



OFFICE OF THE CITY ATTORNEY

Scott E. Post
City Attorney

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

July 16, 2008

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 (6)(a) 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 placed on file:

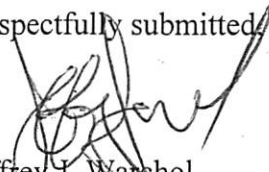
TrustSolutions, LLC/Mary Neustaedter (\$4,822.48)

CEI Services as Subrogees of GE Fleet Services/
Mary Kay Cosmetics/Sandra Hoeft (\$2,766.51)

The following claims/lawsuits have been denied:

Thomas Poppe (\$205.92)
Walters Wrecking Inc. (\$4,085.70)
Tracy Laverdure (\$2,354.00)

Respectfully submitted,


Jeffrey J. Warchol
Assistant City Attorney

JJW:da
Enclosures

cc: Thomas E. Mann, CVMIC



July 1, 2008

Common Council
City of West Allis

OFFICE OF THE CITY ATTORNEY

Scott E. Post
City Attorney

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

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 (6)(a) 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 placed on file:

**CEI Services as Subrogees of GE Fleet Services/Mary Kay Cosmetics/Sandra Hoefl –
Amount \$ 2,766.51**

This is a claim by the claimant's insurance company for property damage to the claimant's vehicle on February 10th, 2008, when it was struck by a City of West Allis snowplow at South 119th Street and West Oklahoma Avenue in the City of West Allis. While snowplowing the street, the operator of the plow backed up to clear snow next to the curb area and struck the vehicle owned by the claimant's insured while it was standing still causing damage to the front of said vehicle. The insurance company obtained an estimate for repairs, had the vehicle repaired and filed a claim against the City on April 3rd, 2008, including towing fees, as well as, the cost of a rental vehicle.

Our investigation into this claim indicated that although the operator of the snowplow had its emergency lights activated, he was still primarily negligent for not keeping a proper lookout while backing up his vehicle. The claimant's insured was standing still when hit and not attempting any kind of maneuver to get around the snowplow, etc. The claimant's insured still bears some negligence in this matter but not as much as the snowplow operator given the facts and circumstances of this specific case. Pursuant to settlement guidelines, the City Attorney's Office paid this claim in the amount stated above and obtained a Property Damage Only Release signed by the claimant.

Based upon the above, this claim should be placed on file.

Respectfully submitted,


Jeffrey J. Warchol
Assistant City Attorney

JJW:da

696563

PROPERTY DAMAGE ONLY RELEASE

KNOW ALL MEN BY THESE PRESENTS that CEI SERVICES AS SUBROGEEES OF GE FLEET SERVICES, a proper and legal subrogee in this matter, on behalf of Sandra Hoeft, its insured, for and in consideration of Two Thousand Seven Hundred Sixty-six and 51/100 Dollars (\$2,766.51) 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 that certain accident on or about February 10th, 2008, at the intersection located at West Oklahoma Avenue and South 119th Street, West Allis, Wisconsin, when the City operator of a West Allis snowplow, while plowing the streets, backed up to clear snow and struck the vehicle behind it being driven by Ms. Hoeft, causing property damage to the front of Ms. Hoeft's vehicle.

We 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.

We 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.

We 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.

WE HAVE READ THE FOREGOING RELEASE AND FULLY UNDERSTAND IT. WE FURTHER UNDERSTAND THAT WE 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 15th day of June, 2008.

Christina Althoff
CEI SERVICES AS SUBROGEEES OF
GE FLEET SERVICES
Subrogated Party on Behalf of Sandra Hoeft

Subscribed and sworn to before me
this 15 day of June, 2008.

