

SUSAN T. ERTMER
County Clerk



Winnebago County
Office of the County Clerk

The Wave of the Future

415 JACKSON STREET, P.O. BOX 2808
OSHKOSH, WISCONSIN 54903-2808

OSHKOSH (920) 236-4890
FOX CITIES (920) 727-2880
FAX (920) 303-3025
E-mail: countyclerk@co.winnebago.wi.us

NOTICE OF CLAIM

Date: February 1, 2019
To: Doug, Linda and Joan
Re: Claim from Jim Lueders for damage to his vehicle from a Winnebago County snow plow.

This claim will be presented to the County Board at their February 12, 2019 meeting.

1/30/19

SNOW PLOW HIT ME ON
NORTH OAKWOOD 12:11



LUEDERS POWER SYSTEMS

JIM

920-379-3680

1537 North Oakwood Road

P.O. BOX 1757

OSHKOSH, WI 54903

E-mail: luederspower@yahoo.com

Generator Turnkey Installations

Generator Service



Winneshong County Highway Department
ACCIDENT/INCIDENT REPORT

DATE OF ACCIDENT/INCIDENT: 1-2-19

TIME: 12:05 AM PM

LOCATION OF ACCIDENT/INCIDENT: N Oakwood and Oakwood Circle
WSD

POLICE REPORT # 19-000021

OFFICER NAME _____

Attach police report

MUNICIPALITY Winneshong Sheriff

CITATION ISSUED: YES NO

DRIVER NAME James Stadtraveller

IF SO, TO WHOM? _____

PASSENGER _____

EQUIPMENT # 61 YEAR _____

MAKE/MODEL International

- | | |
|--------------------------------------|------------------------------------|
| <input type="checkbox"/> Broken | <input type="checkbox"/> Scratched |
| <input type="checkbox"/> Bent | <input type="checkbox"/> Stretched |
| <input type="checkbox"/> Over Heated | <input type="checkbox"/> Punctured |
| <input type="checkbox"/> Flattened | <input type="checkbox"/> Other |

DESCRIPTION OF ACCIDENT/INCIDENT (WHAT HAPPENED AND WHY)

I came to the intersection of N oakwood and oakwood circle lowered my wing to see on coming traffic saw nothing looked at the under body to make sure it was up looked for traffic again raised wing still waiting for traffic as I was moving forward saw a white Dodge pickup stopped and watched the truck hit the corner of glow blade I was turning right stopped right before center line there is about 3 foot scratch on the box and broke tail light

SUPERVISOR COMMENTS

DRIVER SIGNATURE

James Stadtraveller
Jim Bull

DATE 1-2-19

SUPERVISOR SIGNATURE

DATE 1-3-19

Tony's AUTO COLLISION CENTER & SALES, INC. LIFETIME GUARANTEE!

TONY'S AUTO COLLISION CENTER & SALES INC.
1825 S. WASHBURN ST.
OSHKOSH, WI 54904
OFFICE: 920-426-3700 FAX: 920-231-7343

*** PRELIMINARY ESTIMATE ***

01/03/2019 09:35 AM

Owner

Owner: LUEDERS POWER SYTEM
Address: 1532 N OAKWOOD RD
City State Zip: Oshkosh, WI 54904
Email: luederspower@yahoo.com

Cell: (920)379-3680
FAX:

Control Information

Loss Date/Time: 01/02/2019 09:34 AM
Deductible: None

Loss Type: Liability

Inspection

Inspection Date: 01/03/2019 09:34 AM
Inspection Location: TONY'S
City State Zip: Oshkosh, WI 54904
Primary Impact: Left Rear Side
Driveable: Yes

Inspection Type: Drive In
Contact:
FAX:
Secondary Impact:
Rental Assisted:

Contact: DARREN MARKERT

Repairer

Repairer: Tony's Auto Collision
Address: 1825 South Washburn Ave.

