| <    |          | 110000    |   |
|------|----------|-----------|---|
| DATE | RECEIVED | 11-8-2021 | 4 |

| RECEIVED BY | MKC_  |  |
|-------------|-------|--|
| CLAIM NO.   | 14-24 |  |

## 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: MERCY YANG/STEVEN VVE  |
| 2. | Home address of Claimant: 1911 CAMELUT BLWD. SHEBUYGAN, W 53081  |
| з. | Home phone number: (920) 860-3035  |
|    | Business address and phone number of Claimant:   |
|    |  |
| 5. | When did damage or injury occur? (date, time of day) 10/8/24, 4°D  |
| 6. | Where did damage or injury occur? (give full description)  |
|    | NORTH 27TH L COLUMBUS STREET NEAR HOME: 3205 N. 29TH ST. SHEBOYGAN   |
|    |  |
| 7. | How did damage or injury occur? (give full description) THERE WAS A LOOSE LID  |
|    | TO A SENER HOLE. NO WARNING SIBNS/ CONES WERE AROUND THE SENER.  |
|    | MY HUSBAND DROVE OVER THE WHOLE WHICH CAUSED THE BACK RIGHT TIRE   |
|    | TO POP & DAMAGED THE RIM.  |
| 8. | If the basis of liability is alleged to be an act or omission of a City officer or 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: NORTH 27TH & COLVMBUS STREET INTERSECTION                               |
|    | (b) Claimant's statement of basis for such liability: NO SIDNS OR COMES  |
|    | WERE IN THE AREA TO AVOYO THE SEWER HOLE   |

