

CITY OF WAUWATOSA
7725 W. North Avenue
Wauwatosa, WI 53213

Received by
MAR 22 2024
City Clerk's Office

NOTICE OF CIRCUMSTANCES OF CLAIM

Name: JERRY LEMON

Address: [REDACTED]

Phone: [REDACTED]

Email: [REDACTED]

Incident/Accident Information

Date: 1-12-2024

Time: 2:00 PM

Place: MILW, WI

[REDACTED]

CIRCUMSTANCES OF CLAIM

In the space below briefly describe the circumstances of your claim. (Attach additional sheets, if necessary.) For auto damages, attach a copy of police report, if any, and a diagram of the accident scene indicating north, south, east or west corners if the accident occurred at an intersection. For bodily injury, indicate nature of injury, whether or not medical attention was given and the name of the treatment provider. Identify any witnesses to the incident/accident.

One of the snow est days of the winter the tow truck
slid into my truck and the tail light was broken. The driver
rang the doorbell to let me know what has happened.

X Signed: Jerry Lemon

Date: 03-22-24

CLAIM

NOTE: You are not required to make a claim at this time. As long as you have filed the above Notice of Circumstances of Claim you may file a claim with the City at any time consistent with the applicable statute of limitations. However, in order for the City to formally accept or deny your claim at this time, the following claim must be completed and signed.

The undersigned hereby makes a claim against the City arising out of the circumstances described above in the amount of \$ 2,676.00

To process this claim it is necessary to detail all damages being sought.

X Signed: Jerry Lemon

Date: 3-22-24

Address: [REDACTED]

TEARMAN SPENCER
City Attorney

ODALO J. OHIKU
ROBIN A. PEDERSON
S. TODD FARRIS
JENNIFER L. WILLIAMS
Deputy City Attorneys



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MARIA E. MESOLORAS
CYNTHIA HARRIS ORTEGA
Assistant City Attorneys

March 1, 2024

Mr. Jerry Lemon
[REDACTED]

RE: C.I. File. No. 1030-2024-252
Communications from JERRY LEMON

Mr. Lemon:

The subject matter of this claim is not the result of operation, conduct or maintenance of the City of Milwaukee Departments. City of Wauwatosa is a separate entity. In our view, the claim was inappropriately filed with the City and recommend you file a claim with the owner as indicated on the Wisconsin Motor Vehicle Crash Report J9L1G5WRHW:

City of Wauwatosa
7725 W. North Avenue
Wauwatosa, WI 53213

Accordingly, a copy of this claim has been placed on file in this office and no further action will be taken by the city of Milwaukee.

Very truly yours,

Robin Pederson Dep. City Atty
TEARMAN SPENCER
City Attorney

Michelle Thompson-Gray
MICHELLE THOMPSON-GRAY
Investigator Adjuster

TS/MTG/cdr

1030-2024-252/290092



J9L1G5WRHW
240120715

WISCONSIN MOTOR VEHICLE
CRASH REPORT

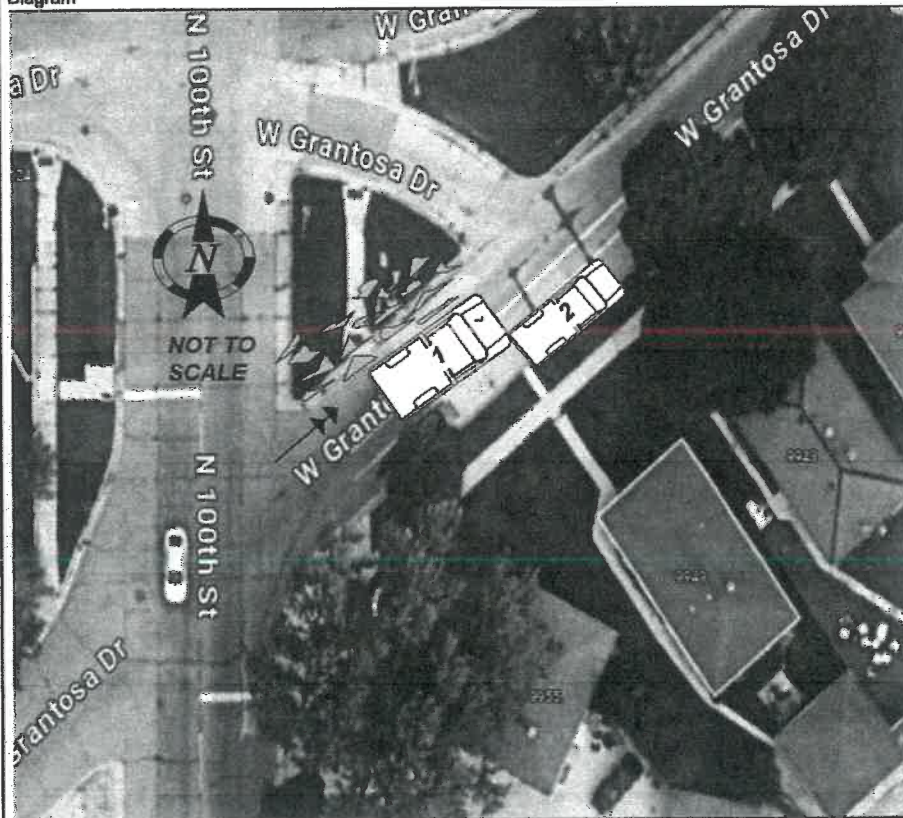
MILWAUKEE POLICE DEPARTMENT
749 WEST STATE STREET
MILWAUKEE, WI 53201
(414) 933-4444

