

DATE RECEIVED 8-12-24

RECEIVED BY MKC

CLAIM NO. # 8-24

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: Shannon Kroening
2. Home address of Claimant: 2113 North 19th Street
3. Home phone number: (920) 627-5186
4. Business address and phone number of Claimant: \_\_\_\_\_

5. When did damage or injury occur? (date, time of day) 6/26/2024 12:49pm

6. Where did damage or injury occur? (give full description) This occurred outside my home on the street (please see police report)

7. How did damage or injury occur? (give full description) (See police report) prepared by the Sheboygan Police department Officer Hamilton

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: \_\_\_\_\_

(b) Claimant's statement of basis for such liability: \_\_\_\_\_

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 vehicle - I have attached an  
estimate for the damages plus tire damage

11. Name and address of any other person injured: N/A

12. Damage estimate: (You are not bound by the amounts provided here.)

Auto: \$ 2456.17

Property: \$ \_\_\_\_\_

Personal injury: \$ \_\_\_\_\_

Other: (Specify below) \$ 50.00 - Time off work to go get estimates done

**TOTAL** \$ 2456.17

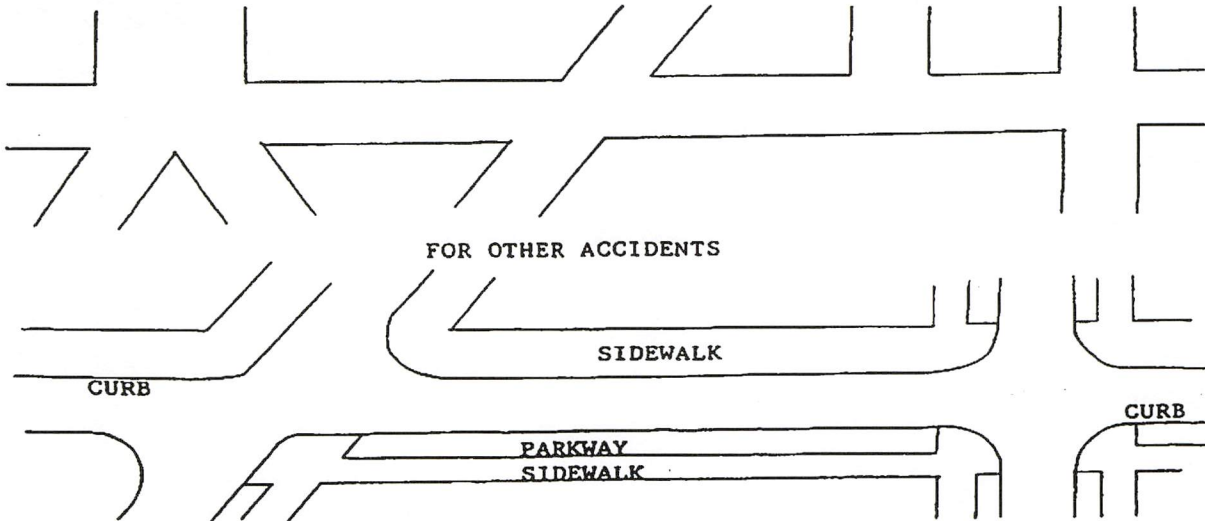
Damaged vehicle (if applicable)

Make: Dodge Model: Caravan Year: 2005 Mileage: \_\_\_\_\_

Names and addresses of witnesses, doctors and hospitals: Officer Hamilton  
of the Stobrayon Police Department

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.



SIGNATURE OF CLAIMANT Shannon Kwan

DATE 8/7/2024



DATE RECEIVED \_\_\_\_\_

RECEIVED BY \_\_\_\_\_

CLAIM NO. \_\_\_\_\_

CLAIM

Claimant's Name: <u>Shannon Kroening</u>	Auto	\$ <u>2406.17</u>
Claimant's Address: <u>2113 North 19th St</u>	Property	\$ _____
<u>Sheboygan WI, 53081</u>	Personal Injury	\$ _____
Claimant's Phone No. <u>(920) 627-5186</u>	Other (Specify below)	\$ <u>50.00</u>
	<u>missed work</u>	
	<b>TOTAL</b>	\$ <u>2456.17</u>

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 \$ \_\_\_\_\_.