| NATE IN SEMER OFTENDERS WAS CONTACTED 10 1912 TO FIX  11. Name and address of any other person injured:  12. Damage estimate: (You are not bound by the amounts provided here.)  Auto:  \$ 210.01  Property:  \$  CHAP:  S  TOTAL  \$ 270.92  Damaged vehicle (if applicable)  Make:  AURA Model:  MODE:  MAKE:  AURA Model:  MODE:  MAKE:  AURA MODE:  MODE |  | A FLAT TIPE & DENTED RIM  | 1017/1 D EIX   |
|---|--|---|--|
| 12. Damage estimate: (You are not bound by the amounts provided here.)  Auto:  \$ 210.02  Property:  \$ Personal injury:  Other: (Specify below  TOTAL \$ 279.92  Danaged vehicle (if applicable)  Make: AURA Model: MPX Year: 2000 Mileage: 192,995  Names and addresses of witnesses, doctors and hospitals:  SEF ATTACHEN PHOTOS  FOR ALL ACCIDENT NOTICES, COMPLETE THE FOLLOWING DIAGRAM IN DETAIL. BE SURE TO INCLUDE NAMES OF ALL STREETS, HOUSE NUMBERS, LOCATION OF UNDICOLATING WHICH IS CITY VEHICLE (IF APPLICABLE), WHICH IS CLARMANY VEHICLE, LOCATION OF INDIVIDUALS, ETC.  NOTE: If diagrams below do not fit the situation, attach proper diagram and sign.  FOR OTHER ACCIDENTS  SIDEMALK  SIDEMALK  DATE 11/4/124  | <del></del> -  |   |  |
| Auto:  Property:  Personal injury:  Other: (Specify below  TOTAL  Damaged vehicle (if applicable)  Make: ACURA Model: MPX Year: 2000 Mileage: 191,905  Names and addresses of witnesses, doctors and hospitals:  SEE ATTACHED PHOTOS  FOR ALL ACCIDENT NOTICES, COMPLETE THE FOLLOWING DIAGRAM IN DETAIL. BE SURE TO INCLUDINAMES 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  SIDENALK  CURB  PARKMAY  SIDENALK  DATE   1/4/124  |  | y other person injured:   |  |
| Property:  Personal injury:  Other: (Specify balow  TOTAL  \$ 278.92  Danaged vehicle (if applicable)  Make: AURA Model: MOX Year: 2000 Mileage:  91,905  Names and addresses of witnesses, doctors and hospitals:  SEE ATTACHED PHOPS  FOR ALL ACCIDENT NOTICES, COMPLETE THE FOLLOWING DIAGRAM IN DETAIL. BE SURE TO INCLUDE (IF APPLICABLE), WHICH IS CLAIMANT VEHICLE, 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.  PARKMAN SIDEWALK  SIGNATURE OF CLAIMANT  DATE 11/4/124  | 12. Damage estimate: (You  | are not bound by the amounts prov   | ided here.)  |
| Personal injury:  Other: (Specify below  TOTAL  \$ 278.92  Danaged vehicle (if applicable)  Make: ALVRA Model: MPX Year: 2000 Mileage: 192,995  Names and addresses of witnesses, doctors and hospitals:  | Auto:  | s 278.92  | _  |
| Damaged vehicle (if applicable)  Make:AURA Model:NPX Year:2000 Mileage:iq2, qv5  Names and addresses of witnesses, doctors and hospitals:   | Property:  | \$  | _  |
| Damaged vehicle (if applicable)  Make:AURA Model:MPXYear:2000 Mileage:I91, 905  Names and addresses of witnesses, doctors and hospitals:  | Personal injury:   | \$  | _  |
| Danaged vehicle (if applicable)  Make: AURA Model: MPX Year: 2000 Mileage: 1912, 905  Names and addresses of witnesses, doctors and hospitals:  SEF ATTACHEO PHOTOS  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  SIDEMALK  CURB  PARKWAY SIDEMALK  DATE 11/4/124  | Other: (Specify below  | \$  | _  |
| Make: ACURA Model: MPX Year: 2000 Mileage: 1912, 905  Names and addresses of witnesses, doctors and hospitals:  SEE ATTACHED PHOTOS  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  SIDEWALK  CURB  PARKWAY SIDEWALK  DATE 11/4/24   |  | TOTAL \$ 278.92   |  |
| Make: ACCRA Model: MPX Year: 2000 Mileage: 1912, 905  Names and addresses of witnesses, doctors and hospitals:  | - <b>.</b>   |   |  |
| Names and addresses of witnesses, doctors and hospitals:  | _  |   |  |
| 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  SIDEWALK  CURB  PARKWAY  SIDEWALK  DATE 11/4/1-4  | Make: AUKA Mo  | odel: Year: Love  | Mileage: 192, 197  |
| 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  SIDEWALK  CURB  PARKMAY SIDEWALK  DATE 11/4/124   | Names and addresses of   | witnesses, doctors and hospitals:   |  |
