

# CITY OF MANITOWOC

#### WISCONSIN. USA

www.manitowoc.org

May 11, 2022

TO:

Mayor and Common Council

FROM:

Board of Public Works

SUBJECT:

Appeal for snow shoveling violation for property at 955 N. 6<sup>th</sup> St.

Dear Mayor and Common Council:

At the May 4, 2022 Board of Public Works meeting, the Board met to review the appeal for a snow shoveling violation for the property at 955 N.  $6^{th}$  St.

"Moved by Mayor Nickels, seconded by Alderperson Reckelberg, to rescind the assessment with the property owner to understand there would not be additional appeals granted within the next year. Ayes, 5. Nays, 2."

Very Truly Yours,

Mackenzie Reed-Kadow

Secretary Board of Public Works

# Community Care, Inc

RECEIVED

APR 13 2022

CITY CLERKS OFFICE

4/5/2022

Jennifer Berndt Community Care, Inc 615 S 8<sup>th</sup> St, Sheboygan, WI 53081

Board of Public Works 900 Quay St, Manitowoc, WI, 54220

#### To Whom It May Concern:

It has come to my attention that a member of ours, Lynn Grady of 955 N 6<sup>th</sup> St, Manitowoc, received a citation for not removing snow from her walk on March 14<sup>th</sup>, 2022. At Community Care, we were paying a service provider to shovel for the member as she is elderly and unable to shovel herself. The service provider was scheduled to come out and shovel for Lynn. Unfortunately the service provider did not complete the snow removal. We have obtained a new provider for this service. They did not notify us or Lynn. If at all possible, could the citation be forgiven due to this issue? Lynn does not have and family or friends available in the area to assist her with shoveling.

Thank you,

Jennifer Berndt Care Manager Community Care, Inc

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# City of Manitowoc

### **Department of Public Infrastructure**

## Sidewalk snow removal violation and removal form

Location: 955 N 6TH ST	Complaint date: 3-11-22				
Parcel Number: 413006061 (Lot #7367)	Initial inspection date: 3-14-72 Inspector: 54				
Owner Name: GRADY LYNN, (Cust #36852)	Action taken:				
Owner Address: 955 N 6TH ST	Date/time issue given to contractor:				
MANITOWOC, WI 54220	Subsequent Complaint (highlight if applicable) If highlighted, proceed to 2 <sup>nd</sup> inspection and removal				

Compliance	Inspector	Compliance	Employee	Labor	Equipment	Equipment	DATE	MINIMUM	ADDITIONAL
inspection/date	Initials	YES OR NO	(use one line	Hours	(per employee)	Hours	BILLED	CHARGE	CHARGES
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