Stu Shultz
()
Notary Public, State of PA
My Commission: Dec 8th 2008

RECEIVED
JUL 19 2008
WEST ALLIS
CITY ATTORNEY
Member, Pennsylvania Association of Notaries

Apr 3 2008 11:40 AM

16 1970

CEI Recovery Services
4850 Street Road, Suite 220
Trevose, PA 19053

Phone: 215-364-8253
Fax: 215-953-4178



AUTO CLAIMS MANAGEMENT

Claimant's 1st Report Automobile Loss

April 3, 2008

City of West Allis

1st Report - Attn: Claims

RECEIVED

APR 03 2008

CITY OF WEST ALLIS
CLERK/TREASURER

RE: Your Insured : Louis Kowieski - Driver
Policy # : Unknown
Date of Loss : 02/08/2008 @ 1:40 PM
Our Client : Mary Kay Cosmetics
CEI File # : 696563

1ST REPORT

Attached is the CEI Loss Report for the above mentioned accident. Also attached is a copy of the police report.

CEI is the 3rd Party Administrator for the damage sustained to our client's vehicle. We are attempting to obtain claim information to pursue subrogation.

Please verify and/or establish a claim with the information provided and contact me at the above phone number as soon as possible. Thank you for your anticipated cooperation.

Sincerely,

Joseph Pierce
CEI Services
215-364-8253 X# 1440

 9 pages total

LM
4/3/08
MS

Adjusters Name : _____
Claim # : _____
Adj. Mailing Address: _____

Phone# : _____ Ext: _____ Fax#: _____
E-mail Address : _____

Please Fax Back to CEI Services @ 215-953-4178

AUTOMOBILE LOSS NOTICE

PRODUCER: The CEI Group Bucks County Technology Park 4850 Street Road Tower 1 Building Trevose, Pa 19053 USA	REPORT DATE:	02/11/2008 3:13AM EST
	DATE/TIME OF LOSS:	02/03/2008 8:40PM EST
	WEEKDAY OF LOSS:	Sunday
	CAR QUALIFIER:	SANDRA HOEFT
DRIVER:		SANDRA HOEFT (Car Qualifier)
CLIENT:	GE Fleet Services	CLAIM CONTACT: PHONE: CLIENT CLAIM #: COST CENTER:
Branch:	101027 - Career Car Qualifier Account	SANDRA HOEFT (Car Qualifier) W3YY9
LEVEL 1:	101027	LEVEL 4:
LEVEL 2:	000006	LEVEL 5:
LEVEL 3:	000942	LEVEL 6:
		00A105

LOSS NOTICE INFORMATION

LOCATION OF ACCIDENT		AUTH. CONTACTED:	
STREET:	199th Street South	West Allis Police Department	
INTERSECTION:	Oklahoma Avenue West	POLICE PHONE #:	
CITY, STATE/PROVINCE:	West Allis, WI	REPORT #:	On Police Report
COUNTY:		OFFICER'S NAME:	
WEATHER	ROAD CONDITIONS	TRAFFIC CONTROLS	SPEED LIMIT
Clear	Icy	Stop Sign	
TRAVELING SPEED			
DIRECTION OF TRAVEL			
DESCRIPTION OF ACCIDENT			
I was stopped behind a snow plow at a stop sign. The plow backed up and hit the front of my vehicle.			
VIOLATIONS/CITATIONS ISSUED		INS VEH/OTHER VEH	VEHICLE DRIVER
ACCIDENT CODE		ACCIDENT TYPE	
Other Vehicle Hit Our Vehicle		Backing Up	