J9L1G5WRHW

Document Number Override		Primary Crash Document #		Agency Crash Number		Investigating Officer/Deputy M. BACHMANN	
Crash Date 01/12/2024		Crash Time 02:00 PM		Date Arrived 01/12/2024		Time Arrived 02:18 PM	
Date Notified 01/12/2024		Time Notified 02:08 PM		Total Units 02		Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone	<input type="checkbox"/> Trailer or Towed		<input type="checkbox"/> Reporting Threshold	
<input type="checkbox"/> Government Property	<input type="checkbox"/> Active School Zone		School Bus Related NO		Tags SUPERVISOR APPROVED		
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)			<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

Description

Diagram



Reconstruction By
Photos By
Additional Information NONE

☒ I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

UNIT ONE WAS E/B AT 9949 W. GRANTOSA AVE. AND STRUCK UNIT TWO AT THE SAME LOCATION. UNIT TWO WAS LEGALLY PARKED AND UNOCCUPIED. UNIT ONE IS A CITY OF WAUWATOSA SNOW PLOW TRUCK (FLEET #T-123). UNIT ONE WAS PUSHED TO THE RIGHT WHILE CLEARING SNOW FROM THE ROADWAY. UNIT ONE'S PLOW BLADE STRUCK UNIT TWO. UNIT ONE DID NOT SUSTAIN ANY DAMAGE. NO INJURIES REPORTED.

J9L1G5WRHW
240120715

WISCONSIN MOTOR VEHICLE
CRASH REPORT

MILWAUKEE POLICE DEPARTMENT
749 WEST STATE STREET
MILWAUKEE, WI 53201
(414) 933-4444

Location

ON 9949 W GRANTOSA DR 60 FT E OF N 100TH ST (HOUSE/BUILDING 9949)	Latitude 43.093205681	Longitude -88.037470249
IN THE CITY OF MILWAUKEE IN MILWAUKEE COUNTY	X Coordinate 415565.125	Y Coordinate 4771687.5
	Structure Type HOUSE/BUILDING	

Crash Scene

First Harmful Event PARKED MOTOR VEHICLE	First Harmful Event Location ON ROADWAY	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAYLIGHT	
Road Surface Condition(s) SNOW, SLUSH	Roadway Factor(s)	
Environment Factor(s) WEATHER CONDITIONS	NONE	
Weather Condition(s) SNOW		
Animal Type	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION

Unit Summary

UNIT 01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type TRUCK	
	Vehicle Type SNOW PLOW			Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 30	Total Lanes 1
	Most Harmful Event: Collision With PARKED MOTOR VEHICLE		Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER		Traffic Control NO CONTROL	Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT	Road Grade LEVEL	
	Truck Bus or HazMat NO				

Vehicle

UNIT VEHICLE 01	License Plate Number 71239	Plate Type MUN - MUNICIPAL	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1FVAG5FEXJHJU9619	Make FREIGHTLINER CORP	Year 2018	Model 108SD
	Color WHI - WHITE	Body Style ST - STAKE TRUCK	Bus Use	
	Initial Contact Point 01 - RIGHT FRONT CORNER	Vehicle Damage 01 - RIGHT FRONT CORNER		
	Extent Of Damage MINOR DAMAGE			



