



CLAIMANT CONTACT INFORMATION

Name: Brian Lynch
Address: 2048 S 70th St
West Allis WI 53219

Phone: 414-628-5972
Email: BRIANLYNCH6@GMAIL.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: 1/04/2022 Time of day: 1:12 AM
Location: 2048 S 70th St, West Allis, WI, 53219

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.

DURING THE JAN. 4TH SNOW EMERGENCY MY CAR WAS TOWED FROM BEING PARKED ON THE WRONG SIDE OF THE STREET. WHEN THE CAR WAS TICKETED IT WAS ON THE CORRECT SIDE. WHEN THE CAR WAS TOWED IT WAS ON THE CORRECT SIDE. THE POLICE THOUGHT MY CAR WAS ABANDONED B/C IT WAS COVERED IN SNOW. IT WAS COVERED IN SNOW B/C ~~THE~~ I HAD COULD THIS WEEK IS ONLY LEFT TO MOVE MY CAR, AND WOULD JUST CLEAR THE INDENTIONS ENOUGH TO SEE. (BACK)

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: [Signature]

Date: 5/2/22

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: \$ 94.95

SAVE

PRINT

CITY OF WEST ALLIS
3 MAY '22 PM2:39

IT WAS DIFFICULT TO FIGURE OUT WHO TO SPEAK TO BUT I
WAS TOLD BY SOMEONE AT CITY HALL THAT IF MY CAR
WAS WEIGHED OFF FROM SNOW, IT LIKELY WOULD
NOT HAVE BEEN TOWED. LIKEWISE, AN OFFICER
SAID IT SOUNDED LIKE A MISTAKE WAS MADE.

I AM SEEKING DAMAGES FOR TOWING IN THE AMOUNT
OF \$99.95. IT IS WORTH NOTING THAT I ~~HAD~~
PICKED UP MY CAR AS SOON AS I COULD, SO THIS
IS THE MINIMUM AMOUNT OF DAMAGES I COULD
ASK FOR IN THIS CASE.

ADDITIONAL DOCUMENTATION IS ATTACHED.

You are Notified to Pay or Appear

Appearance Required: **NO** Date: **MAR-07-2022** Time: **08:30 AM**

WEST ALLIS CITY MUNICIPAL COURT
11301 W LINCOLN AVE
WEST ALLIS, WI 53227
(414) 302-8181 WWW.WESTALLISWI.GOV

Form No. and Version CT CITATION NO.
MUNI 0405 **1S8051TK8S**
Juvenile DEPOSIT Cash- Card
\$250.00 N N
Court Use: DA N

Defendant (Last Name, First, Middle), Street Address, P.O. Box, City, State, Zip

LYNCH, BRIAN JAMES

2048 S 70TH ST
MILWAUKEE WI 53219

Birth Date Sex Race
6/14/1993 **M** **W**
HT WT Hair Eyes
510 **180 LBS** **BROWN** **HAZEL**

Driver License/Identification Card Number State Exp. Yr.
L520-0709-3214-05 **WI** **2028**

Other Identification Number ID Type

License Plate Number Plate Type State Exp. Yr.
907YXT **AUT** **WI** **2022**

Vehicle Identification Number Telephone Number
3FAFP37313R110704

Name and Address of Parent/Guardian/Legal Custodian
(If minor defendant)

Telephone Number of Parent/Guardian/Legal Custodian

Plaintiff

CITY OF WEST ALLIS

Violation Description

Ordinance Violated

WA-6.015(2)

Adopting State Statute

[Empty Box]

Agency Space

22-000395

Ordinance Description

ABANDONED VEHICLE (PUBLIC NUISANCE)

Week Day Date Time
TUESDAY 01/04/2022 **01:12 AM**

From/AT Hwy No. and/or Street Name
ON S 70TH ST 287 FT N OF W BECHER ST

County City/Village/Town
MILWAUKEE - 40 **WEST ALLIS - 60, CITY**

Officer Name
OFFICER M. OTTO

Date Citation Served, Method
01/05/2022 **MAILED**

Residence Contact Name Age

Officer ID Department
9829 **WEST ALLIS POLICE DEPARTMENT**

(If left with person at defendant's address)

INSTRUCTIONS - READ CAREFULLY

MANDATORY APPEARANCE? If your citation is marked as a mandatory court appearance, you **MUST** appear in court. The appearance not mandatory instructions do not apply to you.

APPEARANCE NOT MANDATORY?

IF YOU WISH TO DISPUTE THE CITATION, you must either appear in court or enter a not guilty plea by mail prior to your court date. You may do so even if you have already paid the deposit or posted a bond. Please include either:

- a photocopy of your citation, OR
- your correct name and mailing address, citation number, court appearance date listed on the citation, offense, and arresting police agency.

These should be mailed to the court address written under **YOU ARE NOTIFIED TO APPEAR**. The court will schedule another court date and/or a trial before a judge without a jury.

IF YOU DO NOT WISH TO DISPUTE THE CITATION, simply mail in the deposit amount on the citation by the court date, with a statement saying you do not wish to contest the citation. Please include either:

- a photocopy of your citation, OR
- your correct name and mailing address, citation number, court appearance date listed on the citation, offense, and arresting police agency.

Make check payable to the clerk of court and mail it to the court address written under **YOU ARE NOTIFIED TO APPEAR**. You do not need to appear. The court will either:

- accept your nonappearance as a plea of no contest, find you guilty and keep the deposit amount as payment for your citation; OR
- decline to accept the deposit and order you to appear in court by summons or warrant.

IF YOU DO NOTHING, the court may either:

- issue a warrant for your arrest, OR
- issue a summons for you to appear in court, OR
- find you guilty for failing to appear in court and order you to pay the forfeiture and costs imposed by the court.

**WISCONSIN NON TRAFFIC
CITATION AND COMPLAINT**

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OFFICER M. OTTO

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**"DAMAGE FREE"
TOWING**

N & S TOWING, INC.

1719 So. 83rd Street • West Allis, WI 53214

476-8697 • Fax 476-7828

- 24 HOUR ROAD SERVICE -



FLAT BED SERVICE

TOWED FOR Brian James Lynch		DATE 1, 4, 22	CASH	
ADDRESS 811 G. Linus St. Lower		RO# 53207	CHARGE	
FLATBED <input checked="" type="checkbox"/> TOW SERVICE CALL		MAKE Ford Focus YEAR	DRIVER	Off
LICENSE # 907-YXT STATE WI	LOCATION WA 3548 - 2049 S. 70th St.		TRUCK #	C.S.
VIN #	MILEAGE			
NAME				
ADDRESS		PHONE () -		
DL# LS20-0709-3214-05	DOB 10/14/93	ADVANCE CHARGES		
ACC#	EXP: 06/14/28	STORAGE 1 1 TO 14 22		25.00
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 # 004624	TAX	4.95
			TOTAL	94.95

48024

[Signature]
OWNER/ REPRESENTATIVE

DRIVER

N&S Towing Inc
1719 S 83rd St
MILWAUKEE, WI 53214
414-476-8697
39300981856080

SALE

MID: 6080 Store: 0001 Term: 0002
REF#: 00000014
Batch #: 002 RRN: 200420414304
01/04/22 14:57:16
Trans ID: 582004754366599
APPR CODE: 004624
VISA
*****6264 Chip
/

AMOUNT \$94.95

APPROVED

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

THANK YOU!
CUSTOMER COPY