INSURED VEHICLE

VEH#	YEAR	MAKE:	Pontiac	BODY TYPE:	4 Door	PLATE:	535KVZ
1	2007	MODEL:	Grand Prix	VIN:	2G2WP552971137339	STATE/PROVINCE:	WI
		COLOR:	Silver	MILEAGE/KM:	16,960	UNIT #:	7600285
CAR QUALIFIER		PHONE		DRIVER'S LICENSE #:		xxxxxxx	
SANDRA HOEFT		(W-Cell): 414-483-7272		DRIVER'S LICENSE STATE/PROVINCE:		XX	
2351 E Bennett Ave				DATE OF BIRTH:		xx/xx/xxxx	
Milwaukee, WI 53207				HIRE DATE:		xx/xx/xxxx	
DRIVER		PHONE		RELATIONSHIP:		Car Qualifier	
SANDRA HOEFT		(W-Cell): 414-483-7272		DRIVER'S LICENSE #:		xxxxxxx	
2351 E Bennett Ave				DRIVER'S LICENSE STATE/PROVINCE:		XX	
Milwaukee, WI 53207				WEARING SEATBELT?		Yes	
				USING CELL PHONE?		No	
				DID AIRBAG DEPLOY?		No	
PRIMARY IMPACT:		Front		SUBROGATION:		Yes	
ADDITIONAL DAMAGE:		None					

OTHER ITEMS DAMAGED OR STOLEN

Damaged Item(s)	Damaged Amount(s)
NONE	

PROPERTY DAMAGED/OTHER VEHICLES

OTHER VEH#: 2	YEAR 2000	MAKE: FREIGHTLINER	INSURED: Yes
		MODEL: DUMP	INSURANCE COMPANY: Cities & Villages Mutual Ins. Co.
		PLATE: 54839	INSURANCE AGENT: INSURANCE PHONE: POLICY #:
OWNER City of west allis 7525 W Greenfield Avenue Milwaukee, WI 53214		PHONE (W): (414) 302 - 8000	OTHER DRIVER Louis Kowieski 719 S 97th Street Milwaukee, WI 53214
PHONE (H): (414) 475 - 0219			
PRIMARY IMPACT:		DIRECTION OF TRAVEL:	
ADDITIONAL DAMAGE: None			

INJURIES

NAME & ADDRESS	PHONE	PED/VEH	VEHICLE OWNER	AGE	AMBULANCE	EXTENT OF INJURY
NONE						

WITNESSES

NAME & ADDRESS	PHONE
NONE	

PASSENGERS

NAME & ADDRESS	PHONE	INS VEH/OTHER VEH	VEHICLE OWNER
NONE			

SUPPLEMENTAL INFORMATION

Client Requested Data	Driver Response
1. Insurance Carrier:	ACE AMERICAN INS. CO.
2. Insurance Policy:	ISAH08231448
3. Location Code:	P21HB9898
4. Consultant Number:	HB9898
5. Spanish Speaking	No

This is the extent of the information available at this time. For further information, please contact the driver/custodian of the insured vehicle.

2351 East Bennett Avenue
Milwaukee, Wisconsin 53207
(414) 483-7272
Fax: (414) 483-7272



696563

Fax

To: <u>Mary K.</u>	From: <u>Sandra L. Hoefft</u>
Fax: <u>215-953-4178</u>	Pages: <u>6</u>
Phone:	Date: <u>3-25-08</u>
Rec: <u>#696563</u>	CC:

- Urgent
 For Review
 Please Comment
 Please Reply
 Please Recycle

Wisconsin Motor Vehicle Accident Report MW4000e 01/2005

050208

<input checked="" type="checkbox"/> Reportable Accident	<input type="checkbox"/> On Emergency	<input type="checkbox"/> Amended	Police Number 08005882
Agency Accident Number A08020807	8 - Time of Accident (Military Time) 1340	6 - Total Units 02	7 - Total Injured 00
4 - Accident Date 02/08/2008	11 - Accident Location INTERSECTION	14 - Bus/Fm/Rmld 15 - Est Dist 15 - Hwy Dir	14 - On Hwy No. 118TH ST S

18 - Frontal Hwy No. OKLAHOMA AVE W	17 - Structure Number 12 - Latitude 13 - Longitude	80 - First Harmful Event REAR-END	83 - Number of Collision 82 - Motor Vehicle in Transport
112 - Access Control NO CONTROL	113 - Road Curvature STRAIGHT	113 - Road Terrain LEVEL/FLAT	113 - Road Surface CONCRETE
115 - Traffic Way NOT-Physically-Divided (2-Way Traffic)	117 - Reason To Roadway ON-ROADWAY	118 - Road Surface Condition SNOW/SLUSH	118 - Weather CLOUDY