J9L1G5WRHW
240120715

WISCONSIN MOTOR VEHICLE CRASH REPORT

MILWAUKEE POLICE DEPARTMENT
749 WEST STATE STREET
MILWAUKEE, WI 53201
(414) 933-4444

UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
01 01	Owner Name WAUWATOSA CITY OF		Owner Address 7725 W NORTH AVE WAUWATOSA, WI 53213 , US	
	Sequence Of Events			
01 02 03 04	Event PARKED MOTOR VEHICLE			
	Event			
	Event			
	Event			
UNIT	Policy Holder			
	Insurance Company SELF-INSURED		GOVERNMENT WAUWATOSA CITY OF	
UNIT INDIVIDUAL	Individual			
	DRIVER BRIAN KEITH VIDEKOVICH (414) 380-0567		Citations Issued 0	Sex MALE
	Date of Birth 06/19/1970		Race WHITE	
	Address 2172 S 86TH ST WEST ALLIS, WI 53227 , US		Driver License Number V3210717021902 STATE: WISCONSIN COUNTRY: UNITED STATES	
01 001	Safety Equipment		On Duty Crash	
	Row 01 - FRONT ROW		Seat Position 07 - LEFT	
	Helmet Use		SHOULDER & LAP BELT	
	Eye Protection		Helmet Compliance	
Injury		Tint Compliance		
Injury Severity NO APPARENT INJURY		Airbag NON DEPLOYED		
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		
Medical Transport NOT TRANSPORTED		Trapped/Extricated NOT TRAPPED		
Hospital		EMS Agency Identifier		
Date of Death		EMS Run #		
Time of Death		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				

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WISCONSIN MOTOR VEHICLE
CRASH REPORT

MILWAUKEE POLICE DEPARTMENT
749 WEST STATE STREET
MILWAUKEE, WI 53201
(414) 933-4444

UNIT INDIVIDUAL 01 001	Non Motorist	Striking Unit #	Location	
	Prior Action			
	Action			
	Action Other			
	To/From School			
	Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use NO	
	Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type		Alcohol Test Results
	Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results	
	Drug Type			
	Individual Condition APPEARED NORMAL			

Unit Summary

UNIT 02	Unit Status LEGALLY PARKED	Vehicle Operating As Classification D CLASS		Unit Type TRUCK		
	Vehicle Type UTILITY TRUCK/PICKUP TRUCK		Operating As Endorsements			
	Total Occs 0	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 30	Total Lanes 1	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

UNIT VEHICLE 02 02	Vehicle				
	License Plate Number PT1348		Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1D7HU18218S600650		Make DODGE	Year 2008	Model RAM 1500 Q
	Color ONG - ORANGE		Body Style PK - PICKUP		Bus Use
	Initial Contact Point 07 - LEFT REAR CORNER		Vehicle Damage		
	Extent Of Damage FUNCTIONAL DAMAGE		07 - LEFT REAR CORNER		
	Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER		



J9L1G5WRHW
240120715

WISCONSIN MOTOR VEHICLE
CRASH REPORT

MILWAUKEE POLICE DEPARTMENT
749 WEST STATE STREET
MILWAUKEE, WI 53201
(414) 933-4444

UNIT	VEHICLE	02	02	What Driver Was Doing LEGALLY PARKED	Vehicle Factors
				Driver Prior Action Other	NOT APPLICABLE
				Driver Actions NO CONTRIBUTING ACTION	
				Owner Name JERRY LEMON	Owner Address [REDACTED]
				Sequence Of Events	
			01	Event MOTOR VEH IN TRANSPORT	
			02	Event	
			03	Event	
			04	Event	
UNIT				Policy Holder	
				Insurance Company PROGRESSIVE-CLASSIC-INS-CO	INDIVIDUAL JERRY LEMON



**Gerber Collision & Glass -
Milwaukee/Douglas Ave.**

Highly Wreck - ommended!
6301 W Douglas Ave, Milwaukee, WI 53218
Phone: (414) 466-2111

Workfile ID: 7a2b3924
Federal ID: 51-0394062
State ID: N/A
Federal EPA: N/A
State EPA: N/A

Preliminary Estimate

Customer: LEMON, JERRY

Written By: Keshawn Corbitt

Insured: LEMON, JERRY

Type of Loss:

Point of Impact: 07 Left Rear

Policy #:

Date of Loss:

Claim #:

Days to Repair: 0

Owner:

LEMON, JERRY

(414) 499-3890 Cell

(414) 462-2993 Evening

Inspection Location:

Gerber Collision & Glass -
Milwaukee/Douglas Ave.

