

IV

R. C. No. 41 - 22 - 23. By FINANCE AND PERSONNEL COMMITTEE. July 5, 2022.

Your Committee to whom was referred R. C. No. 265-21-22 by Finance and Personnel Committee to whom was referred R. O. No. 145-21-22 by the City Clerk submitting a claim from Geico Casualty Company for alleged damages that occurred after a motor vehicle accident between Colin McCulley and a City of Sheboygan fire truck; recommends filing the claim.

_____	_____
_____	_____
_____	_____
	Committee

I HEREBY CERTIFY that the foregoing Committee Report was duly accepted and adopted by the Common Council of the City of Sheboygan, Wisconsin, on the _____ day of _____, 20____.

Dated _____ 20____. _____, City Clerk

Approved _____ 20____. _____, Mayor

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Your Committee to whom was referred R. O. No. 135-21-22 by City Clerk submitting a claim from Geico Casualty Company for alleged damages that occurred after a motor vehicle accident between Colin McCulley and a City of Sheboygan fire truck; recommends referring to Finance and Personnel Committee of the 2022-2023 Council.

F+P
2022-2023 Council

Committee

Approved _____ 20_____, _____, Mayor

II

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R. O. No. 135 - 21 - 22. By CITY CLERK. March 21, 2022.

Submitting a claim from Geico Casualty Company for alleged damages that occurred after a motor vehicle accident between Colin McCulley and a City of Sheboygan fire truck.

FrP

CITY CLERK



One Geico Center
Macon, GA 31296-0001

GEICO Casualty Company

MAR 15 2022

claim # 24-21
MKC
3-15-2022

03/10/2022

City Clerk Of Sheboygan

1315 N 23rd St STE 101
Sheboygan, WI 53081-3180

Company Name: GEICO Casualty Company
Claim Number: 063065466 0000 002
Loss Date: Friday, October 29, 2021
Policyholder: Colin Mc Culley
Your Insured: City of Sheboygan
Your Claim Number: (89755 / Wisconsin)

Dear City Clerk Of Sheboygan,

Our investigation shows your insured to be at fault in the accident.

We paid our insured's vehicle claim. Documentation is attached. Please honor our claim and remit payment. **Please ensure our claim number is included when remitting payment.**

Our Interest:	\$383.60
Insured's Deductible:	\$1,500.00
Rental:	\$0.00
Total:	\$1,883.60

When remitting payment, please make your check payable to GEICO Casualty Company as subrogee of . **Please ensure our claim number is included when remitting payment.**

Payment should be remitted to:

GEICO Casualty Company
ATTN: Cashiers
One GEICO Center

Macon, GA 31296

If you have questions, please contact me at the number below. Please refer to our claim number when writing or calling about this claim.

Sincerely,

Brittany Shine
478-744-5078
Payment Recovery Unit

G7L0GL84FF
C21-18883

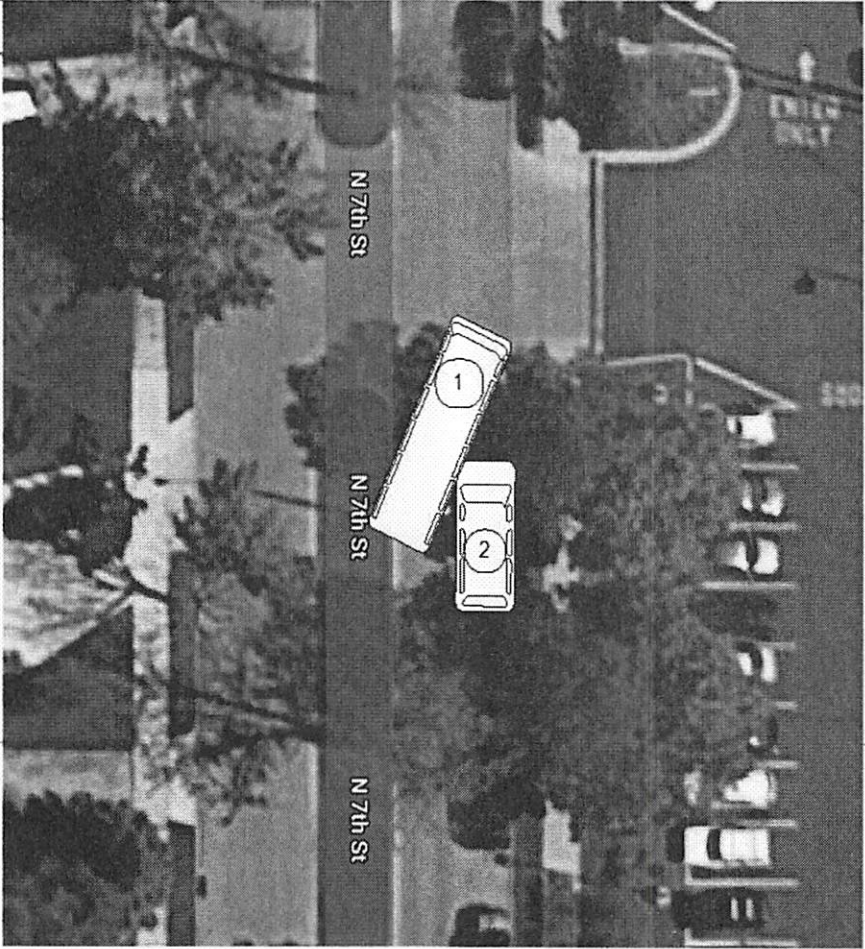
WISCONSIN MOTOR VEHICLE
CRASH REPORT

SHEBOYGAN POLICE DEPARTMENT
1315 N 23RD ST
SHEBOYGAN, WI 53081
(920) 459-3333

G7L0GL84FF

Document Number Override	Primary Crash Document #	Agency Crash Number	Investigating Officer/Deputy SERGEANT A. KUNDINGER	
Crash Date 10/29/2021	Crash Time 03:13 PM	Date Arrived 10/29/2021	Time Arrived 03:29 PM	
Date Notified 10/29/2021	Time Notified 03:13 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"/> 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
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☒ I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

UNIT # 1, A SHEBOYGAN FIRE TRUCK, OPERATING DURING A CALL BUT NOT ON EMERGENCY, WAS TRAVELING NORTH ON NORTH 7TH ST. UNIT #1 THEN ATTEMPTED TO MAKE A RIGHT HAND TURN INTO SHEBOYGAN MEMORIAL HOSPITAL AT 2629 N 7TH ST. AS UNIT # 1 MADE THE RIGHT TURN IT STRUCK UNIT #2 IN THE FRONT DRIVER SIDE BUMPER. UNIT #2 WAS LEGALLY PARKED FACING NORTH ON NORTH 7TH ST JUST SOUTH OF THE DRIVEWAY TO SHEBOYGAN MEMORIAL HOSPITAL.