City State Zip: Oshkosh, WI 54904

Contact:
Work/Day: (920)426-3700
Home/Evening: (920)231-3384
FAX: (920)231-7343

Target Complete Date/Time:

Days To Repair: 5

Vehicle

2014 Dodge Ram 150/1500 Tradesman 2 DR Standard Cab Short Bed
8cyl Gasoline 5.7 HEMI
8-Speed Automatic

Lic. Plate: MU3435
Lic Expire:
Prod Date: 04/2014
Veh Insp#:
Condition: Good
Ext. Color: BRIGHT WHITE
Ext. Refinish: Two-Stage
Ext. Paint Code: GW7,W7

Lic State: WI
VIN: 3C6JR6DT6EG257448
Mileage: 66,381
Mileage Type: Actual
Code: N8502A
Int. Color:
Int. Refinish: Two-Stage
Int. Trim Code:

Options

AM/FM Stereo
Camper/Towing Package

Air Conditioning
Cruise Control

Anti-Lock Brakes
Dual Airbags

01/03/2019 09:36 AM

Page 1 of 3

1825 S. Washburn Street • Oshkosh, WI 54904 • (920) 426-3700 • Fax: (920) 231-7343

| | | |
|--------------------------|-----------------------|------------------------|
| Elect. Stability Control | Full Size Spare Tire | Halogen Headlights |
| Head Airbags | Heavy Duty Suspension | Intermittent Wipers |
| Lighted Entry System | Power Brakes | Power Steering |
| Rear Step Bumper | Side Airbags | Split Front Bench Seat |
| Spray-On Bedliner | Steel Wheels | Tachometer |
| Tilt Steering Wheel | Tinted Glass | Trailer Hitch |
| Vinyl Seats | | |

Damages

| Line | Op | Guide | MC | Description | MFR.Part No. | Price | ADJ% | B% | Hours | R |
|------|--------------|-------|----|-------------------------|-----------------------|---------|------|----|-------|-----|
| 1 | I | 315 | | Panel,Bedside Outer LT | Repair | | | | 10.0* | SM |
| 2 | L | 315 | 13 | Panel,Bedside Outer LT | Refinish | | | | 4.6 | RF |
| | | | | | 3.3 Surface | | | | | |
| | | | | | 0.6 Two-stage setup | | | | | |
| | | | | | 0.7 Two-stage | | | | | |
| 3 | E | 320 | | Mldg,Bedside Pnl Upr LT | 68375107AA | \$32.75 | | | 0.3 | SM |
| 4 | RI | 533 | | Taillamp Assembly LT | R & I Assembly | | | | 0.3 | SM |
| 5 | EC | | | CAR COVER | Replace Economy | \$7.00* | | | | SM |
| 6 | UC | | | HAZ WASTE | Replace Reconditioned | \$5.00* | | | | SM |
| 7 | EC | | | COROSSION PROTECTION | Replace Economy | | | | 0.3* | SM* |
| 8 | RI | | | TOOL BOX | R & I Assembly | | | | 1.0* | SM* |
| 8 | Items | | | | | | | | | |

| MC | Message |
|----|--|
| 13 | INCLUDES 0.6 HOURS FIRST PANEL TWO-STAGE ALLOWANCE |

Estimate Total & Entries

| | | | |
|------------------------------------|---------------------|----------|----------|
| Gross Parts | | \$32.75 | |
| Other Parts | | \$12.00 | |
| Paint & Materials | 4.6 Hours @ \$46.00 | \$211.60 | |
| Parts & Material Total | | | \$256.35 |
| Tax on Parts & Material | @ 5.000% | | \$12.82 |

| Labor | Rate | Replace Hrs | Repair Hrs | Total Hrs | |
|------------------|---------|-------------|------------|-----------|----------|
| Sheet Metal (SM) | \$66.00 | 1.9 | 10.0 | 11.9 | \$785.40 |
| Mech/Elec (ME) | \$95.00 | | | | |
| Frame (FR) | \$85.00 | | | | |
| Refinish (RF) | \$66.00 | 4.6 | | 4.6 | \$303.60 |

| | | |
|-------------------------|------------|-------------------|
| Labor Total | 16.5 Hours | \$1,089.00 |
| Tax on Labor | @ 5.000% | \$54.45 |
| Gross Total | | \$1,412.62 |
| Less: Deductible | | None- |
| Net Total | | \$1,412.62 |

Owner To Pay All Damages

+TAIL LIGHT \$95.95 (95.55 see other sheet)

1508.17

Alternate Parts Y/00/00/00/00/00 CUM 00/00/00/00/00 Zip Code: 54904 Audatex Host
 Rate Name Default

Audatex Estimating 8.0.643 ES 01/03/2019 09:36 AM REL 8.0.643 DT 12/01/2018 DB 12/15/2018
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1.3 HRS WERE ADDED TO THIS ESTIMATE BASED ON AUDATEX'S TWO-STAGE REFINISH FORMULA.