6301 W Douglas Ave

Milwaukee, WI 53218

Repair Facility

(414) 466-2111 Business

Insurance Company:

SELF PAY

VEHICLE

2008 DODG Ram 1500 Laramie Quad Cab 140.5" WB 4WD 4D P/U 8-5.7L Gasoline SMPI orange

VIN: 1D7HU18218S600650

License: PT1348

State: WI

Interior Color: black

Exterior Color: orange

Production Date: 4/2008

Mileage In: 167,782

Mileage Out:

Condition:

Vehicle Out:

Job #:

TRANSMISSION

Automatic Transmission

Overdrive

4 Wheel Drive

POWER

Power Steering

Power Brakes

Power Windows

Power Locks

Power Mirrors

Heated Mirrors

Power Driver Seat

Power Adjustable Pedals

DECOR

Dual Mirrors

Body Side Moldings

Tinted Glass

Console/Storage

Overhead Console

Wood Interior Trim

CONVENIENCE

Air Conditioning

Intermittent Wipers

Tilt Wheel

Cruise Control

Keyless Entry

Alarm

Steering Wheel Touch Controls

Climate Control

Remote Starter

Home Link

RADIO

AM Radio

FM Radio

Stereo

Search/Seek

CD Player

Premium Radio

Satellite Radio

SAFETY

Drivers Side Air Bag

Passenger Air Bag

Anti-Lock Brakes (4)

4 Wheel Disc Brakes

Traction Control

Stability Control

Hands Free Device

SEATS

Leather Seats

Heated Seats

WHEELS

20" Or Larger Wheels

PAINT

Three Stage Paint

OTHER

Fog Lamps

TRUCK

Rear Step Bumper

Power Rear Window

Get live updates at www.carwise.com/e/4H7yfm

Preliminary Estimate

Customer: LEMON, JERRY

008 DODG Ram 1500 Laramie Quad Cab 140.5" WB 4WD 4D P/U 8-5.7L Gasoline SMPI orange

Line	Oper	Description	Part Number	Qty	Extended Price \$	Labor	Paint
1		PICK UP BOX				0.3	
2	R&I	R&I tailgate assy				10.0	2.7
3	*	Rpr LT Side panel					1.9
4		Add for Three Stage					0.3
5	Refn	Fuel door					0.1
6		Add for Three Stage					
7		REAR LAMPS					
8	**	Repl A/M LT Tail lamp	55277303AC	1	49.22	0.3	
9		REAR BUMPER				0.8	
10	R&I	R&I bumper assy					
11		VEHICLE DIAGNOSTICS					
12	*	Rpr Pre-repair scan				m 0.5 M	
13	*	Rpr Post-repair scan				m 0.5 M	
14	#	Subl Hazardous Waste		1	3.50 T		
15	#	Cover Car		1	10.00 T		
16	#	Repl Corrosion Protection		1	5.00		0.8
17	#	Rpr Wet sand and buff					1.0
18	#	Refn Color Tint					
19	#	Body Pull and Weld Tabs		1		4.0	
SUBTOTALS					67.72	16.4	6.8

ESTIMATE TOTALS

Category	Basis	Rate	Cost \$
Parts			54.22
Body Labor	15.4 hrs @	\$ 80.00 /hr	1,232.00
Paint Labor	6.8 hrs @	\$ 80.00 /hr	544.00
Mechanical Labor	1.0 hrs @	\$ 129.00 /hr	129.00
Paint Supplies	6.8 hrs @	\$ 58.00 /hr	394.40
Body Supplies	11.3 hrs @	\$ 10.00 /hr	113.00
Miscellaneous			13.50
Subtotal			2,480.12
Sales Tax	\$ 2,480.12 @	7.9000 %	195.93
Grand Total			2,676.05

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.

