

PROCESS SERVER
TIME _____:_____:____ AM/PM DATE _____
 PERSONAL SUBSTITUTE
 POSTED CORPORATE

**NOTICE OF CIRCUMSTANCES OF CLAIM
PURSUANT TO WIS.STATS §893.80(1d)(a)**

TO: CITY CLERK
CITY OF WAUWATOSA
7725 W NORTH AVE
WAUWATOSA WI 53213

Received by
APR 27 2023
City Clerk's Office

PLEASE TAKE NOTICE Pursuant to Wisconsin Statute § 893.80(1d)(a) that the undersigned will be making a claim for injuries and damages against you by virtue of the reasons set forth hereafter:

NAME OF CLAIMANT:

ANDREA WILKINS

DATE AND TIME OF INJURIES SUSTAINED:

January 4, 2023, approximately 1:00 p.m.

PLACE OR LOCATION WHERE INJURY OR DAMAGES OCCURRED:

On N 90th Street, just south of W. Clarke St., Wauwatosa

MANNER IN WHICH DAMAGES OR INJURIES WERE RECEIVED OR OCCURRED:

Claimant was the operator of a vehicle traveling northbound on N. 90th Street, when a City of Wauwatosa garbage truck, operated by City employee Hayden Howard Eggert, pulled away from the curb into the claimant's lane of travel to travel northbound on N. 90th Street, striking the claimant's vehicle in the through lane of traffic. [See Police Report, attached]

GROUND ON WHICH CLAIM IS MADE:

Negligence on the part of the City of Wauwatosa by its agents, servants, and employees including but not limited to negligent hiring, training or supervision of the City of Wauwatosa employee, failure to yield the right of way to traffic in the through lane, failure to see another vehicle in plain sight and improper management and control of the City of Wauwatosa garbage truck.

GENERAL DESCRIPTION OF INJURIES AND DAMAGES:

PERSONAL INJURIES: Neck and Back injuries

MEDICAL EXPENSES

LOST WAGES

PLEASE TAKE NOTICE that satisfaction for such injuries or damages will be claimed, but that the amount of said demand is **UNKNOWN** at the present time.

Dated at Milwaukee, Wisconsin, this 24th day of April 2023.

Claimant: **ANDREA T WILKINS**



ACTION LAW OFFICES, S.C.

BY:

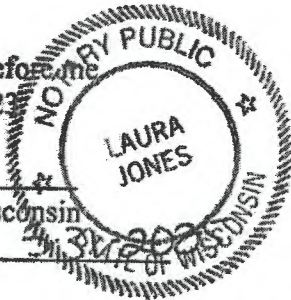
A handwritten signature in black ink, appearing to read "S. Gabert", written over a horizontal line.

STEVEN C. GABERT
Attorney for the Claimant
933 North Mayfair Road
Suite 307
Milwaukee, Wisconsin 53226
Telephone: (414) 456-1111

Subscribed and sworn to before me
this 24 day of April 2023

A handwritten signature in black ink, appearing to read "Laura Jones", written over a horizontal line.

Notary Public: State of Wisconsin
My Commission Expires: 3/31/2023



THIS IS A NOTICE OF CIRCUMSTANCES OF CLAIM PURSUANT TO WISCONSIN STATUTES §893.80(1d)(a); NOT THE CLAIM ITSELF PURSUANT TO WISCONSIN STATUTES §893.80(1d)(b), THAT IS ANTICIPATED TO BE FILED

WHEN THE FULL DAMAGES CAN BE KNOWN AND THE CLAIM IS READY.

1RL18VN169
23-000238

WISCONSIN MOTOR VEHICLE
CRASH REPORT

WAUWATOSA POLICE DEPARTMENT
1700 NORTH 116TH STREET
WAUWATOSA, WI 53226
(414) 471-8430

1RL18VN169

Document Number Override		Primary Crash Document #		Agency Crash Number		Investigating Officer/Deputy PATROLMAN SYED MUDASSAR	
Crash Date 01/04/2023		Crash Time 01:00 PM		Date Arrived 01/04/2023		Time Arrived 01:22 PM	
Date Notified 01/04/2023		Time Notified 01:03 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	
<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 1 (GARBAGE TRUCK) WAS PICKING UP GARBAGE IN THE 2500 BLOCK OF N 90TH ST. UNIT 2 WAS TRAVELING NORTHBOUND IN THE 2500 BLOCK OF N 90TH ST. UNIT 1 STRUCK UNIT 2 AS IT WAS PASSING A PARKED CAR WHILE PICKING UP GARBAGE.