VISA OR MASTERCARD (WE IMPOSE A 2% SURCHARGE FEE ON CREDIT CARD PAYMENTS) ANY SUPPLEMENTS THAT ARE LEFT OPEN ON YOUR ACCOUNT WILL BE BILLED TO YOUR INSURANCE COMPANY. A MECHANIC'S LIEN WILL REMAIN IN PLACE UNTIL THE ACCOUNT IS PAID IN FULL.

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.

Op Codes

- | | | |
|----------------------------|---|--------------------------------|
| * = User-Entered Value | ^ = Labor Matches System Assigned Rates | E = Replace OEM |
| NG = Replace NAGS | EC = Replace Economy | OE = Replace PXN OE Srpls |
| UE = Replace OE Surplus | ET = Partial Replace Labor | EP = Replace PXN |
| EU = Replace Recycled | TE = Partial Replace Price | PM = Replace PXN Reman/Rebt |
| UM = Replace Reman/Rebuilt | L = Refinish | PC = Replace PXN Reconditioned |
| UC = Replace Reconditioned | TT = Two-Tone | SB = Sublet Repair |
| N = Additional Labor | BR = Blend Refinish | I = Repair |
| IT = Partial Repair | CG = Chipguard | RI = R & I Assembly |
| P = Check | AA = Appearance Allowance | RP = Related Prior Damage |



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DC Dynamics LLC
 2652 Omro Rd
 Oshkosh, WI. 54904
 Phone: 920-230-2979 Fax: 920-230-2980
 Check us out on Facebook!

INVOICE
20081
 Org. Est. # 028912

Invoice from History

Work Completed : 01/03/2019 Date: **01/30/2019**

Lueders Power Systems - Jim Lueders
 1537 N Oakwood Rd. PO BOX 1757
 Oshkosh, WI 54904
 Home 920-379-3680

2014 RAM - 1500 Tradesman - 5.7L, V8 (345CI) VIN(T)
 Lic # : MU3435 Odometer In : 0
 VIN # : 3C6JR6DT6 EG257448

| Part Description / Number | Qty | Sale | Ext | Labor Description | Ext |
|---------------------------|-----|------|-----|-------------------|-----|
|---------------------------|-----|------|-----|-------------------|-----|

| | | | | | |
|-------------------------|------|-------|-------|--|--|
| Tail lamp 55277415AF | 1.00 | 91.00 | 91.00 | | |
|-------------------------|------|-------|-------|--|--|



Org. Estimate 95.55 Revisions 0.00 Current Estimate 95.55

| | |
|------------------|---------------|
| Labor: | 0.00 |
| Parts: | 91.00 |
| SubTotal: | 91.00 |
| Tax: | 4.55 |
| Total: | 95.55 |
| Bal Due: | \$0.00 |

[Payments - Visa - \$95.55]
 Vehicle Received: 1/3/2019

Customer Number : 1913

I hereby authorize the above repair work to be done with the necessary material and hereby grant you and your employees permission to operate the car or truck herein described on street, highways or elsewhere for the purpose of testing and/or inspection. An express mechanics lien is hereby acknowledged on above car or truck to secure the amount of repairs thereto. Warranty work has to be performed in our shop and cannot exceed the original cost of repair.