Preliminary Estimate

Owner: LEMON, JERRY

2023 DODG Ram 1500 Laramie Quad Cab 140.5" WB 4WD 4D P/U 8-5.7L Gasoline SMPI orange

THIS ESTIMATE HAS BEEN PREPARED BASED ON THE USE OF ONE OR MORE REPLACEMENT PARTS SUPPLIED BY A SOURCE OTHER THAN THE MANUFACTURER OF YOUR MOTOR VEHICLE. WARRANTIES APPLICABLE TO THESE REPLACEMENT PARTS ARE PROVIDED BY THE MANUFACTURER OR DISTRIBUTOR OF THE REPLACEMENT PARTS RATHER THAN BY THE MANUFACTURER OF YOUR MOTOR VEHICLE.

Estimate based on MOTOR CRASH ESTIMATING GUIDE and potentially other third party sources of data. Unless otherwise noted, (a) all items are derived from the Guide DE3TM06, CCC Data Date 01/17/2024, and potentially other third party sources of data; and (b) the parts presented are OEM-parts. OEM parts are manufactured by or for the vehicle's Original Equipment Manufacturer (OEM) according to OEM's specifications for U.S. distribution. OEM parts are available at OE/Vehicle dealerships or the specified supplier. OPT OEM (Optional OEM) or ALT OEM (Alternative OEM) parts are OEM parts that may be provided by or through alternate sources other than the OEM vehicle dealerships with discounted pricing. Asterisk (*) or Double Asterisk (**) indicates that the parts and/or labor data provided by third party sources of data may have been modified or may have come from an alternate data source. Tilde sign (~) items indicate MOTOR Not-Included Labor operations. The symbol (<>) indicates the refinish operation WILL NOT be performed as a separate procedure from the other panels in the estimate. Non-Original Equipment Manufacturer aftermarket parts are described as Non OEM, A/M or NAGS. Used parts are described as LKQ, RCY, or USED. Reconditioned parts are described as Recond. Recored parts are described as Recore. NAGS Part Numbers and Benchmark Prices are provided by National Auto Glass Specifications. Labor operation times listed on the line with the NAGS information are MOTOR suggested labor operation times. NAGS labor operation times are not included. Pound sign (#) items indicate manual entries.

Some 2023 vehicles contain minor changes from the previous year. For those vehicles, prior to receiving updated data from the vehicle manufacturer, labor and parts data from the previous year may be used. The CCC ONE estimator has a list of applicable vehicles. Parts numbers and prices should be confirmed with the local dealership.

The following is a list of additional abbreviations or symbols that may be used to describe work to be done or parts to be repaired or replaced:

SYMBOLS FOLLOWING PART PRICE:

m=MOTOR Mechanical component. s=MOTOR Structural component. T=Miscellaneous Taxed charge category. X=Miscellaneous Non-Taxed charge category.

SYMBOLS FOLLOWING LABOR:

D=Diagnostic labor category. E=Electrical labor category. F=Frame labor category. G=Glass labor category. M=Mechanical labor category. S=Structural labor category. (numbers) 1 through 4=User Defined Labor Categories.

OTHER SYMBOLS AND ABBREVIATIONS:

Adj.=Adjacent. Align.=Align. ALU=Aluminum. A/M=Aftermarket part. Blnd=Blend. BOR=Boron steel. CAPA=Certified Automotive Parts Association. D&R=Disconnect and Reconnect. HSS=High Strength Steel. HYD=Hydroformed Steel. Incl.=Included. LKQ=Like Kind and Quality. LT=Left. MAG=Magnesium. Non-Adj.=Non Adjacent. NSF=NSF International Certified Part. O/H=Overhaul. Qty=Quantity. Refn=Refinish. Repl=Replace. R&I=Remove and Install. R&R=Remove and Replace. Rpr=Repair. RT=Right. SAS=Sandwiched Steel. Sect=Section. Subl=Sublet. UHS=Ultra High Strength Steel. N=Note(s) associated with the estimate line.

Preliminary Estimate

Customer: **LEMON, JERRY**

2008 DODG Ram 1500 Laramie Quad Cab 140.5" WB 4WD 4D P/U 8-5.7L Gasoline SMPI orange

CCC ONE Estimating - A product of CCC Intelligent Services Inc.

