| DATE | RECEIVED | 7-23-2024 | |
|------|----------|-----------|--|
| | | | |

| RECEIVED BY | MKC | |
|-------------|-------|--|
| CIRTM NO | 6-24- | |

CITY OF SHEBOYGAN NOTICE OF DAMAGE OR INJURY

INSTRUCTIONS: TYPE OR PRINT IN BLACK INK

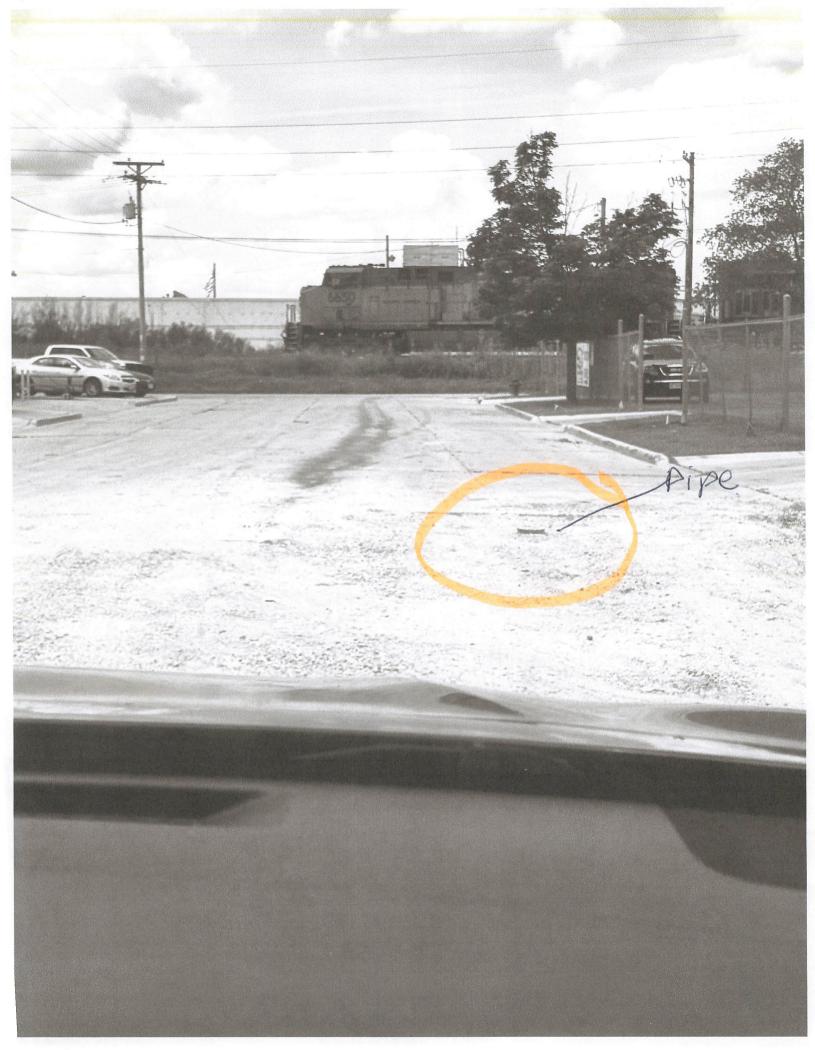
- 1. Notice of death, injury to persons or to property must be filed not later than 120 days after the occurrence.
- 2. Attach and sign additional supportive sheets, if necessary.