Signature _____ Date _____

Visit us on the web : www.dcdynamics.net

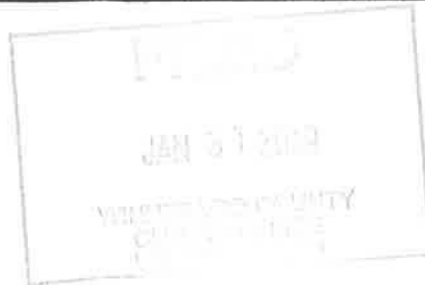
Our Email Address: fixit@dcdynamics.net

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19-000021

WISCONSIN MOTOR VEHICLE
CRASH REPORT

WINNEBAGO COUNTY SHERIFFS DEPT
4311 JACKSON STREET
OSHKOSH, WI 54903
(920) 236-7300

| | | | | | | | | |
|------|------------|--|-----|--|------------------|--|-----------------------------------|----------|
| UN | INDIV | Address 1537 N OAKWOOD RD OSHKOSH, WI 54904 , US | | Driver License Number L3624555714102 STATE: WISCONSIN COUNTRY: UNITED STATES | | | | |
| | | Equipment | | On Duty Crash | Safety Equipment | | | |
| | | Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY | | SHOULDER & LAP BELT | | | | |
| | | Helmet Use | | Helmet Compliance | | | | |
| | | Eye Protection | | Tint Compliance | | | | |
| | | 02 | 002 | Injury | | Injury Severity NO APPARENT INJURY | Airbag NON DEPLOYED | |
| | | | | Ejected NOT EJECTED | | Ejection Path NOT EJECTED/NOT APPLICABL | Trapped/Extricated NOT TRAPPED | |
| | | | | Medical Transport NOT TRANSPORTED | | EMS Agency Identifier | EMS Run # | |
| | | | | Hospital | | Date of Death | Time of Death | |
| | | | | Non Motorist | | Striking Unit # | Prior Action | Location |
| UNIT | INDIVIDUAL | Action | | | | | | |
| | | Action Other | | | | | | |
| | | Drug & Alcohol | | Suspected Alcohol Use YES | | 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 | | |
| | | 02 | 002 | Drug Type | | | | |
| | | | | Individual Condition APPEARED NORMAL | | | | |



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Jg

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19-000021

WISCONSIN MOTOR VEHICLE
CRASH REPORT

WINNEBAGO COUNTY SHERIFFS DEPT
4311 JACKSON STREET
OSHKOSH, WI 54903
(920) 236-7300

| | | | | | | |
|--|------------|---|--|----------------------------|---|--|
| Surface Type BLACKTOP (BITUMINOUS) | | Road Curvature STRAIGHT | | Road Grade LEVEL | | |
| Truck Bus or HazMat NO | | | | | | |
| Vehicle | | | | | | |
| 02 | 02 | License Plate Number MU3435 | Plate Type LTK - LIGHT TRUCK | St WI | Country of Issuance UNITED STATES | |
| | | Vehicle Identification Number 3C6JR6DT6EG257448 | Make DODGE | Year 2014 | Model RAM | |
| UNIT | VEHICLE | Color WHI - WHITE | Body Style PK - PICKUP | | Bus Use NOT A BUS | |
| | | Initial Contact Point 8--LEFT SIDE REAR | Vehicle Damage | | | |
| | | Extent Of Damage MINOR DAMAGE | 6--REAR, 7--LEFT REAR CORNER, 8--LEFT SIDE REAR | | | |
| | | Towed Due To Damage NOT TOWED | Vehicle Removed By OPERATOR | | | |
| UNIT | VEHICLE | What Driver Was Doing GOING STRAIGHT | Vehicle Factors | | | |
| | | Driver Prior Action Other | NOT APPLICABLE | | | |
| | | Driver Actions NO CONTRIBUTING ACTION | | | | |
| 02 | 02 | Driver Distractions UNKNOWN IF DISTRACTED | | | | |
| | | Owner Name LUEDERS POWER SYSTEMS INC (920) 379-3680 | Owner Address 1537 N OAKWOOD RD OSHKOSH, WI 54904 , US | | | |
| Sequence Of Events | | | | | | |
| UNIT | VEHICLE | 01 | Event MOTOR VEH IN TRANSPORT | | | |
| | | 02 | Event | | | |
| | | 03 | Event | | | |
| | | 04 | Event | | | |
| Policy Holder | | | | | | |
| UNIT | VEHICLE | Insurance Company ERIE-INS-CO | Individual JAMES LUEDERS | | | |
| | | Individual | | | | |
| IT | INDIVIDUAL | Driver JAMES P LUEDERS (920) 379-3680 | Citations Issued 0 | Sex MALE | | |
| | | | Date of Birth 04/21/1957 | Race WHITE | | |