101 - Supplemental Reports	102 - Witness Statements	103 - Measurements Taken	79 - E.M.S Number
<input checked="" type="checkbox"/> Truck Or Bus	<input type="checkbox"/> Load Spillage	<input type="checkbox"/> Construction Zone	<input checked="" type="checkbox"/> Names Exchanged
<input type="checkbox"/> Hit and Run	<input type="checkbox"/> Government Property	<input checked="" type="checkbox"/> Fire	<input type="checkbox"/> Trailer or Towed

Operator/Pedestrian

81 - Most Harmful Event Collision With MOTOR VEHICLE IN TRANSPORT	23 - Dir Of Travel SOUTH	24 - Speed Limit 25
--	-----------------------------	------------------------

36 - Operating as Classified B CLASS	37 - Endorsements	35 - Operating Commercial Motor Vehicle
---	-------------------	---

25 - Date Of BIRTH 05/07/1945	33 - Sex MALE	25 - Address Street & Number 719 S 97 ST
----------------------------------	------------------	---

27 - City WEST ALLIS	27 - State WI	27 - Zip Code 53214	28 - Telephone Number (414) 475-0219 EXT.
-------------------------	------------------	------------------------	--

38 - Seat Position FRONT-SEA-T-LEFT-SIDE-(MC/BIKE DRIVER, TRAIN CONDUCTOR)	40 - Safety Equipment SHOULDER-BELT-AND-LAP-BELT-USED	41 - Arrest NOT APPLICABLE	42 - Ejected NOT EJECTED
---	--	-------------------------------	-----------------------------

122 - Driver Factors UNSAFE-BACKING	110 - What Driver Was Doing STOP-SIGN	82 - No. of Citations Issued 0
--	--	-----------------------------------

OPERATOR/PEDESTRIAN 01

66 - Driver of Pedestrian Factors APPEARED NORMAL	88 - Substance Presence NEITHER-ALCOHOL-NOR-DRUGS-PRESENT	91 - Drug Test TEST-NOT-GIVEN
--	--	----------------------------------

64 - 1st State No.	64 - 2nd State No.	64 - 3rd State No.	64 - 4th State No.	64 - 5th State No.
--------------------	--------------------	--------------------	--------------------	--------------------

43 - Trapped/Extorted NOT-TRAPPED	82 - Pedestrian Location	92 - Pedestrian Action
--------------------------------------	--------------------------	------------------------

38 - Injury Severity N - NO APPARENT INJURY	41 - Arrest NOT APPLICABLE	42 - Ejected NOT EJECTED	44 - Medical Transport <input type="checkbox"/>
--	-------------------------------	-----------------------------	--

25 - Operator/Pedestrian Last Name K200587451000	26 - Operator/Pedestrian First Name TODD	27 - Operator/Pedestrian License Number WI	28 - Operator/Pedestrian License State WI
---	---	---	--

25 - Operator/Pedestrian License Number K200587451000	26 - Operator/Pedestrian License State WI	27 - Operator/Pedestrian License Class B CLASS
--	--	---

25 - Operator/Pedestrian License Number K200587451000	26 - Operator/Pedestrian License State WI	27 - Operator/Pedestrian License Class B CLASS
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25 - Operator/Pedestrian License Number K200587451000	26 - Operator/Pedestrian License State WI	27 - Operator/Pedestrian License Class B CLASS
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25 - Operator/Pedestrian License Number K200587451000	26 - Operator/Pedestrian License State WI	27 - Operator/Pedestrian License Class B CLASS
--	--	---

Handwritten marks: 'G' and 'X' with a diagonal line.