SIGNED Shannon Kroening DATE: 8/7/2024

ADDRESS: 2113 North 19th Street, Sheboygan, WI  
53081

MAIL TO: CLERK'S OFFICE  
828 CENTER AVE #100  
SHEBOYGAN WI 53081

G7L0FKD6WQ  
C24-11359

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

G7L0FKD6WQ

Document Number Override		Primary Crash Document#		Agency Crash Number		Investigating Officer/Deputy <b>OFFICER A. HAMILTON</b>	
Crash Date 06/26/2024		Crash Time 12:49 PM		Date Arrived 06/26/2024		Time Arrived 01:00 PM	
Date Notified 06/26/2024		Time Notified 12:50 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 type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

Description

Diagram	Reconstruction By
	Photos By OFC HAMILTON
	Additional Information PHOTOS

I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

ON 6/26/24 UNIT 1 WAS PICKING UP GARBAGE IN THE 2100 BLOCK OF NORTH 19TH ST. THE ARM OF THE GARBAGE TRUCK STRUCK A LEGALLY PARKED VEHICLE #2. UNIT 1 HAD A BENT ARM AND UNIT 2 HAD LIGHT DRIVER SIDE REAR DAMAGE. PHOTOS WERE TAKEN OF THE DAMAGE TO THE VAN. UNIT 2 OWNER WAS NOTIFIED AND PROVIDED A CASE NUMBER -430



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WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

Location

ON N 19TH ST 196 FT N OF CLEVELAND AVE IN THE CITY OF SHEBOYGAN IN SHEBOYGAN COUNTY	Latitude	Longitude
	43.767657344	-87.731471653
	X Coordinate	Y Coordinate
	441126.46875	4846327.5
	Structure Type	
	NO STRUCTURE	

Crash Scene

First Harmful Event	First Harmful Event Location	
MOTOR VEH IN TRANSPORT	ON ROADWAY	
Manner of Collision	Light Condition	
07 - SIDESWIPE/SAME DIRECTION	DAYLIGHT	
Road Surface Condition(s)	Roadway Factor(s)	
DRY		
Environment Factor(s)		
NONE	NONE	
Weather Condition(s)		
CLEAR		
Animal Type	Relation To Trafficway	
	TRAFFICWAY - ON ROAD	
Crash Classification - Location	Crash Classification - Jurisdiction	
PUBLIC PROPERTY	NO SPECIAL JURISDICTION	
Tribal Land	Access Control	Special Study
	NO CONTROL	
Within Interchange Area	Junction Location	Intersection Type
NO	NON-JUNCTION	NOT AN INTERSECTION

Unit Summary

01 UNIT	Unit Status	Vehicle Operating As Classification	Unit Type		
	IN TRANSIT	D CLASS	TRUCK		
	Vehicle Type	Operating As Endorsements			
	UTILITY TRUCK/PICKUP TRUCK				
	Total Occs	Train/Bus# Recorded	Total# Citations Issued	Total Trailers	Total HazMat Types
	1		0	0	0
	Insurance?	Direction Of Travel	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit	Total Lanes
	YES	NORTHBOUND		25	2
	Most Harmful Event: Collision With	Special Function	Emergency Motor Vehicle Use		
	PARKED MOTOR VEHICLE	NO SPECIAL FUNCTION	NOT APPLICABLE		
Traffic Way	Traffic Control	Traffic Control Inoperative/Missing			
TWO-WAY, NOT DIVIDED	NO CONTROL	NO			
Surface Type	Road Curvature	Road Grade			
BLACKTOP (BITUMINOUS)	STRAIGHT	LEVEL			
Truck Bus or HazMat					
NO					