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19-000021

WISCONSIN MOTOR VEHICLE
CRASH REPORT

WINNEBAGO COUNTY SHERIFFS DEPT
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OSHKOSH, WI 54903
(920) 236-7300

| | | | | | | | |
|-------------------|---|------------------|---|--|---|--|----------------|
| UNIT | Medical transport NOT TRANSPORTED | | EMS Agency Identifier | | EMS Run # | | |
| | Hospital | | Date of Death | | Time of Death | | |
| | Non Motorist | | Striking Unit # | Prior Action | Location | | To/From School |
| | Action | | | | | | |
| | Action Other | | | | | | |
| | 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 01 001 | Carrier | | | | | | |
| | <input checked="" type="checkbox"/> Use Vehicle Owner Same as Carrier | | | Source VEHICLE-SIDE | | | |
| | Name WINNEBAGO COUNTY HIGHWAY DEPARTMENT | | | Address 901 W COUNTY ROAD Y OSHKOSH, WI 54901 , US | | | |
| | GVWR MORE THAN 26,000 LB | | Vehicle Configuration SINGLE UNIT TRUCK (3 OR MORE AXLES) | | Cargo Body Type DUMP | | |
| | US DOT # | | Carrier Type NOT IN COMMERCE/GOVERNMENT | | Permitted Load | | |
| | <input type="checkbox"/> OS/OW Load | WI Permit Number | <input type="checkbox"/> Permitted Vehicle On Permitted Route | <input type="checkbox"/> Escort Vehicle Required By Permit | <input type="checkbox"/> Escort Vehicle Present | | |
| | Measured Height | | Measured Length | | Measured Width | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

Unit Summary

| | | | | | | |
|------------|---|--|---|----------------------------|--|--|
| UNIT 02 | Unit Status IN TRANSIT | | Vehicle Operating As Classification D CLASS | | Unit Type TRUCK | |
| | Vehicle Type UTILITY TRUCK/PICKUP TRUCK | | | | Operating As Endorsements | |
| | Total Occs 1 | Train/Bus # Injured | Total # Citations Issued 0 | Total Trailers 0 | Total HazMat Types 0 | |
| | Insurance? YES | Direction Of Travel SOUTHBOUND | <input type="checkbox"/> Pre Crash Tire Mark | Speed Limit 35 | 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 | |
| | | | | | | |

2PL0T1TJPL
19-000021

WISCONSIN MOTOR VEHICLE
CRASH REPORT

WINNEBAGO COUNTY SHERIFFS DEPT
4311 JACKSON STREET
OSHKOSH, WI 54903
(920) 236-7300

| | | | | | | |
|-------------------------------|---|---|--|--|----------------------|--|
| 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 FAILED TO YIELD RIGHT-OF-WAY | | | | | |
| 01 | 01 | Driver Distractions UNKNOWN IF DISTRACTED | | | | |
| | | Owner Name WINNEBAGO COUNTY HIGHWAY DEPARTMENT (920) 232-1700 | | Owner Address 901 W COUNTY ROAD Y OSHKOSH, WI 54901 , US | | |
| Sequence Of Events | | | | | | |
| UNIT | 01 | 01 | Event MOTOR VEH IN TRANSPORT | | | |
| | | | Event | | | |
| | | | Event | | | |
| | | | Event | | | |
| 04 | 03 | Event | | | | |
| | | Event | | | | |
| Policy Holder | | | | | | |
| UNIT | Insurance Company WINNEBAGO COUNTY | | Government WINNEBAGO COUNTY HIGHWAY DEPARTMENT | | | |
| | Individual | | | | | |
| UNIT | INDIVIDUAL | Driver JAMES A STADTMUELLER (920) 232-1700 | | Citations Issued 0 | Sex MALE | |
| | | Address 901 W COUNTY ROAD Y OSHKOSH, WI 54901 , US | | Date of Birth 11/18/1966 | Race WHITE | |
| | | Driver License Number S3354416641805 | | STATE: WISCONSIN COUNTRY: UNITED STATES | | |
| | | Equipment | | Safety Equipment | | |
| 01 | 001 | On Duty Crash WINTER-HWY-MAINTENANC | | SHOULDER & LAP BELT | | |
| | | Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY | | Helmet Compliance | | |
| | | Helmet Use | | Tint Compliance | | |
| | | Eye Protection | | Airbag NON DEPLOYED | | |
| Injury | | Injury Severity NO APPARENT INJURY | | Ejection Path NOT EJECTED/NOT APPLICABL | | |
| Ejected NOT EJECTED | | Trapped/Extricated NOT TRAPPED | | | | |