G7L0GL84FF
C21-18883

WISCONSIN MOTOR VEHICLE
CRASH REPORT

SHEBOYGAN POLICE DEPARTMENT
1315 N 23RD ST
SHEBOYGAN, WI 53081
(920) 459-3333

Location

ON N 7TH ST 635 FT N OF BELL AVE IN THE CITY OF SHEBOYGAN IN SHEBOYGAN COUNTY	Latitude 43.772049285	Longitude -87.711268651
	X Coordinate 442756.71875	Y Coordinate 4846801
	Structure Type	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location SHOULDER RIGHT	
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 DRIVEWAY ACCESS	Intersection Type NOT AN INTERSECTION	

Unit Summary

UNIT 01	Unit Status IN TRANSIT		Vehicle Operating As Classification D 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 FIRE TRUCK		Emergency Motor Vehicle Use NON-EMERGENCY, NON-TRANSPORT	
	Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type CONCRETE		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

Vehicle

UNIT 01 VEHICLE	License Plate Number 89755		Plate Type MUN - MUNICIPAL	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number 4P1BAAFF6FA015152		Make PIERCE MFG INC	Year 2015	Model FIRE	
	Color RED - RED		Body Style FT - FIRE TRUCK		Bus Use	
	Initial Contact Point 03 - RIGHT SIDE MIDDLE		Vehicle Damage 03 - RIGHT SIDE MIDDLE			
	Extent Of Damage MINOR DAMAGE					



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WISCONSIN MOTOR VEHICLE
CRASH REPORT

SHEBOYGAN POLICE DEPARTMENT
1315 N 23RD ST
SHEBOYGAN, WI 53081
(920) 459-3333

UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR			
	What Driver Was Doing RIGHT TURN		Vehicle Factors			
	Driver Prior Action Other		NOT APPLICABLE			
	Driver Actions IMPROPER TURN					
01 01	Owner Name SHEBOYGAN CITY (920) 459-3315		Owner Address 1315 N 23RD ST # 101 SHEBOYGAN, WI 53081 , US			
	Sequence Of Events					
01 02 03 04	Event MOTOR VEH IN TRANSPORT					
	Event RIGHT TURN					
	Event PARKED MOTOR VEHICLE					
	Event					
UNIT	Policy Holder					
	Insurance Company SELF-INSURED		Government SHEBOYGAN CITY			
UNIT INDIVIDUAL	Individual					
	Driver KURT DAVID MILLER (920) 451-5553		Citations Issued 0	Sex MALE		
			Date of Birth 11/07/1982	Race		
	Address W5747 WOODLAND RD PLYMOUTH, WI 53073 , US		Driver License Number M4605048240703 STATE: WISCONSIN COUNTRY: UNITED STATES			
01 001	Safety Equipment		On Duty Crash FIRE-FIGHTER		Safety Equipment	
	Row 01 - FRONT ROW		Seat Position 07 - LEFT		SHOULDER & LAP BELT	
	Helmet Use		Helmet Compliance			
	Eye Protection		Tint Compliance			
	Injury		Injury Severity NO APPARENT INJURY		Airbag NON DEPLOYED	
	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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WISCONSIN MOTOR VEHICLE
CRASH REPORT

SHEBOYGAN POLICE DEPARTMENT
1315 N 23RD ST
SHEBOYGAN, WI 53081
(920) 459-3333

UNIT INDIVIDUAL 01 001	Non Motorist		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other				
	To/From School				
	Drug & Alcohol		Suspected Alcohol Use NO		Suspected Drug Use NO
Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type		Alcohol Test Results	
Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	
Drug Type					
Individual Condition		APPEARED NORMAL			

Unit Summary

UNIT 02	Unit Status LEGALLY PARKED		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER VAN				Operating As Endorsements	
	Total Occs 0	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 DIVIDED HWY W/O TRAFFIC BARRIER		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type CONCRETE		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

UNIT VEHICLE 02 02	Vehicle				
	License Plate Number 456PUG		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 5FNRL5H62CB118089		Make HONDA	Year 2012	Model ODYSSEY EX
	Color SIL - SILVER (ALUMINUM)		Body Style VN - VAN		Bus Use
	Initial Contact Point 11 - LEFT FRONT CORNER		Vehicle Damage 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT		
	Extent Of Damage MINOR DAMAGE				
Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR			



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CRASH REPORT

SHEBOYGAN POLICE DEPARTMENT
1315 N 23RD ST
SHEBOYGAN, WI 53081
(920) 459-3333

UNIT VEHICLE	02	What Driver Was Doing LEGALLY PARKED	Vehicle Factors
	02	Driver Prior Action Other	NOT APPLICABLE
	02	Driver Actions NO CONTRIBUTING ACTION	
	02	Owner Name COLIN PATRICK MC CULLEY (920) 400-0185	Owner Address 1344 GREYSTONE DR PLYMOUTH, WI 53073 , US
UNIT	Sequence Of Events		
	01	Event PARKED MOTOR VEHICLE	
	02	Event MOTOR VEH IN TRANSPORT	
	03	Event RIGHT TURN	
	04	Event	
UNIT	Policy Holder		
	Insurance Company GEICO-GENERAL-INS-CO		Individual COLIN MC CULLEY

GEICO

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For supplement requests visit partners.geico.com

4295 Ocmulgee East Blvd.

Macon, GA 31296

Phone: (630) 524-8956

Claim #:
Workfile ID:

0630654660000002-01
d1157ba5

Estimate of Record

Written By: TOBY SIMMONS, 12/16/2021 9:56:54 AM
Adjuster: Simmons, Toby

Insured:	Colin Mc Culley	Owner Policy #:	4545302160	Claim #:	0630654660000002-01
Type of Loss:	Collision	Date of Loss:	10/29/2021 02:13 PM	Days to Repair:	3
Point of Impact:	12 Front	Deductible:	1500.00		

