



CLAIMANT CONTACT INFORMATION

Name: Kate Stehr
Address: 6413 W Mitchell St
West Allis, WI 53214

Phone: 414-397-5486
Email: Katestehr@yahoo.com

INSTRUCTIONS

Complete this form, print and sign it, and serve a hard copy upon the West Allis City Clerk. If you have questions about how to fill out this form, please contact a private attorney who can assist you.

NOTICE OF CLAIM

Date of incident: 2/12/25 Time of day: 8:15pm
Location: 6420 W Mitchell St, West Allis WI, 53214

Describe the circumstances of your claim here. You may attach additional sheets or exhibits. 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.

Two of our cars were towed from the street in front of our house due to the winter storm warning. We were unaware of the storm warning and that we were parked illegally. We did not know Mitchell St. was a fare through and we had to move in the first place. We ~~would~~ think the towing fees are unfair for us to pay, since we genuinely did not know or were notified of these parking procedures, and other cars on our block were let off with just a citation. The total for both cars is \$529.51, and we ask if we may get reimbursed.
Thank you

Check one:

- I am seeking damages at this time (complete Claim Amount section below)
- I am submitting this notice without a claim for damages. This claim is not complete and will not be processed until I submit a claim for damages on a later date.

Signed: VAT GA

Date: 2-13-25

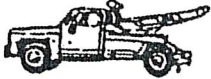
CLAIM AMOUNT

To complete this claim, attach an itemized statement of damages sought. If any damages are for repair to property, include at least 2 estimates for repairs.

The total amount sought is: \$ 529.51

SAVE

PRINT



**"DAMAGE FREE"
TOWING**

N & S TOWING, INC.

1759 So. 83rd Street • West Allis, WI 53214

476-8697 • Fax 476-7828

- 24 HOUR ROAD SERVICE -



FLAT BED SERVICE

TOWED FOR <u>Jeffrey Louis Kriewaldt</u> DATE <u>2/13/25</u>		CASH	<input checked="" type="checkbox"/>
ADDRESS <u>6413 W Mitchell St.</u>	RO#	PO#	CHARGE
FLATBED TOW SERVICE CALL <u>W.A. 53214</u>	MAKE <u>Chevy</u>	YEAR	DRIVER <u>AKB</u>
LICENSE # <u>AWJ 7821</u> STATE <u>WI</u> LOCATION <u>W.A. 275-6400 blk W Mitchell</u>			TRUCK # <u>CS</u>
VIN # <u>V</u>	MILEAGE		
NAME <u>Kate Stehr</u> DL <u>DL-29-00</u> EX: <u>DL-30</u>			
ADDRESS <u>5360-5010; 0729-07</u>	PHONE ()		
DL# <u>K643-4328-92648</u> DOB <u>07/24/89</u>	ADVANCE CHARGES		
ACC#	EXP <u>07/24/30</u>	STORAGE <u>1 1 TO 2/13/25</u>	<u>50 00</u>
I agree to not hold N&S Towing responsible for damages done to my vehicle due to services provided by them unless negligence can be proven and also I agree to pay total amount of invoice according to card issuers agreement and/or N&S Towing's billing policy if credit voucher.		AUTHORIZATION # <u>572259</u>	TAX <u>13 28</u>
		TOTAL	<u>238 28</u>

x [Signature] OWNER/REPRESENTATIVE
 x [Signature] DRIVER
W.A.

1343

N&S TOWING INC
 1759 S 83RD ST
 MILWAUKEE, WI 53214
 414-476-8697

SALE

Store: 0001
 REF#: 00000012
 Batch #: 392 RRN: 504416833401
 02/13/25 10:21:43
 Trans ID: 465044589031169
 APPR CODE: 572259
 VISA Chip
 *****8719 ***

AMOUNT \$238.28

APPROVED

VISA DEBIT
 AID: A0000000031010
 TVR: 80 80 00 80 00
 TSI: 68 00

THANK YOU!

CUSTOMER COPY



**"DAMAGE FREE"
TOWING**

N & S TOWING, INC.