2PLOT1TJPL
19-000021

WISCONSIN MOTOR VEHICLE
CRASH REPORT

WINNEBAGO COUNTY SHERIFFS DEPT
4311 JACKSON STREET
OSHKOSH, WI 54903
(920) 236-7300

Location

| | | |
|---|--------------------------------|----------------------------|
| INTERSECTION ON N OAKWOOD RD AT OAKWOOD CIR (2) IN THE TOWN OF ALGOMA IN WINNEBAGO COUNTY | Latitude 44.036881297 | Longitude -88.602816431 |
| | X Coordinate 371574.65625 | Y Coordinate 4877218 |
| | Structure Type NO STRUCTURE | |

Crash Scene

| | | |
|--|--|-------------------------------------|
| First Harmful Event MOTOR VEH IN TRANSPORT | First Harmful Event Location ON ROADWAY | |
| Manner of Collision 06-SIDESWIPE/OPPOSITE DIRECTION | Light Condition DAYLIGHT | |
| Road Surface Condition(s) SNOW | ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC) | |
| Environment Factor(s) WEATHER CONDITIONS | | |
| Weather Condition(s) SNOW | | |
| 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 INTERSECTION | Intersection Type T-INTERSECTION |

Unit Summary

| | | | | | | |
|------------|---|--|--|---------------------|---|--|
| UNIT 01 | Unit Status IN TRANSIT | Vehicle Operating As Classification B CLASS | | Unit Type TRUCK | | |
| | Vehicle Type SNOW PLOW | Operating As Endorsements | | | | |
| | Total Occs 1 | Train/Bus # Injured | Total # Citations issued 0 | Total Trailers 0 | Total HazMat Types 0 | |
| | Insurance? YES | Direction Of Travel WESTBOUND | <input type="checkbox"/> Pre Crash Tire Mark | Speed Limit 35 | 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 STOP SIGN | | Traffic Control Inoperative/Missing NO | |
| | Surface Type BLACKTOP (BITUMINOUS) | | Road Curvature STRAIGHT | | Road Grade LEVEL | |
| | Truck Bus or HazMat TRUCK OR TRUCK COMBINATION > 10,000LBS GVWR/GCWR | | | | | |

| | | | | | |
|-------------------------------|--|---|--------------|--------------------------------------|--|
| UNIT 01 VEHICLE | Vehicle | | | | |
| | License Plate Number 77420 | Plate Type MUN - MUNICIPAL | St WI | Country of issuance UNITED STATES | |
| | Vehicle Identification Number 1HTWXAHT3AJ181894 | Make INTERNATIONAL | Year 2010 | Model UNKNOWN | |
| | Color ONG - ORANGE | Body Style SP - SPECIAL DESIGN VEHICLE | | Bus Use NOT A BUS | |
| | Initial Contact Point 11-LEFT FRONT CORNER | Vehicle Damage | | | |
| Extent Of Damage NO DAMAGE | NO DAMAGE | | | | |

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19-000021

WISCONSIN MOTOR VEHICLE
CRASH REPORT

WINNEBAGO COUNTY SHERIFFS DEPT
4311 JACKSON STREET
OSHKOSH, WI 54903
(920) 236-7300

2PL0T1TJPL

| | | | | | | | |
|--|--------------------------------------|---|------------------------------------|---|--|--|--------------------|
| Document Number Override | | Primary Crash Document # | | Agency Crash Number 19-000021 | | Investigating Officer/Deputy OFFICER MATTHEW WEISSE | |
| Crash Date 01/02/2019 | | Crash Time 12:09 PM | | Date Arrived 01/02/2019 | | Time Arrived 12:24 PM | |
| Date Notified 01/02/2019 | | Time Notified 12:09 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 checked="" type="checkbox"/> Reportable | | Crash Type DT4000 (STANDARD CRASH) | | <input type="checkbox"/> Amended | | <input type="checkbox"/> Secondary Crash | |