Owner (Insured):

Colin Mc Culley
1344 Greystone Dr
Plymouth, WI 53073
(920) 400-0186 Evening
(920) 400-0186 Cellular
colinmcculley@gmail.com

Inspection Location:

1344 Greystone Dr
Plymouth, WI 53073
Field
(920) 400-0186 Day

Repair Facility:

BSOC

VEHICLE

2012 HOND Odyssey EX-L 4D VAN 6-3.5L Gasoline Electronic Fuel Injection SILVER

VIN:	5FNRL5H62CB118089	Production Date:		Interior Color:	
License:	456PLG	Odometer:	133083	Exterior Color:	SILVER
State:	WI	Condition:			

TRANSMISSION

AUTOMATIC TRANSMISSION

DRIVER CONVENIENCE

KEYLESS ENTRY
MESSAGE CENTER
POWER DRIVER SEAT
POWER WINDOWS
POWER LOCKS
POWER MIRRORS
HEATED MIRRORS
POWER TRUNK/LIFTGATE
CRUISE CONTROL
INTERMITTENT WIPERS
TILT WHEEL
TELESCOPIC WHEEL
STEERING WHEEL TOUCH CONTROLS
CONSOLE/STORAGE

HOME LINK

INSTRUMENT PANEL

TRACTION CONTROL
STABILITY CONTROL
ALARM
AIR CONDITIONING
CLIMATE CONTROL
REAR DEFOGGER
HANDS FREE DEVICE
RADIO
AM RADIO
FM RADIO
STEREO
SEARCH/SEEK
CD PLAYER
AUXILIARY AUDIO CONNECTION
SATELLITE RADIO

ROOF

ELECTRIC GLASS ROOF
SAFETY
DRIVERS SIDE AIR BAG
PASSENGER AIR BAG
FRONT SIDE IMPACT AIR BAGS
HEAD/CURTAIN AIR BAGS
PAINT
CLEARCOAT PAINT
FRONT END
POWER STEERING
POWER BRAKES
ANTI-LOCK BRAKES (4)
GLASS & MIRRORS
DUAL MIRRORS
PRIVACY GLASS
SEATS

LEATHER SEATS

POWER PASSENGER SEAT
HEATED SEATS
RETRACTABLE SEATS
3RD ROW SEAT
CAPTAIN CHAIRS (2)
REAR CONVENIENCE
DUAL AIR CONDITIONING
DUAL POWER SLIDING DOORS
REAR END
BACKUP CAMERA
REAR WINDOW WIPER
REAR SPOILER
WHEELS
4-WHEEL DISC BRAKES
ALUMINUM/ALLOY WHEELS

Estimate of Record

2012 HOND Odyssey EX-L 4D VAN 6-3.5L Gasoline Electronic Fuel Injection SILVER

Line	Oper	Description	Part Number	Qty	Extended Price \$	Labor	Paint
1		FRONT BUMPER					
2	* <>	Rpr Bumper cover w/o park sensor	04711TK8A91ZZ			2.0	2.5
		NOTE: Adjusted base coat application, based upon area of repairs needed. Full clear coat allowed					
3	*	Add for Clear Coat					1.2
4		R&I R&I bumper cover	04711TK8A91ZZ			1.0	
5		R&I Air deflector	71110TK8A00			0.2	
6		R&I License mount	71180TK8A00			0.2	
7		R&I Center grille	71102TK8A00			0.2	
8		R&I RT Outer grille	71103TK8A00			0.1	
9		R&I LT Outer grille	71108TK8A00			0.1	
10		FRONT LAMPS					
11		R&I LT R&I headlamp assy	33150TK8A01			0.3	
12		FENDER					
13	*	Rpr LT Fender	60260TK8A90ZZ			1.5	1.9
		NOTE: LABOR: Time is after bumper cover, headlamp and rocker molding are removed Adjusted base coat application, based upon area of repairs needed. Full clear coat allowed					
14		Overlap Major Non-Adj. Panel					-0.2
15		Add for Clear Coat					0.3
16	*	R&I LT Fender liner - Loosen	74151TK8A00			0.2	
17		PILLARS, ROCKER & FLOOR					
18	*	R&I LT Rocker molding gray texture - Loosen	71850TK8A00ZA			0.2	
19		MISCELLANEOUS OPERATIONS					
20	#	Repl Corrosion protection		1	10.00 T	0.2	
21	#	Refn Cover Car					0.2
22	#	Subl Flex Additive		1	5.00 T		
23		OTHER CHARGES					
24	#	E.P.C.		1	3.00		
SUBTOTALS					18.00	6.2	5.9

NOTES

Prior Damage Notes:
 NO UPD FOUND IN PHOTOS

Estimate of Record

2012 HOND Odyssey EX-L 4D VAN 6-3.5L Gasoline Electronic Fuel Injection SILVER

ESTIMATE TOTALS

Category	Basis		Rate	Cost \$
Parts				0.00
Body Labor	6.2 hrs	@	\$ 60.00 /hr	372.00
Paint Labor	5.9 hrs	@	\$ 60.00 /hr	354.00
Paint Supplies	5.9 hrs	@	\$ 40.00 /hr	236.00
Miscellaneous				15.00
Other Charges				3.00
Subtotal				980.00
Sales Tax	\$ 980.00	@	5.0000 %	49.00
County Tax	\$ 980.00	@	0.5000 %	4.90
Total Cost of Repairs				1,033.90
Deductible				1,500.00
Total Adjustments				1,500.00
Net Cost of Repairs				-466.10

This is not an authorization to repair.

All GEICO customers have the right to have their vehicle repaired in the shop of their choice.

No Supplement will be honored unless authorized by GEICO.

NOTICE: Vehicles constructed of special metals may require the use of specialized welding and bonding equipment. Proper measuring and structural repair systems are required on today's vehicle to accurately accomplish vehicle repairs. Make sure your shop has the proper equipment to repair your vehicle.