The following is a list of abbreviations that may be used in CCC ONE Estimating that are not part of the MOTOR CRASH ESTIMATING GUIDE:

BAR=Bureau of Automotive Repair. EPA=Environmental Protection Agency. NHTSA= National Highway Transportation and Safety Administration. PDR=Paintless Dent Repair. VIN=Vehicle Identification Number.

Preliminary Estimate

Customer: LEMON, JERRY

2008 DODG Ram 1500 Laramie Quad Cab 140.5" WB 4WD 4D P/U 8-5.7L Gasoline SMPI orange

PARTS SUPPLIER LIST

Line	Supplier	Description	Price
8	HeadlightsDepot 110 Amor Ave. Carlstadt NJ 07072 (855) 544-4875	#CS255-U000L A/M LT Tail lamp Quote: 1755815701 Expires: 02/06/24	\$ 49.22

SCHOK'S AUTO BODY
5701 WEST BURLEIGH STREET
MILWAUKEE, WI 53210
PHONE: 414-873-9944 FAX: 414-873-5040
FED TAX ID# 39-1330692

*** PRELIMINARY ESTIMATE ***

01/29/2024 03:40 PM

Owner

Owner: Jerry Lemon
Address:

Work/Day:

Control Information

Loss Date/Time: 03:38 PM

Loss Type:

Inspection

Inspection Date: 01/29/2024 03:41 PM
Primary Impact: Left Rear Corner

Inspection Type:
Secondary Impact:

Assigned Date/Time: 03:38 PM
First Contact Date/Time: 03:38 PM
Second Contact Date/Time: 03:38 PM

Received Date/Time: 03:38 PM
Appointment Date/Time: 03:38 PM

Appraiser Name: Mike Schmidt
Email: Schoksauto@gmail.com

Appraiser License #2 :

Repairer

Repair Start Date/Time: 03:38 PM
Repair Complete Date/Time: 03:38 PM
Target Complete Date/Time: 03:38 PM

Vehicle Drop Off Date/Time: 03:38 PM
Vehicle Pick Up Date/Time: 03:38 PM
Days To Repair: 7

Vehicle

2008 Dodge Ram 150/1500 Sport 4 DR Ext Cab Short Bed
8cyl Gasoline 5.7 HEMI
5 Speed Automatic

Lic Expire:
Veh Insp# :
Condition:
Ext. Color: SUNBURST ORANGE PRL
Ext. Refinish: Two-Stage
Ext. Paint Code: PV6

VIN: 1D7HU18218S600650
Mileage Type: Actual
Code: N8372A
Int. Color: Medium Slate Gray
Int. Refinish: Two-Stage
Int. Trim Code: D5

Options - AudaVIN Information Received

4-Wheel Drive
Anti-Lock Rear Brakes
Automatic Trans
Camper/Towing Package
Color-Keyed Bumper(s)
Dual Airbags

AM/FM CD Player
Auto Locking Hubs (4WD)
Bed Liner
Center Console
Color-Keyed Grille
Electronic Transfer Case

Air Conditioning
Automatic Dimming Mirror
Bodyside Moldings
Chromed Alloy Wheels
Cruise Control
Fog Lights

Power Door Opener
 Power Window Visor Mirror
 Power Steering Wheel
 Power Head Console
 Power Door Locks
 Power Steering
 Power Sliding Rear Window
 Split Folding Rear Seat
 Theft Deterrent System
 Trailer Hitch
 Xtra Storage Compartment(s)

Heated Power Mirrors
 Intermittent Wipers
 Lighted Entry System
 Power Adjustable Pedals
 Power Drivers Seat
 Power Windows
 Remote Starter
 Split Front Bench Seat
 Tilt Steering Wheel
 Trip Computer

Heavy Duty Cooling
 Keyless Entry System
 Limited Slip Differential
 Power Brakes
 Power Moonroof
 Privacy Glass
 Sirius Satellite Radio
 Tachometer
 Tinted Glass
 Velour/Cloth Seats

AudaVIN options are listed in bold-italic fonts

Damages

Line	Op	Guide	MC	Description	MFR.Part No.	Price	ADJ%	B%	Hours	R
Bed										
1	I	315		Panel,Bedside Outer LT	Repair				15.0*	SM
2	L	315	13	Panel,Bedside Outer LT	Refinish				4.2	RF
					3.0 Surface					
					0.6 Two-stage setup					
					0.6 Two-stage					

