

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

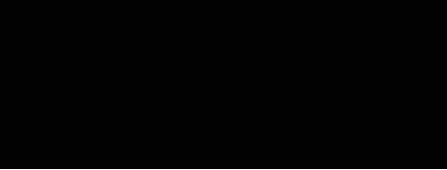
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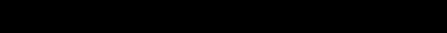
JUL 17 2026

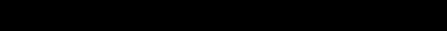
City Clerk's Office

NOTICE OF CIRCUMSTANCES OF CLAIM

Name: Adam Livingston

Address: 

Phone: 

Email: 

Incident/Accident Information

Date: 6/14/26

Time: ~5:30 PM

Place: Front yard

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.

Wind caused a large branch of the tree in front
of our house to fall onto the front of the house.
The branch split at a spot of damage along the
trunk. Damage to our gutters and fascia was
caused when the tree hit the house. The tree was
a city tree. See attached images.

Signed: Adam Livingston

Date: 7/17/26

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 \$ 650.00.

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

Signed: Adam Livingston

Date: 7/17/26

Address: 







TC ALUMINUM

Tim Chandek
P.O. Box 181
Hales Corners, WI 53130
414-405-4653

**PROPOSAL AND
ACCEPTANCE**

PROPOSAL SUBMITTED TO Adam Livingston		PHONE [REDACTED]	DATE 7/3/2026
STREET [REDACTED]		JOB NAME	
CITY, STATE AND ZIP CODE Wauwatosa, WI		JOB LOCATION [REDACTED]	
ARCHITECT	DATE OF PLANS		JOB PHONE

We hereby submit specifications and estimates for:

Removal of front damaged gutters, as needed (2 L-shaped sections)

Installation of new 6 inch Seamless Aluminum Gutters 032 metal thickness Color: White

--Reconnect to existing miter corners - riveted and sealed with solar seal

--New one piece inside miter corner style for strength and longevity

\$ 650

- All Gutters installed using walk planks-Gutters are pitched to downspouts using high quality level
-Brackets are installed every 18 inches -All Screws used are self-sealing 1.5 inch pole barn screws
ONE TIME TRANSFERABLE 10 yr service Warranty - All Clean up & Removal of Scrap

We Propose hereby to furnish material and labor — complete in accordance with above specifications, for the sum of:

Payment to be made as follows: _____ dollars (\$ _____).

Paid In Full Upon Completion and Satisfaction

All material is guaranteed to be as specified. All work to be completed in a workman-like manner according to standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance. Our workers are fully covered by Workmen's Compensation Insurance.

Authorized Signature _____ **30**

Note: This proposal may be withdrawn by us if not accepted within _____ days.

Acceptance of Proposal - The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Signature _____

Date of Acceptance _____ Signature _____