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AUG 18 2021

CITY OF MANITOWOC CLAIM FORM CITY CLERKS OFFICE NOTICE OF CIRCUMSTANCES (§893.80(1d)(a) Wis. Stats.)

that the M	ain Sewer line was severly c	damaged in the middle of the road. Our lateral had ne damaged city main sewer line. Prior to the
- IVIAI III OVVO	c vvi. vve nired iviaritime Plu	imbing to investigate the situation and they found
Manitowo	a MIL Ma bired Maritime Div	
	es of Claim (Attach additional sheet Oth, we had a sewer back up	o into our office building at 1701 Washington St
		According to the contract of t
Time 07:0		Middle of Road by 1701 Washington St
	ident Information: 20th 2021	Place Washington St Manitowoc
report, if any the nature of t	; and a diagram of the accident scene i	how). For auto/property damages, attach a copy of the police including north, south, east or west. For personal injury, indicate ven, the name of the physician/immediate care/hospital. List the int/accident. Give details.
CIRCUMST	ANCES OF CLAIM: Describe the	e circumstances of your claim below and attach additional
EMAIL (option	Brian@tholodolo	
OF CLAIMA	NT Manitowoc WI 54220	(City, State, Zip Code)
ADDICEOS	1701 Washington St Ste 20	
NAME ADDRESS		s, LLC TELEPHONE NUMBER (920) 973-6296

Procedure for filing claims:

- 1. In most instances, a signed Notice of Circumstances of Claim must be served on the City within 120 days after the happening of the event—giving rise to the claim or it will be barred by State Statute.
- 2. A Claim must be filed with the City Clerk, City of Manitowoc, 900 Quay Street, Manitowoc, WI 54220, containing the claimant's address and an itemized statement of the relief or damages sought. This is the bottom portion of the form entitled "Claim Form." No action will be taken until this portion is completed and submitted to the City.
- 3. The City Attorney and or CVMIC (the City's liability insurance carrier) will then determine if your claim should be paid, compromised or disallowed. You will be notified by letter should the City determine to pay or compromise your claim. The City Attorney has the authority to pay, settle, or disallow claims up to \$5,000. Claims exceeding \$5,000 will be reviewed by the City's Finance Committee, who will present a final recommendation to the Common Council.
- 4. This procedure is established by Wisconsin Statutes to provide a mechanism for persons to recover damages in the event a municipality is responsible for an incident. This procedure is also designed to protect the municipality and its taxpayers from having to pay out inappropriate and/or nuisance claims.

This document does not constitute legal advice and should not be substituted for the advice of private legal counsel. Claimants have the right to retain an attorney of their choice to assist them with filing a claim solely at their own cost and expense.

Claimants are encouraged to review Wis. Stat. § 893.80 prior to filing a claim.

CLAIM FORM (§893.80(1d)(b) Wis. Stats.)

After filing a Notice of Circumstances of claim with the City of Manitowoc you must also file a claim itemizing the relief sought (what you want from the City or do not want the City do to). You may file a claim at any time consistent with the applicable statute of limitations. Provide copies of any bills supporting the amount of the claim. For claims involving auto/truck/property damage, please attach two estimates. If the relief sought is non-monetary be as detailed and/or descriptive as possible.

The person signing below makes a claim against the City of Manitowoc arising out of the circumstances abovedescribed. The claim is for relief in the form of money damages as indicated below, and non-monetary relief as follows:

Auto/truck \$	Personal Injury \$	
Property § 7,916.00	Other (specify) \$	

Sign and then click Submit Form button below to submit to the City Clerk's Office.

Signed

SUBMIT FORM

Brian Lodel TLG Holdings, LLC



AND MECHANICAL LLC

Invoice

2214 Franklin Street, Manitowoc, WI 54220 email - info@maritimepm.com (920) 682-8794

Lodel Group 1701 Washington St	
Manitowoc, WI 54220	

Date	Invoice #
8/10/2021	41972

Balance Due	Amount Enc.
\$7,916.00	

Pro	ject PO Number / W	O Number	Terms	Service Date
			Net 15	July 2021
Quantity	Description		Rate	Amount
	Labor and material to jet and televise th the sewer broke and needing to be repla		625.00	625.00
	Labor and material to replace the sewer building to the main. Including permit, a backfill, and temporary road patch.	from the excavation,	7,291.00	7,291.00
		State was a specific or		
hank you for you	business.		Sales Tax (5.0%)	\$0.00
			Total	\$7,916.00
ayment(s) not recei	ved by the due date will be subject to a \$20.00	TELEVALA:	Payments/Credits	\$ \$0.00





Payments over \$500.00 paid by credit card will be subject to a transaction fee of 3%.

per month or 1.5% per month late fee--whichever is greater. After 90 days past due, the account will be sent to a collection agency for collection. Additional fees may apply.

Sales Tax (5.0%)	\$0.00
Total	\$7,916.00
Payments/Credits	\$0.00
Balance Due	\$7,916.00



