



## Recommendation Memo

**To:** Eric Earls, Department of Public Works  
**From:** Margie White, Finance Department X 9241  
**Date:** July 7, 2023  
**Re:** Council Claim

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Please investigate the attached claim against the City of Warwick involving your department and return this recommendation to the Treasury office as soon as possible.

**Date of Incident:** 06/11/23

**Police/tow/auto report:** N/A

**Claimant:** Victoria Almquist  
10 Admiralty Drive Apt 8  
Middletown, RI 02842

**Claim:** Windshield was hit by a softball while vehicle was parked at City Park.

<b>Estimates:</b>	The Glassman	\$279.62
	Glass America	\$343.00
	Citywide Glass	\$320.00

**Department Recommends:**

**Approval** of this claim for **\$0**

**Denial** of this claim (please include comments below):

The City cannot be responsible for an errant softball hitting a vehicle is parked in the lots nearby the softball fields at City Park. This department denies responsibility for vehicle damage.

Director Signature \_\_\_\_\_

Date \_\_\_\_\_

7/13/23

TO THE HONORABLE CITY COUNCIL

The undersigned respectfully petitions your body for compensation for injuries or damages sustained as follows:



Please print information that pertains to your claim.

Motor Vehicle Accident  Pothole  Property Damage  Tax Waiver  Other

Claimant Name: Victoria Almquist

Address: 10 Admiralty Dr, Apt 8

City, State, Zip: Middletown, RI 02842

Telephone #: 6515007851

Date of incident (M/D/Y) 06/11/23 Time: 10:00 AM  PM

Description of Incident/Claim: I parked at Warwick City Park near the softball/baseball fields for my RIWSL soccer game on Sunday morning June 11th. When I got back to my car, the front windshield of my 2005 Toyota Highlander was shattered. A member of a Warwick Freedom League softball team came over and explained that my car had been hit by a softball. He said that the league has insurance through the city of Warwick to cover damage caused by the league. The damage to the windshield was extensive, blocking the driver's view. The entire windshield had to be replaced.

Vehicle Year: 2005 Make: Toyota Model: Highlander Odometer reading: 174,684

The Pothole was located on N/A road

I notified the Finance I Public Works department on N/A (date).

The nature of my property damage is: Shattered windshield, damage to windshield wipers.

Additional information about Tax Waiver (include letter from Tax Collector stating adverse decision)

I request reimbursement in the amount of \$ 320.00

SIGNATURE OF CLAIMANT: [Signature] DATE 06/30/23

**AFFIDAVIT**

(Petitioner Name) Victoria Almquist, being duly sworn, deposes and states:

1. I have petitioned the City Council of the City of Warwick for compensation for losses arising from an incident which occurred on (date) 06/11/23 as a result of (please provide brief description):

A softball hitting my front windshield, shattering the glass. The windshield needed to be replaced.

Said claim was filed with the Finance Department on 06/30/23 (date).

2. Check appropriate box or boxes:

I have not sought compensation, nor will I at any time seek compensation from any source (including, but not limited to, any insurance company) other than the City of Warwick, for any loss arising from the above-described incident, understanding for pothole claims, the maximum recovery is \$300.00 under Rhode Island General Law § 24-5-13 (b).

I have received compensation from a source or sources other than the City of Warwick, (including, but not limited to, any insurance company) in connection with this incident. The amount(s) which I received total \$ \_\_\_\_\_ and the source of the other payment(s) was \_\_\_\_\_

I am seeking, or intend to seek, compensation from a source or sources other than and/or in addition to the City of Warwick (including, but not limited to, any insurance company), for any loss arising from the above described incident. The source or sources from which I seek such other compensation is/are: \_\_\_\_\_

3. In the event that the Warwick City Council should deny my claim, I understand that I may pursue a claim against any other party who may be liable for my loss.

4. I understand that I am not entitled to recover more than the amount of my actual loss. If the City of Warwick pays any amount to me in connection with the above described incident, and if I should receive any amounts from any source other than the City of Warwick with respect to the above described incident, I will report such other receipt(s) to the Finance Department of the City of Warwick.

