



Winnebago County
Office of the County Clerk

The Wave of the Future

NOTICE OF CLAIM

Date: March 3, 2017
To: Doug, Linda and Joan
Re: Claim from Matt Hoffman for damage to his vehicle caused by a Winnebago County snow plow.

This claim will be presented to the County Board at their March 21, 2017 meeting.

Gregor, Cassie

From: Matt Hoffman <Matt.Hoffman@mercmarine.com>
Sent: Friday, March 03, 2017 2:49 PM
To: Gregor, Cassie
Cc: 'Matt Hoffman'
Subject: Plow Truck Damage Documentation
Attachments: Police Report.pdf; Matthew Hoffman - Tahoe estimate.pdf; Safelight Glass bill.pdf; 20170302_171828.jpg; 20170302_171900.jpg; 20170302_171914.jpg; 20170302_171905.jpg; 20170302_171949.jpg; windshield.jpg

Hi Cathy, Attached is my statement as to what happened, pictures, the bill that I already paid for the glass repair, the estimate for the body work from Tony's Auto Body and the police report.

On 2/24, I was driving to work to Fond du Lac, southbound on highway 41. Around 7:20 am, a county plow that was going northbound on highway 41 threw a bunch of snow/slush/ice over the median and directly into my SUV. It instantly shattered my windshield and I called the Sheriff's department to get a police report. It wasn't until later in the day that I further examined the vehicle and realized that there was a dent in the bumper as well as a dent in the hood, along with 3 smaller, subtle dings in the hood. I've already had the windshield replaced and have an estimate attached from Tony's Auto Body for the body work. Some of the small dings may not come through very well on the pictures.

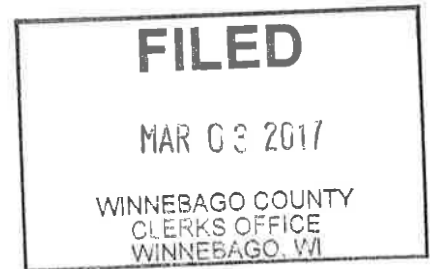
Windshield - \$241.13
Body Damage - \$1640.10

Total - \$1881.23

Please let me know if you need anything else or any other further documentation. I'm assuming that I can wait until this is settled before I get the body work done, or would you like me to get it fixed first?

Thanks,

Matt Hoffman
Forecast Center of Excellence Lead
Mercury Marine
Office: 920-924-1302
Cell: 920-410-3390



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Safelite® AutoGlass

SAFELITE AUTOGLASS
2430 ALGOMA BLVD
OSHKOSH, WI 54901

Date & Time: 02/27/17 12:08PM

** SERVICE QUESTIONS **
** CALL Customer Sat 800 phone number (8008352257) **

Customer:
HOFFMAN, MATTHEW
316 SUNNYBROOK DRIVE
OSHKOSH, WI 54904

Home Phone: 920-410-3390
Work Phone:
Service Phone: 920-410-3390
Work Order #: 01867_567544
(05472_567544)

Year	Make	Model
2010	CHEVROLET	TAHOE
License	Style	Stock/Unit#
181YSC	4 DOOR UTILITY	
Mileage	VIN	
1	1GNUKBE07AR159280	
Purchase Order#	Claim #	
	c010749wi17	

Qty	Part	List Price	Selling Price	Flat Labor	Kit	MTRL
1	DW01658 CBY	216.35	103.85	85.80	40.00	0.00

Technician Name	Technician ID
Christopher	1867-590

Technician Notes

VEHICLE PRE-INSPECTION

Area:	Hood
Damages:	Dented
Notes/Memo	

Part Subtotal:	143.85
Flat Labor Subtotal:	85.80
Subtotal:	229.65
Sales Tax:	11.48
Total:	241.13

Deductible: 500.00

Promo Discount: 0.00

Amount to Collect: 241.13

Payment Amount: 0.00

Amount Due: 241.13

Estimate Summary for: \$241.13. I authorize Safelite AutoGlass to provide the above-referenced goods and services and to install or repair glass and related parts that are manufactured by Safelite or another aftermarket manufacturer. Subject to completion of the work, I assign to Safelite any claim that I have under my insurance policy to recover, and authorize my insurance company to pay Safelite the balance due. If said amount is not paid in full by my insurance company, I agree to pay any unpaid balance. If paying by check, and my check is unpaid for sufficient or uncollected funds, Safelite may electronically debit my account for the principle check amount and a service fee as allowable by law. I have the right to select the repair facility of my choice. My technician has advised me of the Minimum Drive Away Time. In most cases, the approximate length of time to complete the tasks detailed on this work order is 1 to 1.5 hours.