Vehicle

01 UNIT VEHICLE	License Plate Number	Plate Type	St	Country of Issuance
	C15362	LTK - LIGHT TRUCK	WI	UNITED STATES
	Vehicle Identification Number	Make	Year	Model
	5VCACRAF3LC231631	AUTOCAR	2020	GARBAGE
	Color	Body Style	Bus Use	
WHI - WHITE	CB - CAB CHASSIS			
Initial Contact Point	Vehicle Damage			
03 - RIGHT SIDE MIDDLE	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 <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>	
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
01 01	Owner Name <b>SHEBOYGAN CITY (920) 624-8550</b>		Owner Address <b>W7571 COUNTY RD N PLYMOUTH, WI 53073 , US</b>	
	<b>Sequence Of Events</b>			
01 02 03 04	Event <b>MOTOR VEH IN TRANSPORT</b>			
	Event			
	Event			
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>CITY OF SHEBOYGAN</b>		Government <b>SHEBOYGAN CITY</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>KYLE BENJAMIN DULMES (920) 624-8550</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
	Address <b>W7571 COUNTY RD N PLYMOUTH, WI 53073 , US</b>		Date of Birth <b>02/07/1989</b>	Race <b>WHITE</b>
			Driver License Number <b>D4525028904708 STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01 001	<b>Safety Equipment</b>		On Duty Crash	
			Safety Equipment	
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>SHOULDER &amp; LAP BELT</b>	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</b>
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run#	
Hospital		Date of Death	Time of Death	
<b>Distracted By</b>		Distracted By Source		
Distracted By Action				



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WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

UNIT	INDIVIDUAL	<b>Non Motorist</b>		Striking Unit #	Location		
		Prior Action					
		Action					
		Action Other					
		To/From School					
		<b>Drug &amp; Alcohol</b>		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 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 NO									

UNIT	VEHICLE	<b>Vehicle</b>					
		License Plate Number AKS1484		Plate Type AUT - AUTOMOBILE		St WI	
		Country of Issuance UNITED STATES					
		Vehicle Identification Number 2D4GP44LX5R522706		Make DODGE		Year 2005	
		Model GRAND CARA		Color GRY - GRAY		Body Style VN - VAN	
		Bus Use		Initial Contact Point 07 - LEFT REAR CORNER		Vehicle Damage 07 - LEFT REAR CORNER	
		Extent Of Damage MINOR DAMAGE					
Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER					





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C24-11359

### WISCONSIN MOTOR VEHICLE CRASH REPORT

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

UNIT VEHICLE 02 02	What Driver Was Doing <b>LEGALLY PARKED</b>	Vehicle Factors		
	Driver Prior Action Other	NOT APPLICABLE		
	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
	Owner Name <b>SHANNON LYNN KROENING</b>	Owner Address <b>2113 N 19TH ST SHEBOYGAN, WI 53081 , US</b>		
<b>Sequence Of Events</b>				
UNIT 01 02 03 04	Event <b>MOTOR VEH IN TRANSPORT</b>			
	Event			
	Event			
	Event			
<b>Policy Holder</b>				
UNIT 01	Insurance Company <b>ALLSTATE-INS-CO</b>	Individual <b>SHANNON KROENING</b>		
	<b>Property Owner</b>			
PROP OWNER 01	Government <b>SHEBOYGAN CITY</b>	Address <b>828 CENTER AVE SHEBOYGAN SHEBOYGAN, WI 53081 , US</b>		
<b>Fixed Objects Struck</b>				
01	Striking Unit 01	Struck Object <b>OTHER OBJECT - NOT FIXED</b>	Structure Number	Damage Tag Number 1

