## **CLAIMANT CONTACT INFORMATION**



Name: Address:	Brett Finke 2159 S 66th St. West Allis, WI 53219	Phone: (414)429-0588 Email: Brettrfinke@gmail.com			
	e this form, print and sign it, and se questions about how to fill out thi	RUCTIONS erve a hard copy upon the West Allis City Clerk. If s form, please contact a private attorney who can			
	NOTIC	CE OF CLAIM			
	ncident: 01/23/2024 Just before the intersection of Beloit Ro	Time of day: <u>06:45am</u> I. and 76th St.			
Some he diagram	elpful information may be the poli of the location, a list of injuries, on for witnesses to the incider	ere. You may attach additional sheets or exhibits. ce report, pictures of the incident or damage, a a list of property damage, names and contact at, and any other information relevant to the			
I was headi intersection before. The missing roa on my front	ng South on Beloit towards 76th St. and str of BeloitRd and 76th St. This location was re were no signs or barricades indicating th d I got an immediate blowout of my front rig left tire rendering my vehicle immobile. The	where they were doing some road construction the day/night ere was a giant piece of road missing. Upon impact of the ht tire as well as rim damage. It also caused me to get a flat ere were multiple cars pulled over on the side of the road just . I have attached pictures and quotes of the damage to my			
Damage ca - 2 flat tires - 1 bent rim	used: (causing it to be not functional)	*			
<u> </u>   I а	am seeking damages at this time (co am submitting this notice without a c Il not be processed until I submit a c	omplete Claim Amount section below) laim for damages. This claim is not complete and claim for damages on a later date.  Date:			
for repair	ete this claim, attach an itemized sta to property, include at least 2 estim	M AMOUNT atement of damages sought. If any damages are ates for repairs.			
The total amount sought is: \$ _ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					

SAVE CITY OF WEST ALLIS 2 FEB '24 PM**4:03** 

PRINT

## Affordable Car Care

12465 W Lisbon Rd Brookfield, WI 53005-1820 Tel: 262-781-2060 acc49764@gmail.com

Estimate Q001166 Service Advisor: TIM Date: 01-31-2024 08:44 AM

Brett Finke (FIN001) 2159 S 56th St Milwaukee WI 53219					Cell: 21	8-298-4523
<b>2021 Mazda 6 Touring</b> 2.5 GAS JM1GL1VM1M1605152 FW6A-EL		License Plate: ARK-6109 WI			Miles In Miles Out	
WORK TO BE PERFORMED						
Labor						
<b>Labor</b> MOUNT AND BALANCE 2 TIRES		Tech	Hrs 1.00	Price 70.00		Total 70.00
Parts 225/45R19 CONTINENTAL EXTREMECONTACT DWS06 TIRE DISPOSAL RIM 19 INCH OEM		Part No AAA15572780000 AAA00 AAA040220000	Qty 2.00 2.00 1.00	Price 233.63 6.00 625.00		Total 467.26 12.00 625.00
SubTotal: Labor						\$1,174.26
Estimate Total					Labor Parts Hazmat* Supplies* Taxes	70.00 1,104.26 0.00 33.13 60.37 <b>1,267.76</b>
' Shop Supply & Hazmat Fees: This charge represents costs and profits (where applicable	e) to this repair facility for	miscellaneous shop supplies, and/or was	te removal		Ψ	1,207.70
AUTHORIZATION	,	, , , , , , , , , , , , , , , , , , , ,				
Date/Time:			Origin	al Estimate	e Total:	
Authorization Method: Email Text  Contact Details:		Phone	In Person Fax		Fax	
X Customer Signature		Authorized By (Please Print)				
Save replacement parts for inspection or return? (Core may	apply)		Yes		No	
ntended Method of Payment:	Che	ck Credit card	Cas	:h	Other	
All Quotes / Estimates valid for 30 days						

## Goodyear

### **Auto Service Centers 6840** 10757 W National Ave

Operator: Marshall Grams

Invoice 0000038225 01/26/2024

**Customer Info:** Brett Finke 2159 s 56th st

MILWAUKEE, WI, 53219 Primary Ph: 218-298-4523 Customer #: 6840003217

West Allis, WI 53227-3215 414-541-7910 Federal Tax Id 340253240

Vehicle Info:

Year: 2021 Make: MAZDA Model: 6 Series

Color:

License/State: ARK6109 / WI VIN: JM1GL1VM1M1605152

Odom I/O: 51601/51601 Vehicle In: 01/23 09:18 AM Vehicle Out: 01/26 03:06 PM

PRODUCT	DESCRIPTION	QTY	PART	LABOR	TOTAL
160115025	225/45ZR19 XL 96W COBRA INSTINCT (1, 2) 1pj82kr1r2823	2.00	191.99	0.00	383.98
044555000	TIRE INSTALLATION PACKAGE W/TPMS	2.00	12.00	18.00	60.00
	INCLUDES: MOUNTING & INSTALLATION, LIFETIME ELIFETIME ROTATIONS, TPMS REBUILD KIT, & FREE ACHECK.	BALANCE, ALIGNMENT	Ž,	N	
22201	413 VALVE	1.00			
071000000	SCRAP TIRE DISPOSAL AUTO	2.00	5.25	0.00	10.50
078000000	CHECK VEHICLE FOR ALIGNMENT	1.00	0.00	0.00	0.00
040220000	AUTO WHEELS	1.00	593.00	0.00	593.00
BW65015	AUTO WHEELS	1.00			
Signature:	Parts Total* Labor Total	1,011.48 36.00	State Tire Fee Sub Total Taxable Amo Sales Tax (5.	unt	0.00 1,047.48 1,047.48 61.80
Cash:	Check: Credit: 1109.28 Debit:	AR:	Corp Ref:		
		Vis	sa - Amount R	emitted	1109.28

**Total Deposits on Order** 

0.00

**Invoice Total** 1,109.28

**Technician** Salesperson Services 040220000, 044555000, 071000000, 078000000, Marshall Grams Lance Scales 160115025

Richard Wetzel

# Goodyear

#### **Auto Service Centers 6840**

Invoice 0000038225 01/26/2024

10757 W National Ave West Allis, WI 53227-3215 414-541-7910 Federal Tax Id 340253240

Centers 6840 Operator: Marshall Grams

MOTOR VEHICLE REPAIR PRACTICES ARE REGULATED BY CHAPTER ATCP 132, WIS, ADM CODE, ADMINISTERED BY THE BUREAU OF CONSUMER PROTECTION, WISCONSIN DEPT. OF AGRICULTURE, TRADE AND CONSUMER PROTECTION, P.O.BOX 8911, MADISON, WISCONSIN 53708-8911.

TECHNICIAN(S) / SUBCONTRACTOR(S	3)
	/

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- \*\* ALL PARTS ARE NEW UNLESS OTHERWISE SPECIFIED. \*\*
- SEE REVERSE SIDE FOR IMPORTANT SAFETY WARNING AND WARRANTY INFORMATION

MERCHANT#

000906840

PAYMENT VALUE:

\$1,109.28

TVR

000000000

TSI

AID#:

A000000031010

APPL LABEL:

VISA CREDIT

DATA SOURCE:

Proximity

But Jul

CARD#:

Visa \*\*\*\*\*6306

Signature:

Tread Depth L/F

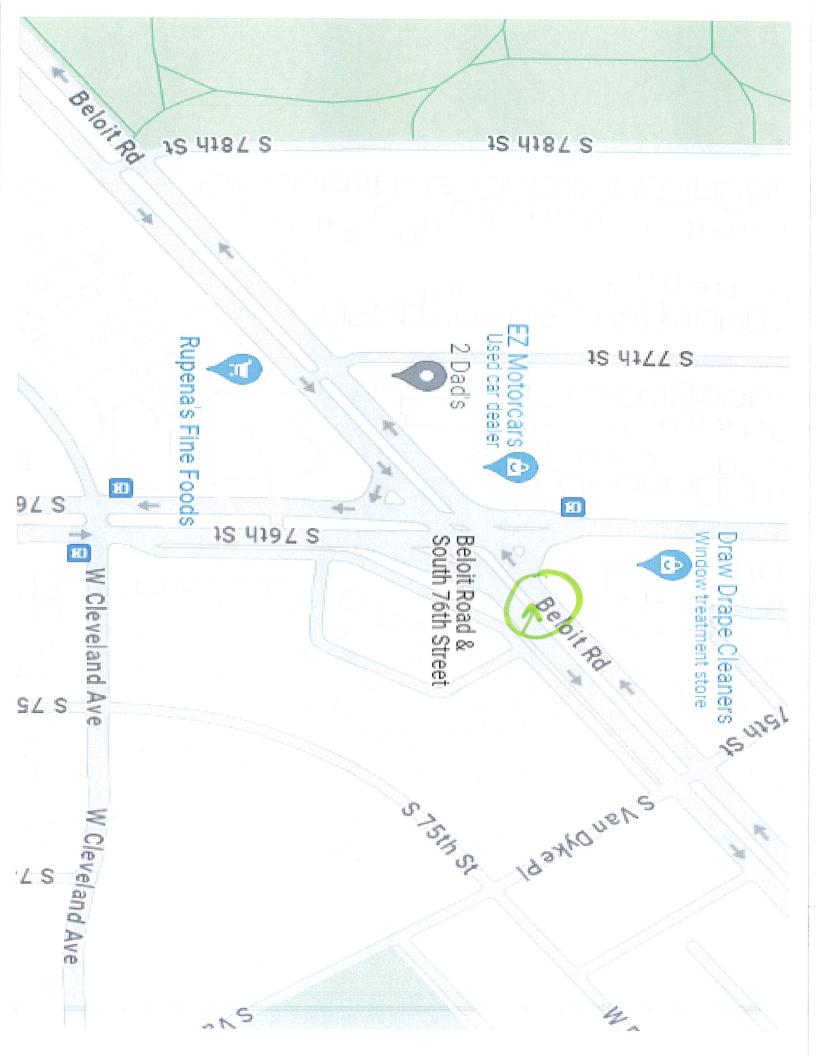
4/32

R/F 10/32

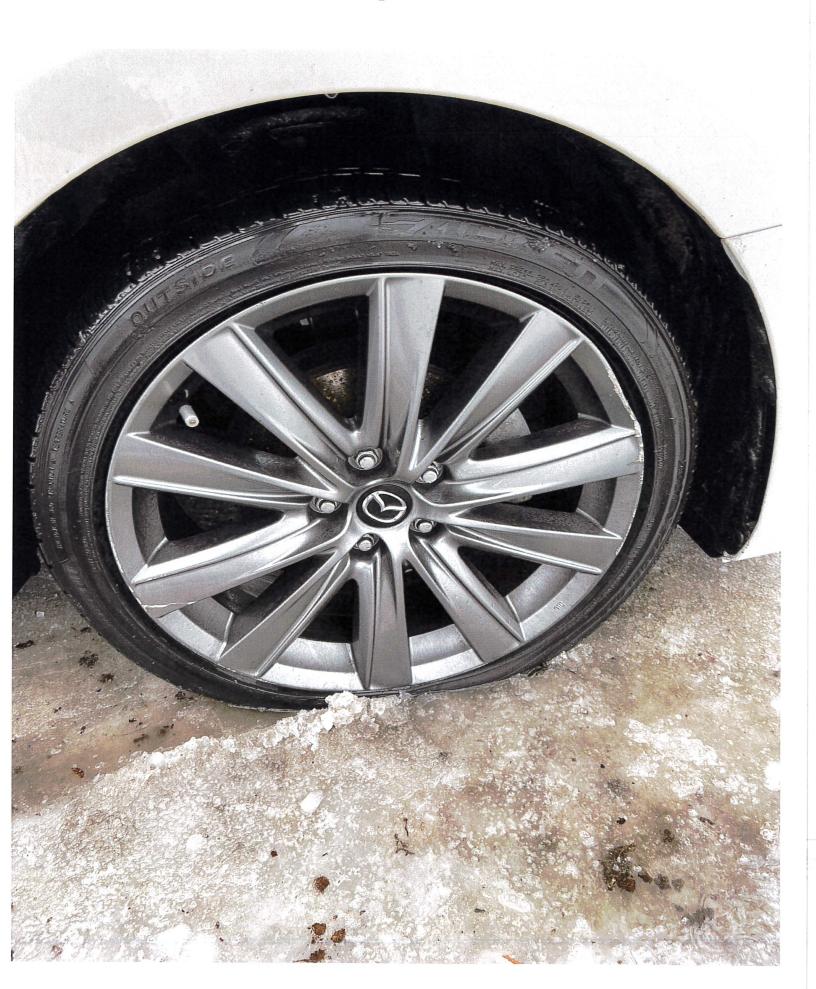
Tread Depth L/R

7/32

R/R 7/32



Tire was completely blown out on impact.



Rim was bent and failed to hold air of new replacement tire. Rim had to be replaced.

