

August 17, 2009

Common Council City of West Allis

RE: City Attorney's Report of Claims/Lawsuits

Dear Council Members:

The enclosed claims/lawsuits have been referred to this office in accordance with Section 3.05(8) of the Revised Municipal Code. This office has examined the facts of each claim/lawsuit and the applicable law. Our Opinion regarding liability is attached to each claim/lawsuit.

The following claims/lawsuits have been paid and placed on file:

Donald Wiedmann (\$1,918.12)

The following claims/lawsuits have been denied:

Lisa Yancey (\$Unknown Amount)
American Family Insurance on Behalf of Lavern D. Plopper (\$4,866.07)
Scott and Sandra Blaha (\$14,000.00)

Respectfully submitted,

Jeffrey J. Warchol

Assistant City Attorney

JJW:da Enclosures

cc: Thomas E. Mann, CVMIC