**Preliminary Estimate**

**Customer: KROENING, LYNN**

**Job Number:**

2005 DODG Caravan SXT Grand 4D VAN 6-3.8L Gasoline SMPI

Line	Oper	Description	Part Number	Qty	Extended Price \$	Labor	Paint
1		<b>REAR BUMPER</b>					
2		O/H rear bumper				1.5	
open	Repl	Bumper cover 119" WB, ES, EX, SXT & Sport primed	5018617AA	1	717.00	Incl.	2.4
4		Add for Clear Coat					1.0
5	Repl	Step pad	4857273AB	1	114.00	Incl.	
6	#	SETUP FOR PULL LEFT REAR QUARTER		1		2.0	
<b>SUBTOTALS</b>					<b>831.00</b>	<b>3.5</b>	<b>3.4</b>

**ESTIMATE TOTALS**

Category	Basis	Rate	Cost \$
Parts			831.00
Body Labor	3.5 hrs @	\$ 77.00 /hr	269.50
Paint Labor	3.4 hrs @	\$ 77.00 /hr	261.80
Paint Supplies	3.4 hrs @	\$ 50.00 /hr	170.00
Subtotal			1,532.30
Sales Tax	\$ 1,532.30 @	5.5000 %	84.28
<b>Grand Total</b>			<b>1,616.58</b>

\*\*IN BUSINESS SINCE '58\*\*

\*\*STATE LICENSE # 10237\*\*

THANK YOU FOR LETTING US SERVE YOU

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.



# B D AUTO & TRUCK BODY

Workfile ID: 79c47676  
PartsShare: 83HRy7

bdauto@frontier.com  
N 5665 FRONTAGE RD, PLYMOUTH, WI 53073  
Phone: (920) 893-5252  
FAX: (920) 893-3232

## Preliminary Estimate

**Customer: KROENING, LYNN**

**Job Number:**

Written By: Bill Dean

Insured: KROENING, LYNN  
Type of Loss:  
Point of Impact:

Policy #:  
Date of Loss:

Claim #:  
Days to Repair: 0

**Owner:**  
KROENING, LYNN  
(920) 627-5186 Business

**Inspection Location:**  
B D AUTO & TRUCK BODY  
N 5665 FRONTAGE RD  
PLYMOUTH, WI 53073  
Repair Facility  
(920) 893-5252 Business

**Insurance Company:**

## VEHICLE

2005 DODG Caravan SXT Grand 4D VAN 6-3.8L Gasoline SMPI

VIN: 2D4GP44LX5R522706  
License:  
State:

Interior Color:  
Exterior Color:  
Production Date:

Mileage In:  
Mileage Out:  
Condition:

Vehicle Out:  
Job #:

### TRANSMISSION

Automatic Transmission  
Overdrive

### POWER

Power Steering  
Power Brakes  
Power Windows  
Power Locks  
Power Mirrors  
Heated Mirrors  
Power Driver Seat

### DECOR

Dual Mirrors  
Body Side Moldings  
Privacy Glass

Console/Storage

Overhead Console

### CONVENIENCE

Air Conditioning  
Intermittent Wipers  
Tilt Wheel  
Cruise Control  
Rear Defogger  
Keyless Entry  
Steering Wheel Touch Controls  
Rear Window Wiper  
Climate Control  
Dual Air Condition  
Dual Power Sliding Doors  
Home Link

### RADIO

AM Radio  
FM Radio  
Stereo  
Search/Seek  
CD Player  
Cassette

### SAFETY

Drivers Side Air Bag  
Passenger Air Bag  
Anti-Lock Brakes (4)  
4 Wheel Disc Brakes  
Traction Control

### ROOF

Luggage/Roof Rack

### SEATS

Cloth Seats  
3rd Row Seat  
Retractable Seats  
Captain Chairs (4)

### WHEELS

Aluminum/Alloy Wheels

### PAINT

Clear Coat Paint

### OTHER

Fog Lamps  
California Emissions



## Preliminary Estimate

**Customer: KROENING, LYNN**

**Job Number:**

2005 DODG Caravan SXT Grand 4D VAN 6-3.8L Gasoline SMPI

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 DE3TE01, CCC Data Date 07/10/2024, 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 2024 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.