5. I have personal knowledge of the facts aforesaid.

*Victoria Almquist*  
Signature of Claimant or its Representative

VICTORIA ALMQUIST  
Printed Name

State of Rhode Island  
County of Newport

Subscribed and sworn to before me on this 30th day of June, 2023



*Marjorie A. Lawton*  
(Notary Public)  
My Commission Expires 6/15/25  
JD #48257



STATE OF RHODE ISLAND  
DIVISION OF MOTOR VEHICLES

600 New London Avenue  
Cranston RI 02920-3024  
Web Address: WWW.DMV.RI.GOV



VICTORIA C ALMQUIST  
10 ADMIRALTY DR APT 8  
MIDDLETOWN RI 02842-6255

Date: 01/12/2023

Registration Certificate

REG NUMBER: <b>2F815</b>	PLATE TYPE: <b>VETERAN</b>	PLATE DESIGN: <b>STANDARD</b>	VEHICLE TYPE: <b>PASSENGER</b>	DRIVERS LICENSE: <b>40256603</b>	REG EXP DATE: <b>01/31/2025</b>
YEAR: <b>2005</b>	MAKE: <b>TOYOTA</b>	MODEL: <b>HIGHLANDER</b>	BODY TYPE: <b>SPORT UTILITY</b>	MAJOR COLOR: <b>BLUE</b>	MINOR COLOR: <b>BLUE</b>
VEHICLE IDENTIFICATION NUMBER: <b>JTEGP21A550048089</b>		RENEWAL FEE: <b>\$112.50</b>	GROSS WEIGHT: <b>4270</b>	# OF PASSENGERS: <b>5</b>	# OF CYLINDERS: <b>6</b>
FUEL TYPE: <b>GAS</b>	CARRYING CAPACITY: <b>N/A</b>	LENGTH: <b>N/A</b>	CCs: <b>N/A</b>	MAX SPEED: <b>0</b>	
REGISTERED OWNER/LEASING COMPANY: <b>VICTORIA C ALMQUIST 10 ADMIRALTY DR APT 8 MIDDLETOWN RI 02842-6255</b>			SECOND OWNER:/LESSEE		

- TAX TOWN: **MIDDLETOWN**
- Notice: The law requires that the DMV be notified within 10 days of any change in name or address. Please visit our website to update your address online.
- Plate Cancellation -Excise Tax: Plates must be **cancelled** with the DMV to ensure the vehicle is removed from the city or town tax rolls. Please retain your receipt as proof of cancellation.
- Every registration plate shall be at all times securely fastened in a horizontal position and be in a condition to be clearly legible. Validation stickers are only to be placed securely on the lower right corner of the registration plate.
- Registration Certificate shall at all times be carried in the vehicle to which it refers or shall be carried by the person driving or in control of such vehicle.
- Proof of valid insurance/financial security is required as per Rhode Island General Laws § 31-47 (Motor Vehicle Reparations Act).
- It is your responsibility to renew your registration prior to the expiration date. Failure to do so may result in the assignment of new plates.
- Failure to obtain an **Emissions Inspection** on or before **01/14/2025** will result in this vehicle being suspended.
- Not valid without official signature of Administrator.
- Any vehicle operating in excess of legal weight limits is required to have an overweight permit per Chapter 31-25 of the Rhode Island General Laws. Failure to obtain an overweight permit may result in the imposition of fines and/or other penalties.

WALTER R. CRADDOCK  
Administrator  
Division Of Motor Vehicles

01/12/2023

**THE GLASSMAN**  
**473 OLD FALL RIVER RD. #8**  
**SWANSEA MA 02777**  
**(508)369-8413 Fax:(508)676-8216**  
**Tax# 27-3502746**

**Quote: 37**  
**Date:06/22/2023**

Customer

VICTORIA ALMQUIST  
 10 ADMIRALTY DR #8  
 MIDDLETOWN RI 02842

H (651)500-7851

Csr:COREY      Tech:                      PO                                      Terms:C.O.D

Vehicle:2005 TOYOTA HIGHLANDER 4 DOOR UTILITY

<u>Qty</u>	<u>Part / Description</u>	<u>List Price</u>	<u>Material</u>	<u>Labor</u>	<u>Item Total</u>
1	FW02474GBN - Windshield Green Tint/Blue Shade (Solar)	264.80	119.16	100.00	219.16
1.00	HAH000448 - Adhesive(Nags) (Fast-Cure Urethane/Dam/Primer) (2.		30.00	0.00	30.00
1.00	GGG 2266 - Moulding(Gold Glass Group) Black	21.95	18.71	0.00	18.71