Authorized By Phone: HOFFMAN, MATTHEW
Authorization Time: 02/27/17 12:08PM
Approval Phone Number: 920-410-3390

FILED

MAR 03 2017

WINNEBAGO COUNTY
CLERKS OFFICE
WINNEBAGO, WI

FILED

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

MAR 03 2017

WINNEBAGO COUNTY
CLERKS OFFICE
WINNEBAGO, WI

*** PRELIMINARY ESTIMATE ***

02/27/2017 04:44 PM

Owner

Owner: MATTHEW HOFFMAN
Address: 316 SUNNYBROOK DR
City State Zip: Oshkosh, WI 54904
Email: bevhoffman@new.rr.com

Cell: (920)410-3390
FAX:

Control Information

Loss Date/Time:
Deductible: None

Loss Type: Other

Inspection

Inspection Date: 02/27/2017 04:43 PM
Inspection Location: TONY'S
City State Zip: Oshkosh, WI 54904
Primary Impact: Front
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.

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

City State Zip: Oshkosh, WI 54904

Target Complete Date/Time:

Days To Repair: 6

Vehicle

OEM Part Price Quote ID: ****

2010 Chevrolet Tahoe LT1 4 DR Wagon
8cyl Gasoline 5.3 FLEX
6-Speed Automatic

Lic. Plate: 181 YSC
Lic Expire:
Prod Date: 01/2010
Veh Insp# :
Condition: Good
Ext. Color: GOLD
Ext. Refinish: Two-Stage

Lic State: WI
VIN: 1GNUKBE07AR159280
Mileage: 130,599
Mileage Type: Actual
Code: U7412A
Int. Color:
Int. Refinish: Two-Stage

Options

4-Wheel Drive
Aluminum/Alloy Wheels

AM/FM CD Player
Amplifier

Alarm System
Anti-Lock Brakes

Auto Headlamp Control	Auto Load Leveling	Auto Locking Hubs (4WD)
Automatic Dimming Mirror	Bodyside Moldings	Bucket Seats
Camper/Towing Package	Cargo/Trunk Mat	Cargo/Trunk Net
Center Console	Color-Keyed Bumper(s)	Cruise Control
Daytime Running Lights	Dual Air Conditioning	Dual Airbags
Dual Power Seats	Dual Zone Auto A/C	Emergency S.O.S. System
Flip-Up Liftgate Window	Floor Mats	Fog Lights
Full Size Spare Tire	Halogen Headlights	Head Airbags
Heated Power Mirrors	Illuminated Visor Mirror	Intermittent Wipers
Keyless Entry System	Leather Seats	Leather Steering Wheel
Lighted Entry System	Limited Slip Differential	MP3 Decoder
Overhead Console	Power Adjustable Pedals	Power Brakes
Power Door Locks	Power Steering	Power Windows
Privacy Glass	Rear Heater	Rear Seat Audio Controls
Rear Window Defroster	Rear Window Wiper/Washer	Reverse Sensing System
Roof/Luggage Rack	Running Boards	Side Airbags
Split Folding Rear Seat	Stability Cntrl Suspensn	Strg Wheel Radio Control
Tachometer	Theft Deterrent System	Tilt Steering Wheel
Tinted Glass	Tire Pressure Monitor	Tow Hooks
Traction Control System	Trip Computer	

Damages

Line	Op	Guide	MC	Description	MFR.Part No.	Price	ADJ% B%	Hours	R
1	RI	56		Frnt Bumper Cvr Overhau	R & I Assembly			4.0	SM
2	I	6		Cover,Front Bumper	Repair			2.5*	SM
3	L	6	13	Cover,Front Bumper	Refinish			4.6	RF
					3.3 Surface				
					0.6 Two-stage setup				
					0.7 Two-stage				
4	I	83		Panel,Hood	Repair			4.5*	SM
5	L	83		Panel,Hood	Refinish			4.0	RF
					3.3 Surface				
					0.7 Two-stage				
6	EC			FLEX ADDITIVE	Replace Economy	\$12.00*			SM
7	EC			CAR COVER	Replace Economy	\$7.00*			SM
8	UC			HAZ WASTE	Replace Reconditioned	\$5.00*			SM
9	EC			COROSSION PROTECTION	Replace Economy			0.3*	SM*
9 Items									

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

Estimate Total & Entries

Other Parts		\$24.00	
Paint & Materials	8.6 Hours @ \$40.00	\$344.00	
Parts & Material Total			\$368.00
Tax on Parts & Material	@ 5.000%		\$18.40

Labor	Rate	Replace Hrs	Repair Hrs	Total Hrs	
Sheet Metal (SM)	\$60.00	4.3	7.0	11.3	\$678.00
Mech/Elec (ME)	\$85.00				
Frame (FR)	\$70.00				
Refinish (RF)	\$60.00	8.6		8.6	\$516.00

Labor Total		19.9 Hours		\$1,194.00
Tax on Labor	@ 5.000%		\$59.70	
Gross Total				\$1,640.10
Less: Deductible				None-
Net Total				\$1,640.10

Alternate Parts Y/00/00/00/00/00 CUM 00/00/00/00/00 Zip Code: 54904 Audatex Host
 OEM Part Prices DT 02/27/2017 04:45 PM EstimateID 265610639588728832 QuoteID ****
 Rate Name Default

Audatex Estimating 8.0.134 ES 02/28/2017 08:50 AM REL 8.0.134 DT 02/01/2017 DB 02/15/2017
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2.0 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/Reblt |
| 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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2PL0QJJ8WB
17-000616