Description

| | | | |
|-----------------------------|--|--------------------------------|--|
| Diagram | | Reconstruction By | |
| <p>DRAWING NOT TO SCALE</p> | | Photos By | |
| | | Additional Information NONE | |
| | | | |

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

UNIT #2 WAS TRAVELING S/B ON N. OAKWOOD RD. UNIT #1 WAS STOPPED AT THE STOP SIGN ON OAKWOOD CIR., AT N. OAKWOOD RD. DRIVER OF #1 STATED HE DID NOT SEE UNIT #2 AND BEGAN TO TURN N/B ONTO N. OAKWOOD RD. THE PLOW BLADE OF #1 STRUCK #2 IN THE DRIVER'S SIDE REAR QUARTER PANEL, MAKING A 3 FOOT GOUGE ALONG THE SIDE OF TRUCK, AND DAMAGED THE DRIVER'S SIDE REAR TAIL LAMP. UNITS #1 AND #2, MOVED POSITIONS PRIOR TO POLICE CONTACT. W28

Ertmer, Sue

From: Ertmer, Sue
Sent: Monday, January 28, 2019 1:54 PM
To: 'Erickson, Amanda K.'
Cc: Petraszak, Doug
Subject: RE: Erie Claim #: A00001531096

Thanks, Amanda.

Please be aware that we can't start the process until we hear from Mr. Lueders. Thank you.

From: Erickson, Amanda K. [mailto:Amanda.Erickson@ERieInsurance.com]
Sent: Friday, January 25, 2019 1:17 PM
To: Ertmer, Sue <SErtmer@co.winnebago.wi.us>
Subject: RE: Erie Claim #: A00001531096

Unfortunately, I do not have the estimate. I will ask my insured to contact you directly. He wanted to go through the claimant's insurance so Erie has not handled his damages or gotten his estimate. His name is Jim Lueders and I gave him your info to contact you.

Thank you.

From: Ertmer, Sue [mailto:SErtmer@co.winnebago.wi.us]
Sent: Wednesday, January 23, 2019 4:02 PM
To: Erickson, Amanda K.
Subject: RE: Erie Claim #: A00001531096

Hi Amanda.

We do need to know the amount you're requesting.

From: Erickson, Amanda K. [mailto:Amanda.Erickson@ERieInsurance.com]
Sent: Wednesday, January 23, 2019 3:30 PM
To: 'sertmer@co.winnebago.wi.us'
Subject: FW: Erie Claim #: A00001531096

From: Erickson, Amanda K.
Sent: Wednesday, January 23, 2019 1:04 PM
To: 'sertmer@co.winnebago.wi.us'
Subject: Erie Claim #: A00001531096

Hello Sue,

Per our earlier conversation, this is the police report for your driver James Stadtmeuller.

Erie claim #: A00001531096
Please let me know what else is needed.

Thank you!

Amanda Erickson, LPCS

Inside Claims Representative / Claims Department / 309-698-7297 / Illinois Branch Office



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Lexis.com
Law Firm accounts
800-543-6862

PAGE COUNT: 7

CLIENT : 7350
DIVISION : AUTO
ADJUSTER : A622A
CLAIM : A00001531096

TRANSACTION # : 762200422
DATE : 01/18/2019

DATE OF LOSS : 01/02/2019 TIME OF LOSS : 01:01 AM
STREET :
CITY : OSHKOSH
COUNTY : WINNEBAGO
STATE : WI

INVESTIGATING AGENCY : WINNEBAGO CO SO
REPORT NUMBER : 19000021
REPORT TYPE : Auto Accident
PARTY 1 : JIM LUEDERS
PARTY 2 :
PARTY 3 :

CAR : RAM TRUCK MAKE : RAM YEAR : 2014
TAG :

DRIVER LICENSE : L3624555714102
ADDITIONAL INFO :

NOTE :

THANK YOU FOR YOUR ORDER!