# DEAN'S AUTO BODY, INC.

Deans Has the Means for All Your Collision Needs!  
1407 N 29TH ST, SHEBOYGAN, WI 53081  
Phone: (920) 457-5494  
FAX: (920) 457-6495

Workfile ID:  
PartsShare:

cbe942b5  
85sVMT

## Preliminary Estimate

**Customer: Kroening, Shannon**

Written By: Joe Black

Insured: Kroening, Shannon  
Type of Loss:  
Point of Impact: 07 Left Rear

Policy #:  
Date of Loss:

Claim #:  
Days to Repair: 0

**Owner:**  
Kroening, Shannon  
2113 N 19th St  
Sheboygan, WI 53081  
(920) 627-5186 Cell

**Inspection Location:**  
DEAN'S AUTO BODY, INC.  
1407 N 29TH ST  
SHEBOYGAN, WI 53081  
Repair Facility  
(920) 457-5494 Business

**Insurance Company:**

## VEHICLE

2005 DODG Caravan SXT Grand 4D VAN 6-3.8L Gasoline SMPI Magnesium

VIN: 2D4GP44LX5R522706 Interior Color: Mileage In: 172,519 Vehicle Out:  
License: AKS-1484 Exterior Color: Magnesium Mileage Out:  
State: WI Production Date: 4/2005 Condition: Poor Job #:

### TRANSMISSION

Automatic Transmission  
Overdrive

### POWER

Power Steering  
Power Brakes  
Power Windows  
Power Locks  
Power Mirrors  
Heated Mirrors  
Power Driver Seat

### DECOR

Dual Mirrors  
Body Side Moldings  
Privacy Glass

Console/Storage

Overhead Console

### CONVENIENCE

Air Conditioning  
Intermittent Wipers  
Tilt Wheel  
Cruise Control  
Rear Defogger  
Keyless Entry  
Steering Wheel Touch Controls  
Rear Window Wiper  
Climate Control  
Dual Air Condition  
Dual Power Sliding Doors  
Home Link

### RADIO

AM Radio  
FM Radio  
Stereo  
Search/Seek  
CD Player  
Cassette

### SAFETY

Drivers Side Air Bag  
Passenger Air Bag  
Anti-Lock Brakes (4)  
4 Wheel Disc Brakes  
Traction Control

### ROOF

Luggage/Roof Rack

### SEATS

Cloth Seats  
3rd Row Seat  
Retractable Seats  
Captain Chairs (4)

### WHEELS

Aluminum/Alloy Wheels

### PAINT

Clear Coat Paint

### OTHER

Fog Lamps  
California Emissions



## Preliminary Estimate

**Customer: Kroening, Shannon**

2005 DODG Caravan SXT Grand 4D VAN 6-3.8L Gasoline SMPI Magnesium

Line	Oper	Description	Part Number	Qty	Extended Price \$	Labor	Paint
1		<b>REAR BUMPER</b>					
2		O/H rear bumper				1.5	
3	**	Repl A/M CAPA Bumper cover 119" WB, ES, EX, SXT & Sport primed	5018617AA	1	533.00	Incl.	2.4
4		Add for Clear Coat					1.0
5		Repl Step pad	4857273AB	1	114.00	Incl.	
6		<b>MISCELLANEOUS OPERATIONS</b>					
7	#	Hazardous waste removal		1	8.00	T	
8	#	Color tint / color match		1			0.5
9	#	Repl Flex additive		1	12.00	T	
10	#	Refn Spray Out Card					0.5
<b>SUBTOTALS</b>					<b>667.00</b>	<b>1.5</b>	<b>4.4</b>

### NOTES

Prior Damage Notes:

- Vehicle has rust and damage all over vehicle.

