



CLAIMANT CONTACT INFORMATION

Name: Grace Orlando
Address: 1739 S 60th Street
West Allis WI 53214

Phone: 414-739-2376
Email: gorlando1974@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: 12/06/2021 Time of day: 07:41
Location: 57th Street and Mitchell

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.

Your city ambulance was traveling the in correct way on 57th St (Unit #63) transporting a patient but did not have any emergency light or sirens activated. Unit #63 did not yeild the right of way in traffic and did not stop seeing my vehicle already approaching the intersection of 57th and Mitchell. In swerving to avoid being hit by the abulance my car slid into the light pole on 57th street causing \$5083 in damages to my vehicle. Due filing a claim on my insurance I am seeking the cost I have personally incurred from the result of this accident \$1485.38.

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: *Grace Orlando*

Date: 1/28/22

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: \$ 1,485.38

SAVE

PRINT

WISCONSIN, 3655 S 108TH ST, GREENFIELD, WI 532281205 (414) 546-6900

RENTAL AGREEMENT **REF#**
743273 53QY9X

RENTER
ORLANDO, GRACE

DATE & TIME OUT
12/06/2021 03:09 PM
DATE & TIME IN
01/05/2022 04:54 PM

BILLING CYCLE
CALENDAR DAY

CAR CLASS CHARGED
FCAR

VEH #1 2021 NISN ALTI 4DSV
VIN# 1N4BL4DV6MN378349
LIC# GCG984
MILES DRIVEN 1052
CAR CLASS: FCAR

RATE SOURCE ACCOUNT
ALLSTATE INS-NASHVILLE ARMS

BILL TO ACCOUNT
ALLSTATE INS-NASHVILLE ARMS
ATTN: *ENTERPRISE, CONTACT
CENTER
555 MARRIOTT DR
NASHVILLE, TN 37214-5020

CLAIM INFO
0651295411
INSURED: ORLANDO,GRACE
LOSS DATE: 12/06/2021
INSURED
SHOP: CALIBER #3339 WEST ALLIS
PHONE: (414) 607-8810
ATTN: UNKNOWN

SUMMARY OF CHARGES

Charge Description	Date	Quantity	Per	Rate	Total
TIME & DISTANCE	12/06 - 01/05	31	DAY	\$28.70	\$889.70
PAI/PEC	12/06 - 01/05	31	DAY	\$6.00	\$186.00
FUEL SERVICE OPTION	12/06 - 01/05				\$11.60
YOUNG DRIVER FEE (18-99)	12/06 - 01/05			WAIVED	
				Subtotal:	\$1,087.30

Taxes & Surcharges

SALES TAX	12/06 - 01/05			5.5%	\$50.31
TITLE AND REGISTRATION FEES	12/06 - 01/05	31	DAY	\$0.81	\$25.11
				Total Charges:	\$1,162.72

Bill-To / Deposits

ALLSTATE INS-NASHVILLE ARMS

TIME & DISTANCE	12/06 - 01/04	30	DAY		
SALES TAX	12/06 - 01/04		PERCENT	5.5%	
TITLE AND REGISTRATION FEES	12/06 - 01/04	30	DAY		
				Subtotal:	(\$900.00)
DEPOSITS					(\$262.72)

Total Estimated Amount Due

\$0.00

PAYMENT INFORMATION

AMOUNT PAID	TYPE
\$262.72	Visa

CREDIT CARD NUMBER

xxxxxxxxxxxx3557



Rental Agreement # 5BP6VZ

Renter Information

Renter Name
GRACE ORLANDO

Renter Address
WEST ALLIS, WI 53214
USA

Vehicle Information

ALTI
License #: GCG984
State/Province: MN
Unit #: 7VDYKY
Vehicle #: MN378349

Vehicle Class Driven
Full Size 4 door/Automatic/Air

Vehicle Class Charged
Full Size 4 door/Automatic/Air

Odometer Mileage/Kilometers
Starting: 28849 **Ending:** 29643
Total: 794

Fuel
Starting: 1/4 **Ending:** 1/2

Thank you for renting with Enterprise Rent-A-Car

We appreciate your business!
This email was automatically generated from an unattended mailbox, so please do not reply to this e-mail.
If you have any questions about your rental, please view our Frequently Asked Questions or send us a secured message by visiting our [Support Center](#)

Trip Information

Pickup
Wednesday, January 5, 2022 4:54 PM
Return
Tuesday, January 25, 2022 4:30 PM

Start Charges
Thursday, January 6, 2022 4:54 PM
GREENFIELD
3655 S 108TH ST
GREENFIELD, WI 53228-1205
USA

GREENFIELD
3655 S 108TH ST
GREENFIELD, WI 53228-1205
USA

Bill-To: ALLSTATE INS-NASHVILLE ARMS

Subtotal \$0.00

Renter Charges

Rental Rate	Time & Distance 20 Day at \$28.70 / Day	\$574.00
Mileage	Unlimited Mileage	Included
Taxes and Fees	Title And Registration Fees (\$0.81 / Day)	\$16.20
	Sales Tax (5.50%)	\$32.46

Total \$622.66

(Subject to audit)
Amount charged on January 26, 2022 to VISA (0687) (\$622.66)

Amount Due \$0.00

(414)607-8810
CALIBER COLLISION 3339
1434 S 113TH ST
WEST ALLIS, WI 53214

01/25/2022

16:16:46

DEBIT CARD
DEBIT SALE

Card #	XXXXXXXXXXXX3300
Network:	MAESTRO
Chip Card:	Associated Debit
AID:	A0000000042203
SEQ #:	4
Batch #:	232
INVOICE	3339043431
Approval Code:	001366
Entry Method:	Chip Read
Mode:	Issuer - PIN Verified

SALE AMOUNT \$600.00

Restoring The Rhythm Of Your Life

CUSTOMER COPY