Wisconsin Motor Vehicle Accident Report MV4000e 01/2005

BRRGHKX

696563

05e206

91 - Drugs Reported
124 - Highway Factors SNOW, ICE, OR WET

21 - Unit Type TRUCK		Vehicle Type SNOW-PLOW			22 - Total Occupants 1	
66 - License Plate Number 54933	57 - Plate Type MUN	58 - State WI	59 - Exp Year	15 - Vehicle Identification Number 1PVB3JBB8YHAG5870		
50 - Year 2000	51 - Make FRHT	52 - Model DUMP	63 - Body Style TRUCK	54 - Color WHI	100 - Skidmarks to Impact (Ft) 0	
94 - Vehicle Damage REAR						
86 - Extent Of Damage VERY-MINOR		<input type="checkbox"/> Vehicle Towed Due To Damage		87 - Vehicle Removed By OPERATOR		
123 - Vehicle Factors NOT-APPLICABLE						

45 <input type="checkbox"/> Vehicle Owner Same As Operator				
48 - Vehicle Owner Last Name		48 - First Name	48 - Middle Initial	48 - Suffix
46 - Company Name CITY OF WEST ALLIS				
47 - Address Street & Number 7525 W GREENFIELD AVE			47 - PO Box	
49 - City WEST ALLIS	48 - State WI	48 - Zip Code 53214	49 - Telephone Number (414) 302-8200 EXT.	

63 - Liability Insurance Company CITIES & VILLAGES-MUTUAL-INS-CO		60 <input type="checkbox"/> Policy Holder Same As Owner
61 - Policy Holder Last Name		61 - Policy Holder First Name
61 - Policy Holder Company CITY OF WEST ALLIS		

20 - School Name		Body Make	Seating Capacity
Bus Travelling to/from <input type="radio"/> To <input type="radio"/> From		School District Contracted With	

Operator/Pedestrian Unit Status		81 - Most Harmful Event: Collision With MOTOR VEHICLE IN TRANSPORT		23 - Dir Of Travel NORTH	24 - Speed Limit 25
38 - Operating as Classified D CLASS		37 - Endorsements		35 <input type="checkbox"/> Operating Commercial Motor Vehicle	
28 - Driver's License Number H130782655500		30 - State WI	31 - Expiration Year 2011	34 - On Duty Accident	
25 - Operator/Pedestrian Last Name HOEFT		25 - First Name SANDRA		25 - Middle Initial L	25 - Suffix
32 - Date Of Birth 02/15/1965		33 - Sex FEMALE			

Wisconsin Motor Vehicle Accident Report MV40006 01/2005

BRRGHXX

050206

28 - Address Street & Number 2351 E BENNETT AVE		27 - City MILWAUKEE		26 - PO Box	
28 - Telephone Number (414) 483-1336 EXT.		27 - State WI		27 - Zip Code 53207	
38 - Seat Position FRONT SEAT-LEFT-SIDE-(MC/BIKE DRIVER, TRAIN CONDUCTOR)		40 - Safety Equipment SHOULDER-BELT-AND-LAP-BELT-USED		44 - <input type="checkbox"/> Medical Transport	
38 - Injury Severity N - NO APPARENT INJURY		41 - Alttag NON-DEPLOYED		42 - Ejected NOT-EJECTED	
43 - Trapped/Extorted NOT-TRAPPED		82 - Pedestrian Location		82 - Pedestrian Action	
118 - What Driver Was Doing STOPPED-IN-TRAFFIC		120 - Traffic Control STOP-SIGN		62 - No. of Citations Issued 0	
84 - 1st Statute No.		84 - 2nd Statute No.		84 - 3rd Statute No.	
84 - 4th Statute No.		84 - 5th Statute No.		84 - 6th Statute No.	
122 - Driver Factors INATTENTIVE-DRIVING					
88 - Driver of Pedestrian Factors APPEARED NORMAL					
89 - Alcohol Test TEST NOT GIVEN					
90 - Drug Test TEST NOT GIVEN					
124 - Highway Factors SNOW, ICE, OR WET					
21 - Unit Type AUTOMOBILE					
22 - Total Occupants 1					
21 - Vehicle Identification Number [REDACTED]					
22 - Year 2007					
50 - Make PONT					
51 - Model GRAND PRIX					
52 - Body Style 4 DOOR					
53 - Color SIL					
100 - SKIDMARKS TO IMPACT (FI)					
94 - Vehicle Damage FRONT, FRONT PASSENGER SIDE					
95 - Extent Of Damage MODERATE					
96 - Vehicle Towed Due To Damage OPERATOR					
97 - Vehicle Removed By OPERATOR					
123 - Vehicle Factors NOT-APPLICABLE					
45 - <input type="checkbox"/> Vehicle Owner Same As Operator					
46 - Vehicle Owner Last Name					
48 - Company Name GELCO CORP					
47 - Address Street & Number 3 CAPITAL DR					
49 - PO Box					
48 - City EDEN PRAIRIE					
49 - State MN					
48 - Zip Code 55344					
49 - Telephone Number					
VEH OWNER 02					
Insurance					