### ESTIMATE TOTALS

Category	Basis	Rate	Cost \$
Parts			647.00
Body Labor	1.5 hrs @	\$ 78.00 /hr	117.00
Paint Labor	4.4 hrs @	\$ 78.00 /hr	343.20
Paint Supplies	4.4 hrs @	\$ 53.00 /hr	233.20
Miscellaneous			20.00
Subtotal			1,360.40
Sales Tax	\$ 1,360.40 @	5.5000 %	74.82
<b>Grand Total</b>			<b>1,435.22</b>
Deductible			0.00
<b>CUSTOMER PAY</b>			<b>0.00</b>
<b>INSURANCE PAY</b>			<b>1,435.22</b>



## Preliminary Estimate

### Customer: Kroening, Shannon

2005 DODG Caravan SXT Grand 4D VAN 6-3.8L Gasoline SMPI Magnesium

BODY \$78/HR - REFINISH \$78/HR - MECHANICAL \$110/HR - PAINT & MATERIALS \$53/HR

As vehicle technologies increase, the costs of repairs escalate as well. With this comes a ten-fold increase in administrative duties required to process your claim. When adding even modest inflation it is inevitable at times that the hourly cost of labor must increase. Insurance "allowances" can lag behind these inevitable increases. At those times we will ask that you co-pay any differences. Most often this is not a large amount but allows us to properly train, retain, and compensate our staff for their efforts. Thus, providing you with a professional repair by a professional staff.

\*\*\*\*FOLLOW THIS LINK FOR A CO-PAY EXPLAINER VIDEO\*\*\*\*

<https://www.youtube.com/watch?v=jzfZCtmMRfo>

#### \*\*NOTICE TO INSURERS:

Dean's Auto Body, Inc. does not negotiate labor rates. Parts & Procedures are open to justification while giving consideration to OEM guidelines. PLEASE refer to the above video link for a detailed explanation of that policy.

#### BLEND VS. REFINISH ADJACENT PANEL:

With all repairs the shop will invest time and talent in tinting to negate adjacent panel "blending" However, when required, that procedure will be billed as "adjacent panel refinishing." Not a blend allowance. The basis for this change is exceptionally well validated in the attached blend study report.

As a family owned business, OUR MISSION, is to be your #1 collision repair facility. To provide you with outstanding customer care as we honestly and ethically repair your vehicle using environmentally friendly materials, the latest techniques, and up-to-date procedures. We will strive to grow our company with integrity to keep your business for life.

\*\* All supplements must be addressed before the vehicle leaves. Any supplements left open will result in the vehicle not being delivered until the supplement is agreed upon with a copy in hand.

Per Wisconsin Statue 628.46 - any claim not paid within 30 days is subject to a 7.5% interest charge.

#### TOTAL LOSS ESTIMATES:

Charges for a total loss estimate, with pictures and documentation to support estimate, will be charged at a minimum of 4 hours and a cost of \$90 an hour. (Costs could go up depending on what is needed to complete the written evaluation for a total loss.)

\*Disassembly to gain access to document damage will be added on accordingly at the proper shop rate.

\*Scanning and measuring for diagnosing complete damage, will be billed out for each job accordingly at the proper shop rate.

\*Any OEM repair procedures needing a subscription to gather information for the repairs will also be added per vehicle according.

STORAGE CHARGES are \$75 per day

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.

## Preliminary Estimate

### Customer: Kroening, Shannon

2005 DODG Caravan SXT Grand 4D VAN 6-3.8L Gasoline SMPI Magnesium

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.

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 DE3TE01, CCC Data Date 08/01/2024, 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 2024 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.



## Preliminary Estimate

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### Customer: Kroening, Shannon

2005 DODG Caravan SXT Grand 4D VAN 6-3.8L Gasoline SMPI Magnesium

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.