Rear Bumper

3	RI	565		Bumper Assy,Rear Step	R & I Assembly				0.6	SM
---	----	-----	--	-----------------------	----------------	--	--	--	-----	----

Rear Body, Lamps And Floor Pan

4	E	533	46	Taillamp Assembly LT	55277303AC	\$132.00			0.3	SM
4				Items						

MC Message

13	INCLUDES 0.6 HOURS FIRST PANEL TWO-STAGE ALLOWANCE
46	PRINTABLE ALTERNATE PARTS COMPARE

Estimate Total & Entries

OEM Parts		\$132.00	
Paint & Materials	4.2 Hours @ \$50.00	\$210.00	
Parts & Material Total			\$342.00
Tax on Parts & Material	@ 7.900%		\$27.02

Labor	Rate	Replace Hrs	Repair Hrs	Total Hrs	
Sheet Metal (SM)	\$70.00	0.9	15.0	15.9	\$1,113.00
Mech/Elec (ME)	\$125.00				
Frame (FR)	\$110.00				
Refinish (RF)	\$70.00	4.2		4.2	\$294.00

Labor Total		20.1 Hours	\$1,407.00
Tax on Labor	@ 7.900%	\$111.15	
Gross Total			\$1,887.17
Net Total			\$1,887.17

Alternate Parts Y/01/00/00/01/01 Cumulative 01/00/00/01/01 Zip Code: 53210 Default
 Rate Name Default

NOTES:

J9CIG5WR4W

CRASH REPORTS

Crash reports can be requested by contacting LexisNexis or the Wisconsin Department of Transportation (DOT) by using the below methods (to request a crash report you must know the date and a driver's license number for one of the parties involved; or the report number; or the WisDOT document form number):

1. LexisNexis

- Online: <https://police-reports.lexisnexis.com/>
- Support line: (866) 215-2771

2. Wisconsin Department of Transportation

- Online: <http://www.wisconsin-dmv.gov>
- Phone: (608) 266-8753

OTHER DRIVER'S INFORMATION:

NAME: _____

ADDRESS: _____

PHONE NUMBER: _____

INSURANCE COMPANY: _____

**IF YOUR VEHICLE WAS TOWED BY OUR
DEPARTMENT CONTRACTOR, IT IS AT THE
CITY OF MILWAUKEE TOW LOT
3811 WEST LINCOLN AVENUE
TELEPHONE (414) 286-2700**

YOUR TOW NUMBER: _____

TOW LOT HOURS:	MONDAY — FRIDAY	7 a.m. - 6 p.m.
	SATURDAY	7:30 a.m. - 3 p.m.
	SUNDAY	7:30 a.m. - 12 p.m.

**MILWAUKEE POLICE DEPARTMENT
POLICE ADMINISTRATION BUILDING
749 WEST STATE STREET**

**VICTIM / WITNESS
REFERRAL MEMO**

DATE _____ **20** _____

**TO ENTER THE BELOW LISTED OFFICES,
REPORT TO 951 North James Lovell Street:**

- ☐ **City Attorney** Room 205
- ☐ **Forensics Division** Room 330
- ☐ **Homicide Division** Room 438
- ☐ **Sensitive Crimes Division** 619 W. Walnut Street

Name: Defendant/Subject _____

Date of Event: _____

Citation/Case Number: _____

Name: Police Officer & Employee I.D.# _____

Date of Review: _____

- ☐ **District Attorney 949 N. 9th St.** Room 110
- ☐ **Municipal Court 951 N. James Lovell Street**
- ☐ **Vel Phillips Juvenile Justice Center**
10201 W. Watertown Plank Rd.
- ☐ **Other** _____

D.A. SENSITIVE CRIMES UNIT....949 N. 9TH STREET

☐ **Victim Waiting Room #102**

DOMESTIC VIOLENCE UNIT-Intimate Partner Violence
☐ **Victim/Witness-Sojourner Family Peace Center**
619 West Walnut Street

Will officer be present? ☐ **Yes** ☐ **No**

Name of person or officer to contact: _____

Regarding _____

Date _____ **20** _____ **Time** _____ **A.M./P.M**

Issued By: _____

Rank _____ **Work Loc.** _____