Wisconsin Motor Vehicle
Crash Report

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

2PL0QJJ8WB

Document Number Override		Primary Crash Document #	Agency Crash Number 17-000616	Investigating Officer/Deputy OFFICER ROGER PETERS	
Crash Date 02/24/2017		Crash Time 07:21 AM	Date Arrived 02/24/2017	Time Arrived 08:17 AM	
Date Notified 02/24/2017		Time Notified 08:01 AM	Total Units 01	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

<p>Diagram</p>	Reconstruction By
	Photos By
	Additional Information None

Narrative: I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.
 UNIT 1 WAS SB ON I 41 IN THE LEFT LANE WHEN HIS VEH WAS STRUCK BY A LARGE AMOUNT OF SLUSH/ICE/SNOW THAT WAS THROWN OVER THE CONCRETE MEDIAN BARRIER BY A NB SNOW PLOW THAT WAS OPERATED BY THE WINNEBAGO COUNTY HIGHWAY DEPT. WE COULD NOT IDENTIFY WHICH PLOW TRUCK/DRIVER DID THIS. THE SLUSH SHATTERED THE WINDSHIELD OF UNIT 1.

WINNEBAGO COUNTY HIGHWAY DEPARTMENT
 801 W CTH Y
 OSHKOSH WI 54901
 920 236-4528

2PL0QJJ8WB
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Location

ON IH41 SB 1000 FT N OF STH26 SB IN THE TOWN OF NEKIMI IN WINNEBAGO COUNTY	Latitude	Longitude
	X Coordinate	Y Coordinate
	Structure Type	

Crash Scene

First Harmful Event Other Non-Collision	First Harmful Event Location On Roadway	
Manner of Collision No Collision W/Vehicle In Transport	Light Condition Daylight	
Road Surface Condition(s) Wet, Snow, Slush	Roadway Factor(s)	
Environment Factor(s) Weather Conditions	Road Surface Condition (Wet, Icy, Snow, Slush, Etc)	
Weather Condition(s) Snow, Sleet/Hail		
Animal Type	Relation To Trafficway Trafficway - On Road	
Crash Classification - Location Public Property	Crash Classification - Jurisdiction No Special Jurisdiction	
Tribal Land	Access Control Full Control	Special Study
Within Interchange Area NO	Junction Location Non-Junction	Intersection Type Not an Intersection

Unit Summary

UNIT	01 Unit Status In Transit	Vehicle Operating As Classification D CLASS		Unit Type Automobile		
	Vehicle Type (Sport) Utility Vehicle			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 70	Total Lanes 3	
	Most Harmful Event: Collision With Other Non-Collision		Special Function No Special Function		Emergency Motor Vehicle Use Not Applicable	
	Traffic Way Divided Hwy W/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			Reporting Threshold No		

Vehicle

UNIT	VEHICLE	01 License Plate Number 181YSC	Plate Type AUT - Automobile	St WI	Country of Issuance UNITED STATES	
		Vehicle Identification Number 1GNUKBE07AR159280	Make CHEVROLET	Year 2010	Model TAHOE LT	
		Color GLD - Gold	Body Style SP - SPECIAL DESIGN VEHICLE		Bus Use Not A Bus	
		Initial Contact Point Top	Vehicle Damage			
		Extent Of Damage Functional Damage	Top			

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17-000616

Wisconsin Motor Vehicle Crash Report

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(920) 236-7300

01 UNIT VEHICLE	Towed Due To Damage Not Towed	Vehicle Removed By OPERATOR
	What Driver Was Doing Going Straight	Vehicle Factors
	Driver Prior Action Other	Not Applicable
	Driver Actions No Contributing Action	
	Driver Distractions Not Distracted	
	Vehicle Owner	
01 VEHICLE OWNER	Individual MATTHEW R HOFFMAN (920) 410-3390	Address 316 SUNNYBROOK DR OSHKOSH, WI 54904 , US
	Sequence Of Events	
01	Event Other Non-Collision	
02	Event	
03	Event	
04	Event	
UNIT	Policy Holder	
	Insurance Company KEMPER-NATIONAL	Individual MATTHEW HOFFMAN

2PL0QJJ8WB
17-000616

Wisconsin Motor Vehicle
Crash Report

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

Individual

UNIT INDIVIDUAL	01 001	Driver MATTHEW R HOFFMAN (920) 410-3390	Citations Issued 0	Sex Male
			Date of Birth 09/19/1966	Race WHITE
		Address 316 SUNNYBROOK DR OSHKOSH, WI 54904 , US	Driver License Number H1555566633900 State: Wisconsin Country: UNITED STATES	
		Equipment On Duty Crash	Safety Equipment	
		Seat Position 1--Front Seat-Left Side (Driver/Motorcycle/Bicycl	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
		Non Motorist	Striking Unit #	Prior Action
		Action	Location	To/From School
		Action Other		
		Drug & Alcohol	<input type="checkbox"/> Suspected Alcohol Use	<input type="checkbox"/> Suspected Drug Use
		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		