Job Location Mobile

VICTORIA ALMQUIST  
 10 ADMIRALTY DR #8  
 MIDDLETOWN RI 02842

Signature \_\_\_\_\_

<u>Material</u>	<u>Labor</u>	<u>Tax</u>	<u>Total</u>	<u>Deductible</u>	<u>Payments</u>	<u>Balance</u>
167.87	100.00	11.75	279.62	0.00	0.00	279.62

Store Copy

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2023-06-23  
Quote #5966145



Job Type: N/A Scheduled Date: N/A Scheduled Time: N/A

Bill To:  
COD CONNECTICUT

Remit Payment To:  
Glass America  
32347 Collection Center Drive  
Chicago, IL 60693  
833-227-4527

Customer Information		Vehicle Information	
Customer Name	Victoria	Year	2005
E-mail	almqu072@umn.edu	Make	Toyota
Address	Middletown, RI 02842	Model	Highlander
Telephone	651-500-7851	VIN	JTEGP21A550048089
		Unit #	
		Odometer	0

Bill To	COD CONNECTICUT	Policy Number	
Date of Loss	0000-00-00	PO #	

Qty	UOM	List	Extended	Part Number	Description	Total
1.00	ea	\$301.44	\$147.39	FW02476GGNN	Windshield (Heated Wiper Park, Solar, Heated) -	\$147.39
1.00	ea	N/A	\$120.00	SRI00600	Remove And Install	\$120.00
1.00	ea	\$48.00	\$15.00	HAH000448	Adhesive (Fast-Cure Urethane/Dam/Primer, Fast-Cure Urethane/Dam/	\$15.00
1.00	ea	\$40.13	\$40.13	WFT F2266	Moulding	\$40.13
					Sales Tax	\$20.48
					Total	\$343.00

## Notes

LIMITED WARRANTY: Your glass replacement is warranted against air/water leaks, defective materials and/or workmanship for as long as you own your vehicle, regardless of mileage. If rust is present, we will not be able to warranty our work. Tempered replacements: All tempered replacements are warranted for 90 Days ONLY. Windshield Repairs: If you are not completely satisfied with the chip repair or the repair fails to stop the break, we will credit the cost of the repair towards a windshield replacement by us. \*In no event shall we be liable for incidental or consequential damages. \*This guarantee is not transferable. \*Adhesive cure time caution: The adhesive used during our glass installation is designed to meet federal safety standards for retention in the event of a collision or rollover after a cure period following installation. *If there are any questions regarding the terms of the warranty, or to place a warranty claim, please contact 833-Car-Glas or your local Glass America location. Failure to do so may VOID the terms of the warranty.*

WE APPRECIATE YOUR FEEDBACK. PLEASE SHARE YOUR EXPERIENCE AT: <http://www.glassusa.com/RateUs>

443 Brayton Avenue  
Fall River, MA 02721  
508-675-6500

# CITYWIDE GLASS

"Make a Safe Choice"

877-590-6893

425 R State Road  
N. Dartmouth, MA 02747  
508-997-7703

Order: 1-41979

Date: 06/12/2023

Sold To:

VICTORIA ALMQUIST  
1847 WEST MAIN RD  
PORTSMOUTH RI 02871

H (651)500-7851

Csr:LIZ Tech: PO Terms:COD

Vehicle: 2005 TOYOTA HIGHLANDER 4 DOOR UTILITY

Qty	Part / Description	List Price	Material	Labor	Item Total
1	FW02476GBN - Windshield Green Tint/Blue Shade (Heated)(Solar)(Heated Wiper Park)	301.44	138.23	120.01	258.24
1.00	HAH000004 - Adhesive(Nags) (Urethane,Dam,Primer) (2.00)		30.00	0.00	30.00
1.00	WFT F2266 - Moulding(Precision) Black	40.13	20.00	0.00	20.00