UNIT 1 DRIVER STATED HE DIDN'T SEE UNIT 2.

UNIT 2 DRIVER STATED UNIT 1 WAS STOPPED AND PICKING UP GARBAGE.

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Location

ON N 90TH ST 59 FT S OF W CLARKE ST IN THE CITY OF WAUWATOSA IN MILWAUKEE COUNTY	Latitude 43.065807371	Longitude -88.025019406
	X Coordinate 416541.28125	Y Coordinate 4768632.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 01 - ANGLE		Light Condition DAYLIGHT	
Road Surface Condition(s) DRY		Roadway Factor(s) NONE	
Environment Factor(s) NONE			
Weather Condition(s) CLOUDY			
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 B CLASS		Unit Type TRUCK	
	Vehicle Type STRAIGHT TRUCK (INSERT TRUCK)				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 NORTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 25	Total Lanes 2	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat TRUCK OR TRUCK COMBINATION > 10,000LBS GVWR/GCWR					

UNIT VEHICLE 01	Vehicle				
	License Plate Number [REDACTED]		Plate Type MNC - MUNICIPAL CYCL	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number [REDACTED]		Make PETERBILT MOTORS CO	Year 2021	Model NO DATA FO
	Color WHI - WHITE		Body Style GG - GARBAGE OR REFUSE		Bus Use
	Initial Contact Point 11 - LEFT FRONT CORNER		Vehicle Damage 00 - NO DAMAGE		
Extent Of Damage NO DAMAGE					



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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By DENNIS TOWING	
	What Driver Was Doing ENTERING TRAFFIC LANE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions LOOKED BUT DID NOT SEE			
UNIT 01	Owner Name WAUWATOSA (414) 471-8422		Owner Address 7725 W NORTH AVE WAUWATOSA, WI 53213 , US	
	Sequence Of Events			
UNIT 01	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
	Event			
UNIT 01	Policy Holder			
	Insurance Company CITIES-&-VILLAGES-MUTUAL-INS-CO		Government WAUWATOSA	
UNIT INDIVIDUAL	Individual			
	Driver [REDACTED]		Citations Issued 0	Sex MALE
	Address [REDACTED]		Date of Birth [REDACTED]	Race WHITE
	[REDACTED]		Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
UNIT 001	Safety Equipment		Safety Equipment	
	On Duty Crash EMT/FIRST-RESPONDER		SHOULDER & LAP BELT	
	Row 01 - FRONT ROW	Seat Position 09 - RIGHT	Helmet Compliance	
	Helmet Use		Tint Compliance	
	Eye Protection		Airbag NON DEPLOYED	
	Injury Injury Severity NO APPARENT INJURY		[REDACTED]	
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED	
Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #
Hospital		Date of Death		Time of Death
Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				

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Truck Bus or HazMat NO			
Vehicle			
02 UNIT VEHICLE	License Plate Number	Plate Type	St
	Vehicle Identification Number	Make	Year
	Color	Body Style	Country of Issuance
	Initial Contact Point	Vehicle Damage	Model
	Extent Of Damage	05 - RIGHT REAR CORNER, 06 - REAR	Bus Use
	Towed Due To Damage	Vehicle Removed By	
	What Driver Was Doing	Vehicle Factors	
Driver Prior Action Other	NOT APPLICABLE		
Driver Actions NO CONTRIBUTING ACTION			
02 UNIT VEHICLE	Owner Name AHILSA M BAILEY	Owner Address	
Sequence Of Events			
01	Event MOTOR VEH IN TRANSPORT		
02	Event		
03	Event		
04	Event		
Policy Holder			
Insurance Company FARMERS-INS-CO-INC		Individual AHILSA BAILEY	
Individual			
01 UNIT INDIVIDUAL	Driver ANDREA WILKINS	Citations Issued 0	Sex FEMALE
		Date of Birth	Race BLACK/AFRICAN AMERICAN
	Address	Driver License Number	
		STATE: WISCONSIN COUNTRY: UNITED STATES	
Safety Equipment		On Duty Crash	Safety Equipment
Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
Helmet Use		Helmet Compliance	

