

CITY OF WAUWATOSA

7725 W. North Avenue

Wauwatosa, WI 53213

ATTN: CITY ATTORNEY

Received by

AUG 22 2023

City Clerk's Office

NOTICE OF CIRCUMSTANCES OF CLAIM

Name: Randall C. Wigner
Address: [REDACTED]
Phone: [REDACTED]

Incident/Accident Information

Date: 8-19-23
Time: 21:18 hrs.
Place: N 108th St / W. Blue Mound Rd.

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.

MY WIFE & I GOT OFF OF I 94 TO HWY 100; STOPPED AT RED LIGHT, SAW 1 CAR
SPEED BYE + 4 POLICE CARS. THE WE GOT THE GREEN LIGHT TO MAKE LEFT TURN
TO HWY 100 NORTH TO BLUEMOUND; WITH IN ONE BLOCK, WE WENT OVER SPEED
STICKS WE DID EVEN SEE, I ENDED UP WITH TWO FLAT TIRES, HAD TO HAVE CAR
TOWED + BUY TWO NEW TIRES BECAUSE OF SPEED STICKS ON HWY 100.
THIS BAG CONTAINS ALL STICKS IN MY CAR TIRES, THIS ALL ~~WAS~~ STARTED
ABOUT 9:10 PM OR A LITTLE AFTER, ON AUG. 19-2023

Signed: Randall Wigner

Date: Aug 22 - 2023

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 \$ 473.00.

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

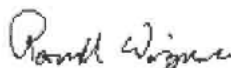
Signed: Randall Wigner

Date: 8-22-23

Address: [REDACTED]

Invoice**0000036369****08/21/2023****Customer Info:**
RANDALL WIZNER**Customer #:** 6855002227**Goodyear**
Auto Service Centers 6855645 Main St
Brookfield, WI 53005-4702
262-786-9514
Federal Tax Id 340253240**Vehicle Info:**
Year: 2007
Make: FORD
Model: FIVE HUNDRED
Color:
License/State: RWSW1 / WI
VIN: 1FAHP24187G123176**Operator:** Michael Netteshei**Odom I/O:** 44653/44653
Vehicle In: 08/21 10:57 AM
Vehicle Out: 08/21 12:32 PM

PRODUCT	DESCRIPTION	QTY	PART	LABOR	TOTAL
413546582	215/60R17 96H SL ASSURANCE COMFORTDRIVE (1, 2) 14BKTMM1R1823	2.00	190.99	0.00	381.98
044555000	TIRE INSTALLATION PACKAGE W/TPMS INCLUDES: MOUNTING & INSTALLATION, LIFETIME BALANCE, LIFETIME ROTATIONS, TPMS REBUILD KIT, & FREE ALIGNMENT CHECK.	2.00	12.00	18.00	60.00
21060	Myers 6-207 TPMS Snap In	1.00			
071000000	SCRAP TIRE DISPOSAL AUTO	2.00	4.25	0.00	8.50

Signature:**Parts Total***
Labor Total414.48
36.00**State Tire Fee** 0.00
Sub Total 450.48
Taxable Amount 450.48
Sales Tax (5.00%) 22.52**Cash:** **Check:** **Credit:** 473.00 **Debit:** **AR:** **Corp Ref:****MasterCard - Amount Remitted** 473.00**Total Deposits on Order** 0.00**Invoice Total** 473.00**Salesperson** **Technician** **Services**

Michael Nettesheim Fernando Reyes 044555000, 071000000, 413546582

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) _____

Goodyear, its successors and service providers may use your information; to send service updates and reminders; to request feedback; to communicate with you; for marketing promotional and commercial purposes; for data analysis; and as required by law.

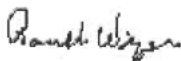
Call 1-800-344-9859 to unsubscribe. Privacy Policy: <https://www.goodyearautoservice.com/en-US/privacy-policy>

** ALL PARTS ARE NEW UNLESS OTHERWISE SPECIFIED. **

- SEE REVERSE SIDE FOR IMPORTANT SAFETY WARNING AND WARRANTY INFORMATION

Invoice**0000036369****08/21/2023****Goodyear
Auto Service Centers 6855**645 Main St
Brookfield, WI 53005-4702
262-786-9514
Federal Tax Id 340253240**Operator:** Michael NettesheiMERCHANT# 000906855
PAYMENT VALUE: \$473.00
TVR 8000008000
TSI 6800
AID#: A0000000041010
APPL LABEL: MasterCard
DATA SOURCE: Chip
CARD#: MasterCard *****5333

Signature:

Tread Depth L/F 11/32 R/F 11/32
Tread Depth L/R 11/32 R/R 11/32**GUEST DECLINED RECOMMENDATIONS LISTED BELOW**

PRODUCT	DESCRIPTION	QTY	PART	LABOR	TOTAL
092209000	ROAD HAZARD PROTECTION (FREE REPLACEMNT)	1.00	0.00	0.00	0.00
Total of Declined Services (Excl Tax)					0.00