Job Location Mobile

RAYTHIEM

1847 WEST MAIN RD

PORTSMOUTH RI 02871

blue -gray vehicle in parking lot - please call upon arrival

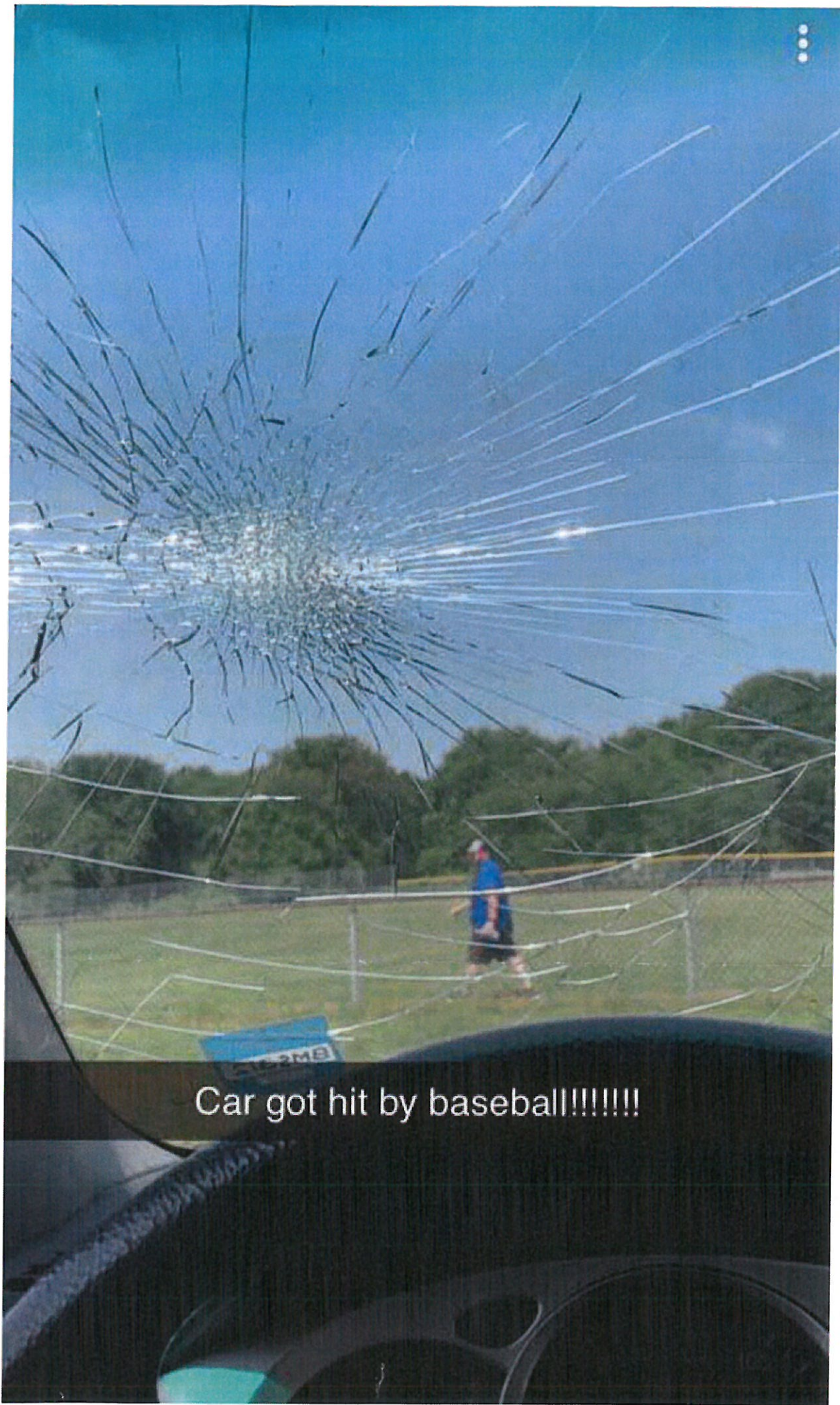
SIGNATURE \_\_\_\_\_

Material	Labor	Tax	Total	Deductible	Payments	Balance
188.23	120.01	11.76	320.00	0.00	0.00	320.00

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[www.citywideglass.net](http://www.citywideglass.net)



Car got hit by baseball!!!!!!!