VEHICLE 02					
Vehicle Owner					

Truck and Bus

125 - Officer Last Name		SOPA	
129 - Law Enforcement Agency No.		4118	
130 - Law Enforcement Agency Name		WEST ALLIS POLICE DEPARTMENT	
128 - Law Enforcement Agency Address Street & Number			
11301 WEST LINCOLN AVENUE			
127 - City	127 - State	128 - Telephone Number	
WEST ALLIS	WI	(414) 302-8000 EXT.	
132 - Date Notified	133 - Time Notified (Military Time)	135 - Date Of Report	
02/08/2008	1342	02/08/2008	
Agency Accident Number		19 - Special Study	
A08020807			
Police Number			
08005982			
18 - Agency Space			

Officer Information

OFFICER INFORMATION

126 - Officer Last Name

129 - Law Enforcement Agency No.

130 - Law Enforcement Agency Name

128 - Law Enforcement Agency Address Street & Number

11301 WEST LINCOLN AVENUE

127 - City

127 - State

128 - Telephone Number

(414) 302-8000 EXT.

132 - Date Notified

133 - Time Notified (Military Time)

135 - Date Of Report

02/08/2008

1342

Agency Accident Number

A08020807

Police Number

08005982

18 - Agency Space

DIAGRAM AND NARRATIVE

BOTH UNITS HAD BEEN W/B ON S 119 ST AT W. OKLAHOMA AVE. UNIT #1 A CITY OF WEST ALLIS DUMP TRUCK WITH SNOW PLOW WAS PLOWING THE STREETS AND BAITING WHEN IT BACKED UP TO CLEAN THE SNOW NEXT TO THE CURB AND BACKED INTO STOPPED UNIT #2. THERE IS A SIGN ON THE BACK OF UNIT #1 WARNING TO STAY BACK 50 FEET.