| 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  SIDEWALK  CURB  PARKMAY SIDEWALK  DATE 11/4/124   | SEE ATTACHED PH  | ro ro S   |  |
| 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  SIDEWALK  CURB  PARKNAY SIDEWALK  CURB  DATE 11/4/14   |  |   |  |
| 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  SIDEWALK  CURB  PARKMAY SIDEWALK  CURB  DATE 11/4/14   |  |   |  |
| (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  SIDEWALK  CURB  PARKWAY  SIDEWALK  DATE 11/4/124   |  |   |  |
| FOR OTHER ACCIDENTS  SIDEWALK  CURB  PARKWAY SIDEWALK  DATE 11/4/14   | FOR ALL ACCIDENT NOTICES,  | COMPLETE THE FOLLOWING DIAGRAM  | IN DETAIL. BE SURE TO INCLUDE  |
| SIDEWALK  CURB  PARKWAY SIDEWALK  DATE 11/4/24  | NAMES OF ALL STREETS, HOUSE  | E NUMBERS, LOCATION OF VEHICLES, :  | INDICATING WHICH IS CITY VEHICLE   |
| SIDEWALK  CURB  PARKWAY SIDEWALK  DATE 11/4/124   | NAMES OF ALL STREETS, HOUSE<br>(IF APPLICABLE), WHICH IS O   | E NUMBERS, LOCATION OF VEHICLES, :<br>CLAIMANT VEHICLE, LOCATION OF INDI- | INDICATING WHICH IS CITY VEHICLE VIDUALS, ETC.   |
| SIDEWALK  CURB  PARKWAY SIDEWALK  DATE 11/4/24  | NAMES OF ALL STREETS, HOUSE<br>(IF APPLICABLE), WHICH IS C   | E NUMBERS, LOCATION OF VEHICLES, :<br>CLAIMANT VEHICLE, LOCATION OF INDI- | INDICATING WHICH IS CITY VEHICLE VIDUALS, ETC.   |
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| SIGNATURE OF CLAIMANT  DATE 11/4/124  | NAMES OF ALL STREETS, HOUSE<br>(IF APPLICABLE), WHICH IS O   | E NUMBERS, LOCATION OF VEHICLES, CLAIMANT VEHICLE, LOCATION OF INDI-      | INDICATING WHICH IS CITY VEHICLE VIDUALS, ETC.   |
| SIGNATURE OF CLAIMANT  DATE 11/4/124  | NAMES OF ALL STREETS, HOUSE<br>(IF APPLICABLE), WHICH IS O   | E NUMBERS, LOCATION OF VEHICLES, CLAIMANT VEHICLE, LOCATION OF INDI-      | INDICATING WHICH IS CITY VEHICLE VIDUALS, ETC.   |
| SIGNATURE OF CLAIMANT DATE 11/4/24  | NAMES OF ALL STREETS, HOUSE<br>(IF APPLICABLE), WHICH IS O   | FOR OTHER ACCIDENTS   | INDICATING WHICH IS CITY VEHICLE VIDUALS, ETC.   |
| SIGNATURE OF CLAIMANT DATE 11/4/24  | NAMES OF ALL STREETS, HOUSE (IF APPLICABLE), WHICH IS OF ADDRESS OF ALL STREETS, HOUSE (IF APPLICABLE), WHICH IS OF ADDRESS OF ALL STREETS, HOUSE (IF APPLICABLE), WHICH IS OF ADDRESS OF ALL STREETS, HOUSE (IF APPLICABLE), WHICH IS OF ADDRESS OF ADDRESS OF ALL STREETS, HOUSE (IF APPLICABLE), WHICH IS OF ADDRESS OF ADDR | FOR OTHER ACCIDENTS   | INDICATING WHICH IS CITY VEHICLE VIDUALS, ETC.  Oper diagram and sign.                           |
|   | NAMES OF ALL STREETS, HOUSE (IF APPLICABLE), WHICH IS OF ADDRESS OF ALL STREETS, HOUSE (IF APPLICABLE), WHICH IS OF ADDRESS OF ALL STREETS, HOUSE (IF APPLICABLE), WHICH IS OF ADDRESS OF ALL STREETS, HOUSE (IF APPLICABLE), WHICH IS OF ADDRESS OF ADDRESS OF ALL STREETS, HOUSE (IF APPLICABLE), WHICH IS OF ADDRESS OF ADDR | FOR OTHER ACCIDENTS  SIDEWALK  PARKWAY                                    | INDICATING WHICH IS CITY VEHICLE VIDUALS, ETC.  Oper diagram and sign.                           |
|   | NAMES OF ALL STREETS, HOUSE (IF APPLICABLE), WHICH IS OF ALL STREETS, WHICH IS OF A | FOR OTHER ACCIDENTS  SIDEWALK  PARKWAY                                    | INDICATING WHICH IS CITY VEHICLE VIDUALS, ETC.  Oper diagram and sign.                           |
| 11/4/29   | NAMES OF ALL STREETS, HOUSE (IF APPLICABLE), WHICH IS OF ALL STREETS, WHICH IS OF A | FOR OTHER ACCIDENTS  SIDEWALK  PARKWAY                                    | INDICATING WHICH IS CITY VEHICLE VIDUALS, ETC.  Oper diagram and sign.  CURB                     |
|   | NAMES OF ALL STREETS, HOUSI (IF APPLICABLE), WHICH IS O  | FOR OTHER ACCIDENTS  SIDEWALK  PARKWAY                                    | INDICATING WHICH IS CITY VEHICLE VIDUALS, ETC.  Oper diagram and sign.  CURB  CURB  DATE 11/4/24 |
|   | NAMES OF ALL STREETS, HOUSI (IF APPLICABLE), WHICH IS O  | FOR OTHER ACCIDENTS  SIDEWALK  PARKWAY                                    | DATE 11/4/24   |