ALTERNATE PARTS DISCLAIMER:

IF A QUALITY REPLACEMENT PART (A/M, LKQ, RECOND OR OPT OEM) APPEARS ON THIS ESTIMATE, IT INDICATES THAT THIS ESTIMATE HAS BEEN PREPARED BASED ON THE USE OF ONE OR MORE CRASH PARTS SUPPLIED BY A SOURCE OTHER THAN THE MANUFACTURER OF YOUR MOTOR VEHICLE. GUARANTEES, IF ANY, APPLICABLE TO THESE REPLACEMENT CRASH PARTS ARE PROVIDED BY THE PART MANUFACTURER OR DISTRIBUTOR RATHER THAN BY THE MANUFACTURER OF YOUR VEHICLE.

***IN ADDITION TO ANY SUCH GUARANTEES, GEICO PROVIDES THE FOLLOWING:

****OWNER LIMITED GUARANTEE**** WE GUARANTEE THAT ALL QUALITY REPLACEMENT BODY PARTS (PARTS NOT MANUFACTURED BY THE MANUFACTURER) IDENTIFIED ON YOUR ESTIMATE, ARE FREE OF DEFECTS IN MATERIAL AND WORKMANSHIP AND MEET GENERALLY ACCEPTED INDUSTRY STANDARDS. THIS PARTS AND LABOR GUARANTEE WILL BE IN EFFECT FOR AS LONG AS YOU OWN THE VEHICLE DESCRIBED IN THE ESTIMATE. THIS GUARANTEE COVERS THE COST OF THE PART, LABOR TO INSTALL, AND INCIDENTALS SUCH AS PAINT AND MATERIALS AND IS SPECIFICALLY LIMITED TO THOSE ITEMS. THIS GUARANTEE DOES NOT COVER LOSS OR DAMAGE THAT IS UNRELATED TO DEFECTS IN THE QUALITY REPLACEMENT PARTS. THIS IS NOT TRANSFERABLE. IF ANY QUALITY REPLACEMENT PARTS ARE DEFECTIVE IN EITHER MATERIAL OR WORKMANSHIP, CONTACT YOUR LOCAL GEICO REPRESENTATIVE.

Estimate of Record

2012 HOND Odyssey EX-L 4D VAN 6-3.5L Gasoline Electronic Fuel Injection SILVER

MOTOR VEHICLE REPAIR PRACTICES ARE REGULATED BY CHAPTER ATPC 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.

Estimate based on MOTOR CRASH ESTIMATING GUIDE and potentially other third party sources of data. Unless otherwise noted, (a) all items are derived from the Guide ARG4429, CCC Data Date 12/09/2021, and potentially other third party sources of data; and (b) the parts presented are OEM-parts. OEM parts are manufactured by or for the vehicle's Original Equipment Manufacturer (OEM) according to OEM's specifications for U.S. distribution. OEM parts are available at OE/Vehicle dealerships or the specified supplier. OPT OEM (Optional OEM) or ALT OEM (Alternative OEM) parts are OEM parts that may be provided by or through alternate sources other than the OEM vehicle dealerships with discounted pricing. Asterisk (*) or Double Asterisk (**) indicates that the parts and/or labor data provided by third party sources of data may have been modified or may have come from an alternate data source. Tilde sign (~) items indicate MOTOR Not-Included Labor operations. The symbol (<>) indicates the refinish operation WILL NOT be performed as a separate procedure from the other panels in the estimate. Non-Original Equipment Manufacturer aftermarket parts are described as Non OEM, A/M or NAGS. Used parts are described as LKQ, RCY, or USED. Reconditioned parts are described as Recond. Recored parts are described as Recore. NAGS Part Numbers and Benchmark Prices are provided by National Auto Glass Specifications. Labor operation times listed on the line with the NAGS information are MOTOR suggested labor operation times. NAGS labor operation times are not included. Pound sign (#) items indicate manual entries.

Some 2022 vehicles contain minor changes from the previous year. For those vehicles, prior to receiving updated data from the vehicle manufacturer, labor and parts data from the previous year may be used. The CCC ONE estimator has a list of applicable vehicles. Parts numbers and prices should be confirmed with the local dealership.

The following is a list of additional abbreviations or symbols that may be used to describe work to be done or parts to be repaired or replaced:

SYMBOLS FOLLOWING PART PRICE:

m=MOTOR Mechanical component. s=MOTOR Structural component. T=Miscellaneous Taxed charge category.
X=Miscellaneous Non-Taxed charge category.

SYMBOLS FOLLOWING LABOR:

D=Diagnostic labor category. E=Electrical labor category. F=Frame labor category. G=Glass labor category.
M=Mechanical labor category. S=Structural labor category. (numbers) 1 through 4=User Defined Labor Categories.

OTHER SYMBOLS AND ABBREVIATIONS:

Adj.=Adjacent. Algn.=Align. ALU=Aluminum. A/M=Aftermarket part. Blnd=Blend. BOR=Boron steel.
CAPA=Certified Automotive Parts Association. D&R=Disconnect and Reconnect. HSS=High Strength Steel.
HYD=Hydroformed Steel. Incl.=Included. LKQ=Like Kind and Quality. LT=Left. MAG=Magnesium. Non-Adj.=Non
Adjacent. NSF=NSF International Certified Part. O/H=Overhaul. Qty=Quantity. Refn=Refinish. Repl=Replace.
R&I=Remove and Install. R&R=Remove and Replace. Rpr=Repair. RT=Right. SAS=Sandwiched Steel.
Sect=Section. Subl=Sublet. UHS=Ultra High Strength Steel. N=Note(s) associated with the estimate line.

Estimate of Record

2012 HOND Odyssey EX-L 4D VAN 6-3.5L Gasoline Electronic Fuel Injection SILVER

CCC ONE Estimating - A product of CCC Intelligent Services Inc.

The following is a list of abbreviations that may be used in CCC ONE Estimating that are not part of the MOTOR CRASH ESTIMATING GUIDE:

BAR=Bureau of Automotive Repair. EPA=Environmental Protection Agency. NHTSA= National Highway Transportation and Safety Administration. PDR=Paintless Dent Repair. VIN=Vehicle Identification Number.