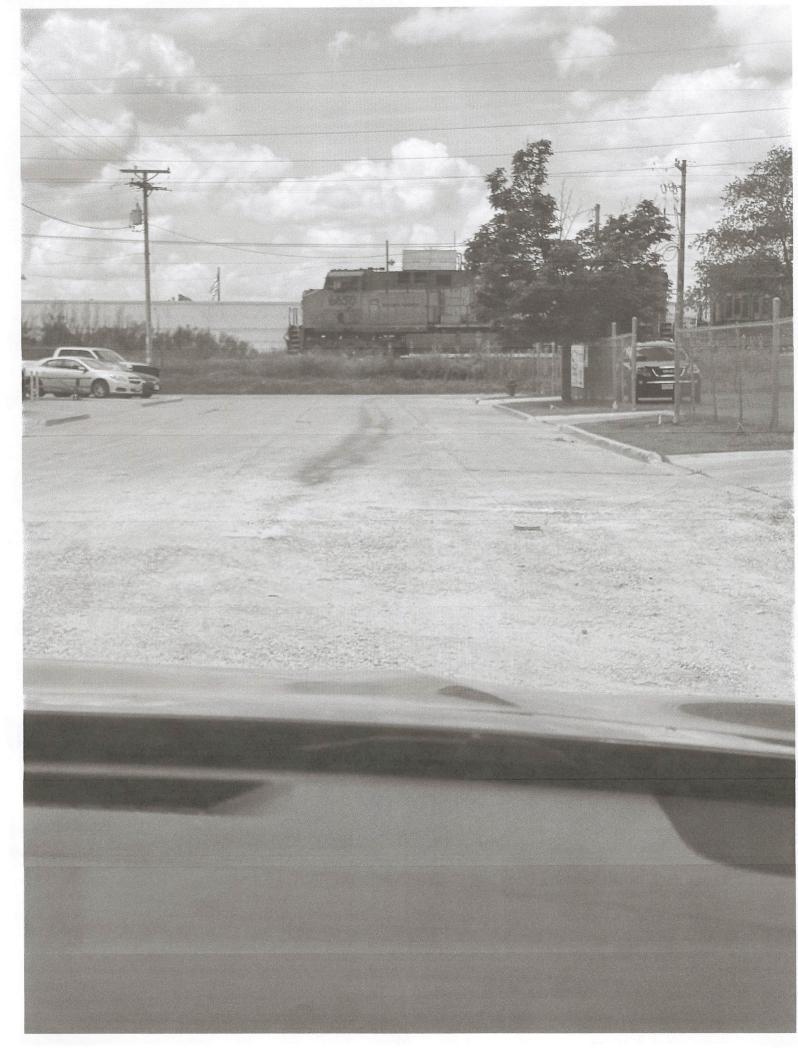
| 3. | This notice form must be signed and filed with the Office of the City Clerk. |
|----|---|
| 4. | TWO ESTIMATES MUST BE ATTACHED IF YOU ARE CLAIMING DAMAGE TO A VEHICLE. |
| 1. | Name of Claimant: Cheyanne Pelzek |
| 2. | Home address of Claimant: 1008 Huron Avenue |
| 3. | Home phone number: 920-226-7372 |
| 4. | Business address and phone number of Claimant: |
| | |
| 5. | When did damage or injury occur? (date, time of day) 7-21-2024 at 11:40am |
| 6. | Where did damage or injury occur? (give full description) Approx 2208 S194NSt |
| | (Dakland are between S19th and Saux Frail 180) |
| | |
| 7. | How did damage or injury occur? (give full description) Road Construction |
| | in process on Dakland Olve, pipes had just been replaced |
| | torground underground no barracades were present and pipe |
| | wassticking out of the ground fair enough thatwhen I drove overi |
| 8. | If the basis of liability is alleged to be an act or omission of a city officer of b |
| | employee, complete the following: |
| | (a) Name of such officer or employee, if known: |
| | (b) Claimant's statement of the basis of such liability: |
| | |
| | |
| 9. | If the basis of liability is alleged to be a dangerous condition of public property, complete the following: |
| | (a) Public property alleged to be dangerous: CityStreet under CONStruction |
| | ONDIDE UNMOUTED NO road CONSTRUCTION SIGNS, PIPE Was not barow Very United With large aligs around pipe (used pictures) (b) Claimant's statement of basis for such liability: |
| 0 | gligence on City of Sheboygan street department and contracted orbitraction company doing the road work |

| 10. Give a description of the injury, property damage or loss, so far as is known at this time. (If there were no injuries, state "NO INJURIES"). |
|--|
| Damage to underminage of car including transmission, engine |
| oil pan pand and aroun and Clavel assembly both sides (see |
| 11. Name and address of any other person injured: |
| |
| 12. Damage estimate: (You are not bound by the amounts provided here.) |
| Auto: \$ 9974, 73 |
| Property: \$ |
| Personal injury: \$ |
| Other: (Specify below sapprox \$1000 to date |
| TOTAL \$ 10, 924. 13 approx to date |
| Damaged vehicle (if applicable) |
| Make: Hyundai Model: Sonata Year: 2015 Mileage: approx 94,000 |
| Names and addresses of witnesses, doctors and hospitals: William Leatherberry 830 & W Water St apt # 721 sheboygor 53081 |
| FOR ALL ACCIDENT NOTICES, COMPLETE THE FOLLOWING DIAGRAM IN DETAIL. BE SURE TO INCLUDE NAMES OF ALL STREETS, HOUSE NUMBERS, LOCATION OF VEHICLES, INDICATING WHICH IS CITY VEHICLE (IF APPLICABLE), WHICH IS CLAIMANT VEHICLE, LOCATION OF INDIVIDUALS, ETC. |
| NOTE: If diagrams below do not fit the situation, attach proper diagram and sign. |
| |
| |
| FOR OTHER ACCIDENTS |
| CURB |
| PARKWAY SIDEWALK |
| SIGNATURE OF CLAIMANT Chelyonne Pyll Date 7-23-7024 |