| DATE RECEIVED        | V-1               | RECEIVED BY           | • •       |
|----------------------|-------------------|-----------------------|-----------|
|                      |                   | CLAIM NO.             |           |
|                      | CLAIM             |                       |           |
| Claimant's Name:     | MERCY YANG        | Auto                  | \$ 278.92 |
| Claimant's Address:  | 1411 CAMELOT BLVD | Property              | \$        |
| _                    | SHEBUYGAN W 53081 | Personal Injury       | \$        |
| Claimant's Phone No. | (920) 860-3035    | Other (Specify below) | \$        |
|                      |                   | TOTAL                 | s 278.92  |

PLEASE INCLUDE COPIES OF ALL BILLS, INVOICES, ESTIMATES, ETC.

WARNING: IT IS A CRIMINAL OFFENSE TO FILE A FALSE CLAIM.
(WISCONSIN STATUTES 943.395)

The undersigned hereby makes a claim against the City of Sheboygan arising out of the circumstances described in the Notice of Damage or Injury. The claim is for relief in the form of money damages in the total amount of  $\frac{278.92}{}$ .

| SIGNED | my | Man | DATE: 11/4/24 |   |
|--------|----|-----|---------------|---|
| ·      | 47 |     |               | • |

ADDRESS: 1411 CAMELOT BLVD. SHEBOYGAN, W 53061



1805 S 13TH ST

### FIRESTONE COMPLETE AUTO CARE 2606 WASHINGTON AVE SHEBOYGAN, WI. 53081

SERVICE ADVISOR: 31 MATT 920.458.0375

Emailed on 10/09/2024 Emailed to mercyangvue@hotmail.com

SHEBOYGAN, WI 53081-5820

2006 ACURA MDX TOURING YANG, MERCY

3.5L V6 FI GAS

2HNYD18856H538411 186XYK WI LIC# VIN#

IN

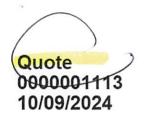
MILEAGE 0

| Store #     | 783026                                    | QUOTE     |      |        |       |          |        |
|-------------|---|-----------|------|--------|-------|----------|--------|
|             |   | Article   |      |        |       | Extended | Job    |
| Description | on  | Number T# | Qty_ | Part_  | Labor | Price    | Total  |
| FIRESTO     | NE TIRE PACKAGE                           |           |      |        |       |          | 224.97 |
| 005375      | DESTINATION LE3 OWL 265/65R17 112T 70,000 | 005375    | 1    | 204.99 |       | 204.99   |        |
| Mile Lin    | nited Warranty                            |           |      |        |       |          |        |
| NEW TI      | IRE WHEEL BALANCE LABOR                   | 7013632   | 1    |        | 12.99 | 12.99    |        |
| RUBBE       | R VALVE STEM                              | 7015040   | 1    | 2.99   |       | 2.99     |        |
| SCRAP       | TIRE RECYCLING FEE                        | 7075078   | 1    |        | 4.00  | 4.00     |        |
| TIRE IN     | ISTALLATION                               | 7015016   | 1    |        | N/C   | N/C      |        |
|             |   |           |      |        |       |          |        |

### **VEHICLE NOTES**

CAUTION: Some models are equipped with uni-directional wheels; before mounting and rotating tires, check owner's manual.

Prices valid for 30 days. Summary 207.98 Parts Labor 16.99 1.04 **Shop Supplies** 226.01 Sub 12.43 Tax 238.44 Total



**Customer Info:** 

Customer #:

Primary Ph: 920-860-3035

**MERCY** 

# Goodyear **Auto Service Centers 6859**

Operator: Scott Wilde

2001 Parkway Dr West Bend, WI 53095 262-306-1676

Federal Tax Id 340253240

Vehicle Info:

Year: Make: Model:

License/State: /

VIN:

| PRODUCT   | DESCRIPTION  | QTY  | PART                  | LABOR  | TOTAL                                     |
|-----------|--|------|-----------------------|--|---|
| 480061856 | 265/65R17 112T SL WRL WORKHORSE AT OWL   | 1.00 | 245.99                | 0.00   | 245.99                                    |
| 044555000 | TIRE INSTALLATION PACKAGE W/TPMS INCLUDES: MOUNTING & INSTALLATION, LIFETIME BALANCE, LIFETIME ROTATIONS,TPMS REBUILD KIT, & FREE ALIGNMENT CHECK. | 1.00 | 12.50                 | 20.00  | 32.50                                     |
| !TPMS     | TPMS KIT   | 1.00 |                       |  |   |
| 071000000 | SCRAP TIRE DISPOSAL AUTO   | 1.00 | 5.50                  | 0.00   | 5.50                                      |
|           | Parts Total*<br>Labor Total  |      | 20.00 Ex<br>Su<br>Ta: | ate Tire Fee<br>cise Tax<br>b Total<br>xable Amount<br>les Tax | 0.00<br>0.00<br>283.99<br>283.99<br>15.62 |
|           |  |      |                       | stimate Total<br>piration Date                                 | <b>299.61</b> 01/07/2025                  |



Invoice No. 333457



RHINE AUTO INC W5695 GARTON RD

PLYMOUTH, WI 53073 1-800-535-2325

Order#

494507/4

Claim Number

Customer PO# STEVEN

Customer RO#

Contact

Date

15 Oct 2024

Time

12:11:16 CDT

Salesperson

Derek

Sales Type

Charge Account

- Invoice To

STEVEN VUE 1411 CAMELOT BLVD SHEBOYGAN, WI 53081

Delivery Customer Pickup

Ship To

STEVEN VUE 1411 CAMELOT BLVD SHEBOYGAN, WI 53081

920-242-2057

Stock #

PO #28115

Part Description

2006 MDX Wheel

17x6-1/2 (alloy), 10 spoke 71736

VIN: 2HNYD18986H521434

Part Comments: GRADE-B3,17X6-1/2 (ALLOY), 10 SPOKE

ORDER IN THROUGH TISLER: POC: SAL THIS IS FOR STEVEN IN DISMANTLING!!!

Sub Total:

65.00

65.00

Tax:

Total:

68.58

3.58

Invoice Terms

the weather the way of the

6 MONTH warranty on all purchased parts unless otherwise noted. Warranty covers the purchased part. Warranty does not cover labor charges.

All claims and returns must be accompanied by this invoice. No returns after 10 days. No return on electrical parts. Returned parts must be in the same condition as when purchased. No refund for parts that have been disassembled.

20% restocking charge on cash returns. Deposits not refundable after 30 days.

Rhine Auto inc. is not responsible for any loss by installation, removal or use of this merchandise

15/24- Pushed

THANK YOU FOR ALLOWING RHINE AUTO TO HELP YOU WITH YOUR AUTOMOTIVE NEEDS. PLEASE CALL AGAIN.

PAID FUR NEW TIRE

137645

Emailed on 11/04/2024

Emailed to

svuemidwestbassing@gmail.com



Store# 783026 In: 11/03/24 11:13AM

Out: 11/04/24 05:16PM

www.FirestoneCompleteAutoCare.com

Cust Status: Drop Off

Appt: Yes

FINAL INVOICE

| SHEBOYGAN FALLS | - | 2606 WASHINGTON AVE, | SHEBOYGAN, | WI. | 53081 | - | 920.458.0375 |  |
|-----------------|---|----------------------|------------|-----|-------|---|--------------|--|
|                 |   |                      | ,          |     |       |   |              |  |

Service Advisor: 31 MATT

SHEBOYGAN, WI 53081

Wheel Lock:

Alt. Auth. Name & Phone:

Vehicle Details:

VUE. STEVEN

920.242.2057

1805 S 15TH ST

**Customer Details:** 

Technician: 31 MATT

2006 ACURA MDX BASE

N/A

3.5L V6 FI GAS

VIN #: 2HNYD18856H538411

LIC #: 186XYK WI MILEAGE: 192.963

|   |            |        | MILEA | JE. 192,903 |           |        |
|---|------------|--------|-------|-------------|-----------|--------|
|   | Rev Hist   |        |       | Unit        | Extended  | Job    |
| Description   | /Article # | ID     | Qty   | Price       | Price     | Tota   |
| COURTESY CHECK  |            | 31     |       |             |           |        |
| Battery Test Results: Your battery is measuring within the  |            |        |       |             |           |        |
| manufacturer's specification for required CCA. Your battery |            |        |       |             |           |        |
| has sufficient power and should reliably start the vehicle. |            |        |       |             |           |        |
| You're recommended to have your battery tested after 90     |            |        |       |             |           |        |
| days.   |            |        |       |             |           |        |
| RECCOMENDING TIRES DUE TO CRACKING IN THE                   |            |        |       |             |           |        |
| SIDEWALL, TIRE SALE NOVE 7-10 THESE TIRES WILL BE           |            |        |       |             |           |        |
| \$160 OFF THE SET OF 4                                      |            |        |       |             |           |        |
| COURTESY CHECK  | 7046930    | 31TS   | 1     | N/C         | N/C       |        |
| STANDARD WHEEL BALANCE (All 4)                              | 7010000    | 31     | '     |             |           | 56.40  |
| Symptom:  |            |        |       |             |           |        |
| STANDARD WHEEL BALANCE (JOBS)                               | 7013178    | 31TS   | 4     | 14.10       | 56.40     |        |
| ALIGNMENT SERVICE (12-MONTH WARRANTY)                       | 70.0.0     | 27     | ,     | 1 11.1.5    | 15.53.14. | 123.99 |
| REAR CONTROL ARMS ARE RUSTED, TECH COULD NOT                |            |        |       |             |           | .20.00 |
| GET THEM LOOSE TO ADJUST AND DIDN'T WANT TO                 |            |        |       |             |           |        |
| BREAK ANYTHING  |            |        |       |             |           |        |
| STANDARD WHEEL ALIGNMENT                                    | 7004578    | 1/15   | 1     | 123.99      | 123.99    |        |
| Donation  | 7004376    |        | 1     | 123.99      | 123.99    | 1.00   |
|   | 7012276    | 31     | 4     | 1.00        | 1.00      | 1.00   |
| BOYS AND GIRLS CLUBS OF AMERICA                             | 7013276    | STIMIN | 1     | 1.00        | 1.00      |        |
| ORDER NOTES   |            |        |       |             |           |        |

RIGHT FRONT TIRE SUGGESTED: Cracking LEFT REAR TIRE SUGGESTED: Cracking LEFT FRONT TIRE SUGGESTED: Cracking

MINI LIGHTS - REVERSE/BACKUP LIGHT REQUIRED: Does Not Light Up; Drivers Side

MANUFACTURER'S RECOMMENDED MAINTENANCE: ENGINE OIL

### All parts are new unless otherwise specified.

| Payme | nt H | istory. |
|-------|------|---------|

Visa 4991 210.34

08923D Sale

MID: 222220337794

Term: 0003 Card Inserted

AID:A0000000031010

PIN NOT VERIFIED

**Total Tendered** 

210.34

| Summary:      |          |
|---------------|----------|
| Parts         | 1.00     |
| Labor         | 180.39   |
| Shop Supplies | 18.04    |
| Sub-Total     | 199.43   |
| Tax (5.50%)   | 10.91    |
| Total         | \$210.34 |

PAID FOR TIRE INSTALL N WHEEL BALANCE/AUGNMENT

### Retail Invoice

137645

Emailed on 11/04/2024

Emailed to

svuemidwestbassing@gmail.com



In: 11/03/24 11:13AM

Store# 783026

Out: 11/04/24 05:16PM

www.FirestoneCompleteAutoCare.com

Cust Status: Drop Off

Appt: Yes

**FINAL INVOICE** 

SHEBOYGAN FALLS - 2606 WASHINGTON AVE, SHEBOYGAN, WI. 53081 - 920.458.0375

FIRESTONE TIRE PACKAGE MINI BULB REPLACEMENT STANDARD OIL CHANGE



I have received the above goods and/or services. If this is a credit card purchase, I agree to pay and comply with my cardholder agreement with the issuer.



BUILDING TRUST THROUGH STANDARDS

**Customer Signature** 

Motor vehicle repair practices are regulated by chapter ATCP 132, Wis. Adm. Code, administered by the Bureau of Consumer Protection, Wisconsin Dept. Agriculture, Trade and Consumer Protection, PO Box 8911, Madison, Wisconsin 53708-8911

### HOW ARE WE DOING?

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