Claim Number	: 0630654660000002-01
Version	:
Image FileName	: backdrivercorner
Image Label	: Driver Side Rear
Insured	: Mc Culley, Colin
Policy Number	: 4545302160
Claimant	: Mc Culley, Colin
Year	: 2012
Make	: Honda
Model	: Odyssey EX-L
VIN	: 5FNRL5H62CB118089
Loss Date	: 10/29/2021
Appraiser	: SIMMONS, TOBY
Photo Added Date	: 12/16/2021

GEICO

WISCONSIN

For supplements visit:partners.geico.com

PO BOX 1231

Manitowoc, WI 54221

Phone: (920) 412-8102

Claim #:

0630654660000002-01

Workfile ID:

d1157ba5

Supplement of Record 1 Summary

Written By: JEFFREY SCHMITZ, 2/9/2022 11:56:04 AM

Adjuster: Simmons, Toby

Insured:	Colin Mc Culley	Owner Policy #:	4545302160	Claim #:	0630654660000002-01
Type of Loss:	Collision	Date of Loss:	10/29/2021 02:13 PM	Days to Repair:	3
Point of Impact:	12 Front	Deductible:	1500.00		

Owner (Insured):

Colin Mc Culley
1344 Greystone Dr
Plymouth, WI 53073
(920) 400-0186 Evening
(920) 400-0186 Cellular
colinmcculley@gmail.com

Inspection Location:

MIKE BURKART FORD
3110 COUNTY RD PP
PLYMOUTH, WI 53073
Repair Facility
(920) 893-6961 Evening

Appraiser Information:

(920) 412-8102

Repair Facility:

MIKE BURKART FORD
3110 COUNTY RD PP
PLYMOUTH, WI 53073
(920) 893-6961 Evening
391027312 Federal ID
Mark Leonhard
<markl@burkartford.com>

VEHICLE

2012 HOND Odyssey EX-L 4D VAN 6-3.5L Gasoline Electronic Fuel Injection SILVER

VIN:	5FNRL5H62CB118089	Production Date:		Interior Color:	
License:	456PLG	Odometer:	133083	Exterior Color:	SILVER
State:	WI	Condition:			

TRANSMISSION

AUTOMATIC TRANSMISSION

DRIVER CONVENIENCE

KEYLESS ENTRY

MESSAGE CENTER

POWER DRIVER SEAT

POWER WINDOWS

POWER LOCKS

POWER MIRRORS

HEATED MIRRORS

POWER TRUNK/LIFTGATE

CRUISE CONTROL

INTERMITTENT WIPERS

TILT WHEEL

TELESCOPIC WHEEL

STEERING WHEEL TOUCH
CONTROLS

HOME LINK

INSTRUMENT PANEL

TRACTION CONTROL

STABILITY CONTROL

ALARM

AIR CONDITIONING

CLIMATE CONTROL

REAR DEFOGGER

HANDS FREE DEVICE

RADIO

AM RADIO

FM RADIO

STEREO

SEARCH/SEEK

CD PLAYER

AUXILIARY AUDIO CONNECTION

ROOF

ELECTRIC GLASS ROOF

SAFETY

DRIVERS SIDE AIR BAG

PASSENGER AIR BAG

FRONT SIDE IMPACT AIR BAGS

HEAD/CURTAIN AIR BAGS

PAINT

CLEARCOAT PAINT

FRONT END

POWER STEERING

POWER BRAKES

ANTI-LOCK BRAKES (4)

GLASS & MIRRORS

DUAL MIRRORS

PRIVACY GLASS

LEATHER SEATS

POWER PASSENGER SEAT

HEATED SEATS

RETRACTABLE SEATS

3RD ROW SEAT

CAPTAIN CHAIRS (2)

REAR CONVENIENCE

DUAL AIR CONDITIONING

DUAL POWER SLIDING DOORS

REAR END

BACKUP CAMERA

REAR WINDOW WIPER

REAR SPOILER

WHEELS

4-WHEEL DISC BRAKES

ALUMINUM/ALLOY WHEELS

Supplement of Record 1 Summary

2012 HOND Odyssey EX-L 4D VAN 6-3.5L Gasoline Electronic Fuel Injection SILVER

CONSOLE/STORAGE

SATELLITE RADIO

SEATS

Supplement of Record 1 Summary

2012 HOND Odyssey EX-L 4D VAN 6-3.5L Gasoline Electronic Fuel Injection SILVER

Line	Oper	Description	Part Number	Qty	Extended Price \$	Labor	Paint
1		FRONT BUMPER					
2	S01	O/H front bumper				1.8	
3	R&I	Air deflector	71110TK8A00			Incl.	
4	R&I	Center grille	71102TK8A00			Incl.	
5	R&I	RT Outer grille	71103TK8A00			Incl.	
6	R&I	LT Outer grille	71108TK8A00			Incl.	
7	** <>	S01 Repl A/M Bumper cover w/o park sensor	HO1000293	1	418.00	Incl.	3.0
		NOTE: MORE COST EFFECTIVE TO REPLACE					
8	S01	Add for Clear Coat					1.2
9	**	S01 Repl A/M License mount	HO1068115	1	13.65	0.2	
		NOTE: HIDDEN DAMAGE					
10	**	S01 Repl A/M LT Spacer	HO1042138	1	15.75	0.1	
		NOTE: HIDDEN DAMAGE					
11		GRILLE					
12	**	S01 Repl A/M Grille	HO1200207	1	127.00	0.7	
		NOTE: HIDDEN DAMAGE					
13		FRONT LAMPS					
14	R&I	LT R&I headlamp assy	33150TK8A01			0.3	
15		FENDER					
16	*	S01 Rpr LT Fender	60260TK8A90ZZ			2.0	1.9
		NOTE: LABOR: Time is after bumper cover, headlamp and rocker molding are removed Adjusted base coat application, based upon area of repairs needed. Full clear coat allowed AGREED TO MORE TIME					
17	S01	Overlap Major Non-Adj. Panel					-0.2
18		Add for Clear Coat					0.3
19	**	S01 Repl A/M LT Fender liner	HO1248141	1	102.00	0.4	
		NOTE: HIDDEN DAMAGE					
20	*	S01 R&I Mud guard front & rear set	08P00TK8100			0.2	
		NOTE: LF ONLY					
21		PILLARS, ROCKER & FLOOR					
22	*	R&I <u>LT Rocker molding gray texture - Loosen</u>	71850TK8A00ZA			0.2	
23	S01	R&I LT Glass assy Honda	73370TK8A01			1.0	
		NOTE: REMOVAL FOR REPAIR					
24		MISCELLANEOUS OPERATIONS					
25	#	Repl Corrosion protection		1	10.00 T	0.2	
26	#	Refn Cover Car					0.2
27	#	Subl Flex Additive		1	5.00 T		
28	#	S01 Repl Glass Installation Kit		1	25.00		
		NOTE: FOR LT PILLAR GLASS					
29		OTHER CHARGES					