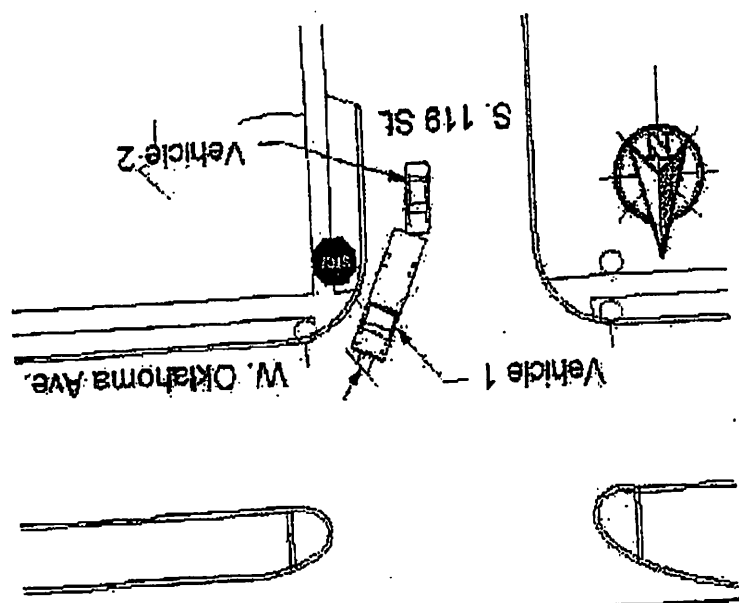


Diagram and Narrative

106 - PHOTOS BY
DAVE WEBKING

83 - Liability Insurance Company		UNKNOWN	
81 - Policy Holder Last Name		SANDRA	
81 - Policy Holder First Name		SANDRA	
80 - Policy Holder Same As Owner <input type="checkbox"/>			
81 - Policy Holder Company		HOEFT	
81 - Policy Holder Company		HOEFT	
83 - Liability Insurance Company			
UNKNOWN			
81 - Policy Holder Last Name		SANDRA	
81 - Policy Holder First Name		SANDRA	
80 - Policy Holder Same As Owner <input type="checkbox"/>			
81 - Policy Holder Company		HOEFT	
81 - Policy Holder Company		HOEFT	
83 - Liability Insurance Company			
UNKNOWN			
81 - Policy Holder Last Name		SANDRA	
81 - Policy Holder First Name		SANDRA	
80 - Policy Holder Same As Owner <input type="checkbox"/>			

School Bus

83 - Liability Insurance Company		UNKNOWN	
81 - Policy Holder Last Name		SANDRA	
81 - Policy Holder First Name		SANDRA	
80 - Policy Holder Same As Owner <input type="checkbox"/>			
81 - Policy Holder Company		HOEFT	
81 - Policy Holder Company		HOEFT	
83 - Liability Insurance Company			
UNKNOWN			
81 - Policy Holder Last Name		SANDRA	
81 - Policy Holder First Name		SANDRA	
80 - Policy Holder Same As Owner <input type="checkbox"/>			

Bus Travelling to/from		School Name	
To <input type="radio"/> From <input type="radio"/>			
School District Contracted With			

BUS 02

Wisconsin Motor Vehicle Accident Report MV4000 01/2005

BRRGHXX

Wisconsin Motor Vehicle **BRRGHKX**

Accident Report MV4000a 01/2005

0802ba

TRUCK/BUS	138 <input checked="" type="checkbox"/> A truck with at least two axles and six tires		138 <input type="checkbox"/> A truck with a hazardous materials placard		
	138 <input type="checkbox"/> A bus designed to carry 16 or more persons, including the driver				
	138 <input type="checkbox"/> Fatal Injury	138 <input type="checkbox"/> Medical Transport	138 <input type="checkbox"/> Towed		
	Unit Number				
	137 - Hazardous Materials Class Numbers				
	137 - Hazardous Materials "UN" Nos.		Hazardous Material Placard Displayed <input type="checkbox"/>		Hazardous Cargo Was Released <input type="checkbox"/>
	137 - Name Of Hazardous Materials In this Load		137 - Name Of Hazardous Materials Released		
	138 Interstate Carrier <input type="checkbox"/>	140 - US DOT No.	140 - ICC MC No.	LC No.	IC No.
	141 - Source				
	139 - Carrier Name				
	142 - Carrier Address			City	State
				Zip Code	
	143 - GVWR (Lbs)	144 - Total No. of Axles	145 - Vehicle Configuration		147 - Cargo Body Type
	146 - First Event		148 - Second Event		
146 - Third Event		148 - Fourth Event			



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

April 7, 2008

Mr. Joseph Pierce, CEI Services
CEI Auto Claims Management
4850 Street Road
Suite 220
Trevose, PA 19053

Dear Mr. Pierce:

This letter acknowledges receipt of your communication on behalf of Mary Kay Cosmetics regarding vehicle damage allegedly sustained at South 119 Street and West Oklahoma Avenue on February 8, 2008.

The original document will be submitted to the Common Council at its meeting of April 14, 2008.

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

/jml

cc: City Attorney