1759 So. 83rd Street • West Allis, WI 53214
476-8697 • Fax 476-7828
- 24 HOUR ROAD SERVICE -

PAID
\$102.23



FLAT BED SERVICE

TOWED FOR Kate Anastasia Stehr		DATE 2/13/25	CASH	<input checked="" type="checkbox"/>
ADDRESS 6413 W Mitchell St		RO#	CHARGE	
FLATBED TOW SERVICE CALL W.A. 53214		MAKE VW	DRIVER	off
LICENCE # ATK-1648 STATE WI LOCATION W.A. 268-6400 blk Mitchell		YEAR 05	TRUCK #	JG
VIN # WUWCJL63855E134207 MILEAGE				
NAME				
ADDRESS		PHONE () -		
DL# S3160-5010-0729-07 DOB 06/29/00	ADVANCE CHARGES			
ACC#	EXP: 06/29/30	STORAGE 2/12/25 TO 2/13/25	100	00
I agree to not hold N&S Towing responsible for damages done to my vehicle due to services provided by them unless negligence can be proven and also I agree to pay total amount of invoice according to card issuers agreement and/or N&S Towing's billing policy if credit voucher.		AUTHORIZATION # 660 571440	TAX	16 23
		TOTAL	291	23

[Signature]

X

OWNER/ REPRESENTATIVE

DRIVER

1341

N&S TOWING INC
1759 S 83RD ST
MILWAUKEE, WI 53214
414-476-8697

SALE

Store: 0001

REF#: 00000011

Batch #: 392 RRN: 504416670641

02/13/25 10:18:23

Trans ID: 585044587036628

APPR CODE: 571440

VISA Chip

*****8719 **/**

AMOUNT \$291.23

APPROVED

VISA DEBIT
AID: A0000000031010
TVR: 80 80 00 80 00
TSI: 68 00

THANK YOU!

CUSTOMER COPY

PLATE NUMBER		PARKING CITATION			WEST ALLIS, WISCONSIN		No. 2115927	
ANS 7821		EXP	STATE	MAKE & COLOR	CASH DEPOSIT			
		126	WI	Chevrolet gray	\$ 40.00			
VIN/MISC					DATE			
LOCATION					2 12 25			
OFFICER'S SIGNATURE					EMPL #	TIME	AM	
Kumar Kunk					9906	814	PM	
					CALL #	25005126		
VIOLATION DESCRIPTION/ORDINANCE NUMBER								
<input type="checkbox"/> ALLEY PARKING OTHER - 10.10(2) <input type="checkbox"/> ALLEY PARKING BUSINESS DISTRICT - 346.53(2) <input type="checkbox"/> CROSS WALK - CLOSER THAN 15' <input type="checkbox"/> DISABLED PERSON ZONE <input type="checkbox"/> ENTRANCE ALLEY OR DRIVE CLOSER THAN 4' <input type="checkbox"/> FIRE HYDRANT CLOSER THAN 10' <input type="checkbox"/> LOADING OR BUS ZONE <input type="checkbox"/> MORE THAN 12" FROM CURB OR LESS THAN 2' FROM OTHER VEHICLE <input type="checkbox"/> MUNICIPAL LOT - 10.14(10) <input type="checkbox"/> FARMERS MKT - 10.13(3) <input type="checkbox"/> LIBRARY - 10.13(4) <input type="checkbox"/> NIGHT PARKING <input type="checkbox"/> NO PERMIT <input type="checkbox"/> WRONG SIDE <input type="checkbox"/> SUCCESSIVE NIGHTS <input type="checkbox"/> OVERTIME PARKING <input type="checkbox"/> PROHIBITED PARKING BY OFFICIAL SIGN <input type="checkbox"/> PROHIBITED PARKING BY TEMPORARY SIGN <input type="checkbox"/> SIDEWALK PARKING <input type="checkbox"/> TRESPASS PARKING <input type="checkbox"/> OTHER: Snow emergency 10.11								
					346.53(5)	10.065(7)(d) (e) (f)		
					346.53(4)	346.53(3)		
					346.53(1)	346.54(1)(d)		
					10.105	10.10(1)		
					10.10(3)	10.10(2)		
					10.108			

PLATE NUMBER		PARKING CITATION			WEST ALLIS, WISCONSIN		No. 2112250	
ATK 1648		EXP	STATE	MAKE & COLOR	CASH DEPOSIT			
		125	WI	Volkswagen Silver	\$ 40.00			
VIN/MISC					DATE			
LOCATION					2 12 25			
OFFICER'S SIGNATURE					EMPL #	TIME	AM	
Kumar Kunk					9906	810	PM	
					CALL #	25-005126		
VIOLATION DESCRIPTION/ORDINANCE NUMBER								
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