Supplement of Record 1 Summary

2012 HOND Odyssey EX-L 4D VAN 6-3.5L Gasoline Electronic Fuel Injection SILVER

30	#	E.P.C.	1	3.00		
SUBTOTALS				719.40	7.1	6.4

NOTES

Prior Damage Notes:
 NO UPD FOUND IN PHOTOS

ESTIMATE TOTALS

Category	Basis			Rate	Cost \$
Parts					701.40
Body Labor	7.1 hrs	@		\$ 60.00 /hr	426.00
Paint Labor	6.4 hrs	@		\$ 60.00 /hr	384.00
Paint Supplies	6.4 hrs	@		\$ 40.00 /hr	256.00
Miscellaneous					15.00
Other Charges					3.00
Subtotal					1,785.40
Sales Tax	\$ 1,785.40	@		5.0000 %	89.27
County Tax	\$ 1,785.40	@		0.5000 %	8.93
Total Cost of Repairs					1,883.60
Deductible					1,500.00
Total Adjustments					1,500.00
Net Cost of Repairs					383.60

Supplement of Record 1 Summary

2012 HOND Odyssey EX-L 4D VAN 6-3.5L Gasoline Electronic Fuel Injection SILVER

SUPPLEMENT SUMMARY

Line	Oper	Description	Part Number	Qty	Extended Price \$	Labor	Paint
Changed Items							
5		R&I Air deflector	71110TK8A00			-0.2	
3	S01	R&I Air deflector	71110TK8A00			Incl.	
7		R&I Center grille	71102TK8A00			-0.2	
4	S01	R&I Center grille	71102TK8A00			Incl.	
8		R&I RT Outer grille	71103TK8A00			-0.1	
5	S01	R&I RT Outer grille	71103TK8A00			Incl.	
9		R&I LT Outer grille	71108TK8A00			-0.1	
6	S01	R&I LT Outer grille	71108TK8A00			Incl.	
13	*	Rpr LT Fender	60260TK8A90ZZ			-1.5	-1.9
NOTE: LABOR: Time is after bumper cover, headlamp and rocker molding are removed Adjusted base coat application, based upon area of repairs needed. Full clear coat allowed							
16	*	S01 Rpr LT Fender	60260TK8A90ZZ			2.0	1.9
NOTE: LABOR: Time is after bumper cover, headlamp and rocker molding are removed Adjusted base coat application, based upon area of repairs needed. Full clear coat allowed AGREED TO MORE TIME							
Deleted Items							
2	* <>	Rpr Bumper cover w/o park sensor	04711TK8A91ZZ			-2.0	-2.5
NOTE: Adjusted base coat application, based upon area of repairs needed. Full clear coat allowed							
3	*	Add for Clear Coat					-1.2
4		R&I R&I bumper cover	04711TK8A91ZZ			-1.0	
6		R&I License mount	71180TK8A00			-0.2	
14		Overlap Major Non-Adj. Panel					0.2
16	*	R&I LT Fender liner - Loosen	74151TK8A00			-0.2	
Added Items							
2	S01	O/H front bumper				1.8	
7	** <>	S01 Repl A/M Bumper cover w/o park sensor	HO1000293	1	418.00	Incl.	3.0
NOTE: MORE COST EFFECTIVE TO REPLACE							
8	S01	Add for Clear Coat					1.2
9	**	S01 Repl A/M License mount	HO1068115	1	13.65	0.2	
NOTE: HIDDEN DAMAGE							
10	**	S01 Repl A/M LT Spacer	HO1042138	1	15.75	0.1	
NOTE: HIDDEN DAMAGE							
11	GRILLE						
12	**	S01 Repl A/M Grille	HO1200207	1	127.00	0.7	
NOTE: HIDDEN DAMAGE							
17	S01	Overlap Major Non-Adj. Panel					-0.2
19	**	S01 Repl A/M LT Fender liner	HO1248141	1	102.00	0.4	
NOTE: HIDDEN DAMAGE							

Supplement of Record 1 Summary

2012 HOND Odyssey EX-L 4D VAN 6-3.5L Gasoline Electronic Fuel Injection SILVER

20	*	S01	R&I	Mud guard front & rear set NOTE: LF ONLY	08P00TK8100				<u>0.2</u>
23		S01	R&I	LT Glass assy Honda NOTE: REMOVAL FOR REPAIR	73370TK8A01				1.0
28	#	S01	Repl	Glass Installation Kit NOTE: FOR LT PILLAR GLASS		1	25.00		
SUBTOTALS						701.40	0.9	0.5	

NOTES

Prior Damage Notes:
 NO UPD FOUND IN PHOTOS

TOTALS SUMMARY

Category	Basis	Rate	Cost \$
Parts			701.40
Body Labor	0.9 hrs @	\$ 60.00 /hr	54.00
Paint Labor	0.5 hrs @	\$ 60.00 /hr	30.00
Paint Supplies	0.5 hrs @	\$ 40.00 /hr	20.00
Subtotal			805.40
Sales Tax	\$ 805.40 @	5.0000 %	40.27
County Tax	\$ 805.40 @	0.5000 %	4.03
Total Supplement Amount			849.70
NET COST OF SUPPLEMENT			849.70

CUMULATIVE EFFECTS OF SUPPLEMENT(S)

Estimate	1,033.90	TOBY SIMMONS
Supplement S01	849.70	JEFFREY SCHMITZ
Workfile Total:	\$ 1,883.60	
TOTAL ADJUSTMENTS:	\$ 1,500.00	
NET COST OF REPAIRS:	\$ 383.60	

Supplement of Record 1 Summary

2012 HOND Odyssey EX-L 4D VAN 6-3.5L Gasoline Electronic Fuel Injection SILVER

This is not an authorization to repair.

