CLAIMANT CONTACT INFORMATION



CITY OF WEST ALLIS

Name: GLENN CZERWINSKI Address: 1033 S. 89TH ST WEST ALLIS Phone: 414.739.1868 Email: gczerwinsk; @ymail.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: 5/30/24 Time of day: 1:30 pm Location: 1033 S:89 Th ST WEST ALUS
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.
ON 5/30/24 AT APPROXIMATELY 1:30 PM I WAS
MOWING THE LAWN WHEN THE LAWNMOWER BLADE STRUCK THE
STUMP OF AN OLD TRAFFIC SIGN. THE STUMP' IS A METAL
REMNANT OF A PREVIOUS SIGN, LOCATED ABOUT A FOOT IN
FRONT OF THE CURRENT YIELD SIGN. THE CURRENT SIGN AND
THE STUMP ARE SITUATED ON MY PROPERTY.
IN THE 16 YEARS WE HAVE LIVED HERE, WE HAVE
NOT ENCOUNTERED THIS ISSUE. I SUSPECT THE GROUND SLOWLY SHIFTED, A CITY CREW CAME AND REDUCED THE
Stump FURTHER, HOWEVER MY LAWNMOWER BLADE WAS
TWISTED AND UNUSABLE. I HAD TO PURCHASE A NEW
BLADE THAT AFTERNOON (RECEIPT INCLUDED).
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: Glem Gerwinskin Date: 6.21.24
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: \$ 31,43
JUL 1 2024
SAVE PRINT



11071 WEST NATIONAL WEST ALLIS, WI 53227 (414)329-1366

4902 00061 55212 SALE SELF CHECKOUT 05/30.'24 02:01 PM

844547016519 21" MTD BL <A> 21" PC BLD CUB TB MULCH

29.68

SUBTOTAL SALES TAX 29.68 1.75 \$31.43

USD\$ 31.43

AUTH CODE 002321 Chip Read AID A00000000042203

Verified By PIN Associated Debit

4902 05/30/24 02:01 PM



RETURN POLICY DEFINITIONS
POLICY ID DAYS POLICY EXPIRES ON
A 1 90 08/28/2024

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