Preliminary Estimate

Customer: Kroening, Shannon

2005 DODG Caravan SXT Grand 4D VAN 6-3.8L Gasoline SMPI Magnesium

PARTS SUPPLIER LIST

Line	Supplier	Description	Price
3	Keystone, Inc 5050 N WREN DRIVE APPLETON WI 54913 (920) 731-3030	#CH1100219PP A/M CAPA Bumper cover 119" WB, ES, EX, SXT & Sport primed Quote: 2609402018 Expires: 09/21/24	\$ 533.00
5	Gandrud CDJR 2300 Auto Plaza Way Green Bay WI 54302	#4857273AB Step pad Quote: 2671596677 Expires: 09/06/24	\$ 114.00

## Preliminary Estimate

### Customer: Kroening, Shannon

2005 DODG Caravan SXT Grand 4D VAN 6-3.8L Gasoline SMPI Magnesium

### ALTERNATE PARTS USAGE

2005 DODG Caravan SXT Grand 4D VAN 6-3.8L Gasoline SMPI Magnesium

VIN: 2D4GP44LX5R522706 Interior Color: Mileage In: 172,519 Vehicle Out:  
License: AKS-1484 Exterior Color: Magnesium Mileage Out:  
State: WI Production Date: 4/2005 Condition: Poor Job #:

Alternate Part Type	Selection Method	# Of Times Notified Of Available Parts	# Of Parts Selected
Aftermarket	Automatically List	1	1
Optional OEM	Automatically List	0	0
Reconditioned	Automatically List	0	0
Recycled	N/A	0	0



**GRITTS AUTO SERVICE**

740 WESTERN AVE.  
 Plymouth, WI. 53073  
 Phone: 920-893-5024 Fax: 920-892-2282

ESTIMATE #

064004

**ESTIMATE FOR SERVICES**

Estimate Date : 07/18/2024

**PHILLIPS-KLIND, JOSH**  
 2113 N 19TH ST  
 Sheboygan, WI 53081  
 Cellular: 920-627-3561

2005 Dodge - Grand Caravan SXT - 3.8L, V6 (232CI) VIN(L)  
 Lic # : AKS1484 - WI Odometer In: 0  
 Unit # : GREEN  
 VIN # : 2D4GP44LX **5R522706**

Part Description / Number	Qty	Sale	Ext	Labor Description	Hours	Extended
TIRE DISPOSAL DISP	1.00	4.00	4.00	INSTALL TRAILER HITCH MOUNT AND BALANCE ONE TIRE	1.00 0.25	125.00 31.25
TPMS VALVE STEM 20008	1.00	3.50	3.50			
GENERAL 215/65/16 ALTIMAX RT45 TIRE G15576630000	1.00	130.00	130.00			
Trailer Hitch - Class 3 AG0292700734	1.00	440.00	440.00			
Shop Supplies			14.68			

Parts/Supplies: 592.18      Labor: 156.25      HazMat/Fees: 0.00      Tax: 41.16      Total: \$ 789.59

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

This vehicle received without face to face customer contact.

Shop Representative \_\_\_\_\_

Having authority to do so I hereby order the above products and services, parts and labor and grant permission to you and/or your employees to operate the vehicle described for the purpose of testing and/or inspection. I agree to pay cash when the work is completed or to pay on other terms satisfactory to you. Until paid in full, the amount owing on this work shall constitute a lien on the motor vehicle. If collection is made by suit or otherwise, I agree to pay storage and collection and reasonable attorney's fees.

Customer Sign: \_\_\_\_\_  
 Date: \_\_\_\_\_

YOU ARE ENTITLED TO A PRICE ESTIMATE FOR THE REPAIRS YOU HAVE AUTHORIZED. THE REPAIR PRICE MAYBE LESS THAT THE ESTIAMTE, BUT WILL NOT EXCEED THE ESTIMATE WITHOUT YOUR PERMISSION. YOUR SIGNATURE WILL INDICATE YOUR ESTIMATE SELECTION.

1. I request an estimate in writing before you begin repair \_\_\_\_\_  
 2. Please proceed with repairs, but call me before continuing if the price will exceed \$ \_\_\_\_\_  
 3. I do not want an estimate \_\_\_\_\_

Do you want the replaced parts you are entitled to?  Yes  No

Payment will be made by  Cash  Check  Credit  Card Charge

Call when vehicle is ready  Yes  No