All GEICO customers have the right to have their vehicle repaired in the shop of their choice.

No Supplement will be honored unless authorized by GEICO.

NOTICE: Vehicles constructed of special metals may require the use of specialized welding and bonding equipment. Proper measuring and structural repair systems are required on today's vehicle to accurately accomplish vehicle repairs. Make sure your shop has the proper equipment to repair your vehicle.

ALTERNATE PARTS DISCLAIMER:

IF A QUALITY REPLACEMENT PART (A/M, LKQ, RECOND OR OPT OEM) APPEARS ON THIS ESTIMATE, IT INDICATES THAT THIS ESTIMATE HAS BEEN PREPARED BASED ON THE USE OF ONE OR MORE CRASH PARTS SUPPLIED BY A SOURCE OTHER THAN THE MANUFACTURER OF YOUR MOTOR VEHICLE. GUARANTEES, IF ANY, APPLICABLE TO THESE REPLACEMENT CRASH PARTS ARE PROVIDED BY THE PART MANUFACTURER OR DISTRIBUTOR RATHER THAN BY THE MANUFACTURER OF YOUR VEHICLE.

***IN ADDITION TO ANY SUCH GUARANTEES, GEICO PROVIDES THE FOLLOWING:

****OWNER LIMITED GUARANTEE**** WE GUARANTEE THAT ALL QUALITY REPLACEMENT BODY PARTS (PARTS NOT MANUFACTURED BY THE MANUFACTURER) IDENTIFIED ON YOUR ESTIMATE, ARE FREE OF DEFECTS IN MATERIAL AND WORKMANSHIP AND MEET GENERALLY ACCEPTED INDUSTRY STANDARDS. THIS PARTS AND LABOR GUARANTEE WILL BE IN EFFECT FOR AS LONG AS YOU OWN THE VEHICLE DESCRIBED IN THE ESTIMATE. THIS GUARANTEE COVERS THE COST OF THE PART, LABOR TO INSTALL, AND INCIDENTALS SUCH AS PAINT AND MATERIALS AND IS SPECIFICALLY LIMITED TO THOSE ITEMS. THIS GUARANTEE DOES NOT COVER LOSS OR DAMAGE THAT IS UNRELATED TO DEFECTS IN THE QUALITY REPLACEMENT PARTS. THIS IS NOT TRANSFERABLE. IF ANY QUALITY REPLACEMENT PARTS ARE DEFECTIVE IN EITHER MATERIAL OR WORKMANSHIP, CONTACT YOUR LOCAL GEICO REPRESENTATIVE.

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.

THIS ESTIMATE HAS BEEN PREPARED BASED ON THE USE OF ONE OR MORE REPLACEMENT PARTS SUPPLIED BY A SOURCE OTHER THAN THE MANUFACTURER OF YOUR MOTOR VEHICLE. WARRANTIES APPLICABLE TO THESE REPLACEMENT PARTS ARE PROVIDED BY THE MANUFACTURER OR DISTRIBUTOR OF THE REPLACEMENT PARTS RATHER THAN BY THE MANUFACTURER OF YOUR MOTOR VEHICLE.

Supplement of Record 1 Summary

2012 HOND Odyssey EX-L 4D VAN 6-3.5L Gasoline Electronic Fuel Injection SILVER

Estimate based on MOTOR CRASH ESTIMATING GUIDE and potentially other third party sources of data. Unless otherwise noted, (a) all items are derived from the Guide ARG4429, CCC Data Date 02/01/2022, and potentially other third party sources of data; and (b) the parts presented are OEM-parts. OEM parts are manufactured by or for the vehicle's Original Equipment Manufacturer (OEM) according to OEM's specifications for U.S. distribution. OEM parts are available at OE/Vehicle dealerships or the specified supplier. OPT OEM (Optional OEM) or ALT OEM (Alternative OEM) parts are OEM parts that may be provided by or through alternate sources other than the OEM vehicle dealerships with discounted pricing. Asterisk (*) or Double Asterisk (**) indicates that the parts and/or labor data provided by third party sources of data may have been modified or may have come from an alternate data source. Tilde sign (~) items indicate MOTOR Not-Included Labor operations. The symbol (<>) indicates the refinish operation WILL NOT be performed as a separate procedure from the other panels in the estimate. Non-Original Equipment Manufacturer aftermarket parts are described as Non OEM, A/M or NAGS. Used parts are described as LKQ, RCY, or USED. Reconditioned parts are described as Recond. Recored parts are described as Recore. NAGS Part Numbers and Benchmark Prices are provided by National Auto Glass Specifications. Labor operation times listed on the line with the NAGS information are MOTOR suggested labor operation times. NAGS labor operation times are not included. Pound sign (#) items indicate manual entries.

Some 2022 vehicles contain minor changes from the previous year. For those vehicles, prior to receiving updated data from the vehicle manufacturer, labor and parts data from the previous year may be used. The CCC ONE estimator has a list of applicable vehicles. Parts numbers and prices should be confirmed with the local dealership.

The following is a list of additional abbreviations or symbols that may be used to describe work to be done or parts to be repaired or replaced:

SYMBOLS FOLLOWING PART PRICE:

m=MOTOR Mechanical component. s=MOTOR Structural component. T=Miscellaneous Taxed charge category. X=Miscellaneous Non-Taxed charge category.

SYMBOLS FOLLOWING LABOR:

D=Diagnostic labor category. E=Electrical labor category. F=Frame labor category. G=Glass labor category. M=Mechanical labor category. S=Structural labor category. (numbers) 1 through 4=User Defined Labor Categories.

OTHER SYMBOLS AND ABBREVIATIONS:

Adj.=Adjacent. Algn.=Align. ALU=Aluminum. A/M=Aftermarket part. Blnd=Blend. BOR=Boron steel. CAPA=Certified Automotive Parts Association. D&R=Disconnect and Reconnect. HSS=High Strength Steel. HYD=Hydroformed Steel. Incl.=Included. LKQ=Like Kind and Quality. LT=Left. MAG=Magnesium. Non-Adj.=Non Adjacent. NSF=NSF International Certified Part. O/H=Overhaul. Qty=Quantity. Refn=Refinish. Repl=Replace. R&I=Remove and Install. R&R=Remove and Replace. Rpr=Repair. RT=Right. SAS=Sandwiched Steel. Sect=Section. Subl=Sublet. UHS=Ultra High Strength Steel. N=Note(s) associated with the estimate line.