| DATE RECEIVED | | RECEIVED BY | |
|---|-----------|-----------------------|-------------------|
| | | CLAIM NO. | |
| | AT 5 80 4 | | |
| | CLAIM | | # |
| Claimant's Name: Chenne Pelzek | | | \$\$19974.73 |
| Claimant's Address: 1008 Huron Ave St | neb WI | Property | \$ |
| | | Personal Injury | \$ |
| Claimant's Phone No. 920-226-737 | 7 | Other (Specify below) | sappox \$1000 tod |
| | | lost wages TOTAL | \$10,924,73 |
| | | | abblex to |
| PLEASE INCLUDE COPIES OF ALI | BILLS, | INVOICES, ESTIMATE | s, etc. date |
| | | | |
| WARNING: IT IS A CRIMINAL | OFFENSE | TO FILE A FALSE C | LAIM. |
| (WISCONSIN | STATUTES | 943.395) | |
| | | | |
| The undersigned hereby makes | | | |
| arising out of the circumstances Injury. The claim is for relief in | | | |
| amount of \$ 10,924.73. | | | |
| | | | |
| | | | |
| | | | |
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| | | | |
| | | | |
| STENED CALLANDA OALAM | | DATE: 7- 23- 2 | N74 |
| SIGNED Cheyane Pelek | | | 04 |
| ADDRESS: 1008 Huron Aye Shel | DOUGAY | ntul 53081 | |
| | 70 | | |

control Particular Circles X Vode. Paricade Roadis dug out 10-12" die to signs Pipel of Bustoce







Monday intorning after speaking with Construction Company + City of Sheboygan - Construction Company is Covering w/gravel/dirfyou can see where they are trying to cover up pipe and ful in low spots



Van Wyk Auto

1521 N 13th St/1821 Cooper Ave Sheboygan, WI 53083 (920) 208-7699 vanwykauto@gmail.com https://www.vanwykautowi.com

Estimate for RO #33321

Service Advisor: Bill Rood Date Created: 07/22/24 at 12:10 PM CDT Client: Cheyenne Pelzek Vehicle: 2015 Hyundai Sonata Sport

Cheyenne Pelzek 1008 Huron Avenue Sheboygan, WI 53081 Phone: (920) 226-7372 2015 Hyundai Sonata Sport 2.4L 4Cyl GAS Naturally Aspirated

VIN: 5NPE34AF2FH186952

License: TEMP Color: Silver

Odometer In: 94203 / Out: 94203

RO #33321

Time-In: 07/22/24 at 12:10 PM CDT

Save Parts: No

Client concerns:

• Drove over a pipe and it stuck in the bottom of the car

| 1 - inspection | | | |
|----------------------|--|---|------------|
| Labor: | diag | | \$127.42 |
| APPROVE or | DECLINE | Subtotal \$127.42 + est. Tax \$7.01 | \$134.43 |
| 2 - Drove over a pip | e and it stuck in the bottom of the car | | |
| Labor: | Remove & Replace Transmission Assembly | | \$1,209.22 |
| | Remove & Replace Trans Mount | | \$182.21 |
| | Remove & Replace CV Axle Assembly (Both Sides) | | \$265.03 |
| | Remove & Replace Lower Engine Oil Pan Gasket | | \$231.90 |
| Parts: | CV Axle | 1 | \$239.68 |
| | CV Axle | 1 | \$303.21 |
| | Engine Torque Strut Mount | 1 | \$206.12 |
| | Engine Oil Pan | 1 | \$124.44 |
| | Engine Oil Drain Plug | 1 | \$24.08 |
| | Automatic Transmission Assembly | . 1 | \$6,581.45 |
| APPROVE or | DECLINE | Subtotal \$9,367.34 + est. Tax \$515.20 | \$9,882.54 |
| 3 - lof | | | |
| Labor: | Lube, oil, and filter | | \$39.99 |
| Parts: | OIL | | 5 \$0.00 |
| | OIL FILTER | | 1 \$0.00 |
| APPROVE or | DECLINE | Subtotal \$39.99 + est. Tax \$2.20 | \$42.19 |
| 4 - front brakes | | | |
| Labor: | Replace front disc pads and rotors | | \$186.63 |
| Parts: | Disc Brake Pad Set | | 1 \$79.99 |
| | Disc Brake Rotor | | 2 \$127.00 |
| APPROVE or | DECLINE | Subtotal \$393.62 + est. Tax \$21.65 | \$415.27 |
| 5 - rear brakes | | | |
| Labor. | Replace rear disc pads and rotors | | \$186.63 |
| Parts: | Disc Brake Pad Set | | 1 \$79.99 |
| raits. | Disc Brake Rotor | | |
| | DISC DIGKE RULUI | | 2 \$127.00 |
| APPROVE or | DECLINE | Subtotal \$393.62 + est. Tax \$21.65 | \$415.27 |
| | | | |

Total Repair Order & Signature:

Total Jobs: \$10,321.99
Total Fees: \$41.41

Subtotal: \$10,363.40

Taxes: \$569.99

Grand Total: \$10,933.39

X Grand Total: \$10,933.39

BALANCE DUE: \$10,933.39