CCC ONE Estimating - A product of CCC Intelligent Services Inc.

The following is a list of abbreviations that may be used in CCC ONE Estimating that are not part of the MOTOR CRASH ESTIMATING GUIDE:

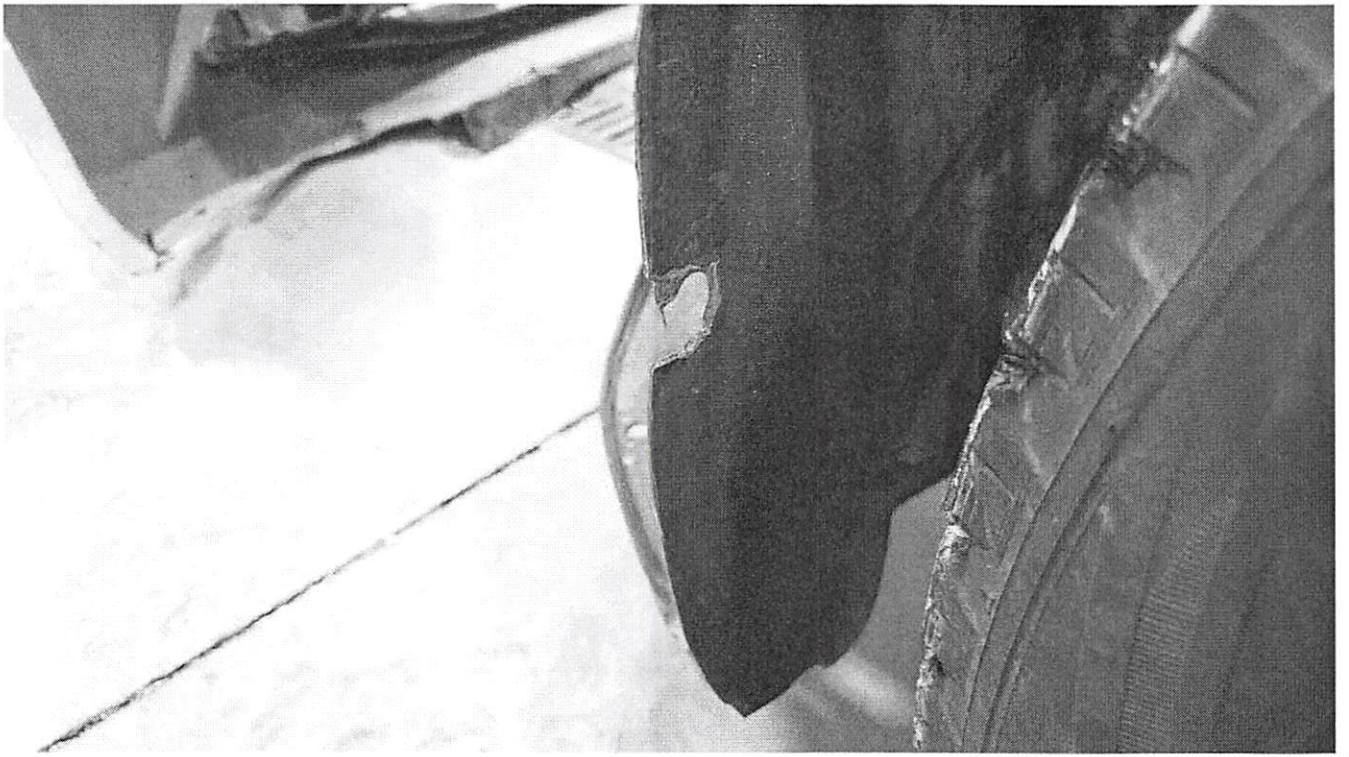
BAR=Bureau of Automotive Repair. EPA=Environmental Protection Agency. NHTSA= National Highway Transportation and Safety Administration. PDR=Paintless Dent Repair. VIN=Vehicle Identification Number.

Supplement of Record 1 Summary

2012 HOND Odyssey EX-L 4D VAN 6-3.5L Gasoline Electronic Fuel Injection SILVER

ALTERNATE PARTS SUPPLIERS

Line	Supplier	Description	Price
7	KEYSTONE-MILWAUKEE, WI 4410 N. 132ND STREET, SUITE A BUTLER WI 53007 (414) 463-1019	#HO1000293 A/M Bumper cover w/o park sensor Quote: 1166779092 Expires: 03/24/22	\$ 418.00
9	National Autobody Parts Ship DFW 2000 E Main Street Grand Prairie TX 75050 (800) 214-7222	#HO1068115 A/M License mount Quote: 1135088785 Expires: 02/14/22	\$ 13.65
10	National Autobody Parts Ship DFW 2000 E Main Street Grand Prairie TX 75050 (800) 214-7222	#HO1042138 A/M LT Spacer Quote: 1135088785 Expires: 02/14/22	\$ 15.75
12	KEYSTONE-MILWAUKEE, WI 4410 N. 132ND STREET, SUITE A BUTLER WI 53007 (414) 463-1019	#HO1200207 A/M Grille Quote: 1166779092 Expires: 03/24/22	\$ 127.00
19	KEYSTONE-MILWAUKEE, WI 4410 N. 132ND STREET, SUITE A BUTLER WI 53007 (414) 463-1019	#HO1248141 A/M LT Fender liner Quote: 1166779092 Expires: 03/24/22	\$ 102.00



Claim Number 063065466000002
Pay To The Order Of Colin Patrick Mc Culley

Financials

Gross Amount \$383.60
Net Amount \$383.60
Backup Withholding \$0.00

Payment Identification

Issued Date 02/11/2022
Mail To Name Colin Patrick Mc Culley
Mail To Address 1344 Greystone Dr, Plymouth, WI, 53073-4573
Memo Collision Coverage
Payment Type Customer Choice
Check Number 230974760

Related Documents

Document Name

Reserve Line Allocation

Exposure	Reserve Line	Cost Type	Amount
Colin Patrick Mc Culley - Collision (2012 HONDA)	Collision	Loss	\$383.60