

Recommendation Memo

To:

Eric Earls, Department of Public Works

From:

Margie White, Finance Department X 9241

Date:

9/13/23

Re:

Council Claim

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: 07/16/23

Police/tow/auto report: 23-42073

Claimant:

Scott Bellino

69 Benefit Street

Warwick, RI 02886

Claim:

Hit a pothole on Benefit Street causing damage to tire rods.

Invoice:

Thompson Auto Sales

\$235.00

Estimates:

Pat's Auto Sales

\$418.08

Balasco's Garage

\$370.14

Department Recommends:

Approval of this claim for \$0

Denial of this claim (please include comments below):

RIGL 24-8-35 regarding claims of damage from a pothole that requires any claim be filed with (7) seven days from the date of the incident. Claimant failed to submit paperwork in the required timeframe.

Director Signature

Date

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.	PER mention and the second sec
□ Motor Vehicle Accident □ Property Damage □ Claimant Name: Scott Be (wo Address: 69 Benefit St]Tax Waiver ☐Other
City, State, Zip:	
Date of incident (M/DIY) 7-16-23 Time: 3 AM I PM	
Description of Incident/Claim: htt pot hole dalving o 69 Bene Fit St WANWICK AI	N My Street
Vehicle Year: 2013 Make: NISSAN Model: MVMANO Odon	neter reading: 114 km
The Pothole was located on Benefit St	road.
I notified the Finance I Public Works department on POT hole WAS TWO CAY After reported to Police The nature of my property damage is: BENT BOTH TIRE ROD. BN MY 2013 NISCAM, MUNIANO	
Additional information about Tax Waiver (include letter from Tax Collector stating	g adverse decision)
SIGNATURE OF CLAIMANT:	_DATE

AFFIDAVIT

(Petitioner Name) CaHBELLING, being	duly swom, deposes and states:
1. I have petitioned the City Council of the City of Warwick for compincident which occurred on (date) 1" 16"23 as a result of (particle) as a resul	
Both time RODS BENT SIGNIFICAN	3111/
Said claim was filed with the Finance Department on	(date).
2. Check appropriate box or boxes:	
I have not sought compensation, nor will I at any time seek conduct but not limited to, any insurance company) other than the City the above-described incident, understanding for pothole claim under Rhode Island General Law § 24-5-13 (b).	of Warwick, for any loss arising from-
I have received compensation from a source or sources other (including, but not limited to, any insurance company) in conne 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 of to the City of Warwick (including, but not limited to, any insura the above described incident. The source or sources from which compensation is/are:	nce company), for any loss arising from
3. In the event that the Warwick City Council should deny my claim, I claim against any other party who may be liable for my loss.	understand that I may pursue a
4. I understand that I am not entitled to recover more than the amount Warwick pays any amount to me in connection with the above describe amounts from any source other than the City of Warwick with respect t report such other receipt(s) to the Finance Department of the City of Warwick with respect to the receipt (s) to the Finance Department of the City of Warwick with respect to the receipt (s) to the Finance Department of the City of Warwick with respect to the receipt (s) to the Finance Department of the City of Warwick with respect to the receipt (s) to the Finance Department of the City of Warwick with respect to the receipt (s) to the Finance Department of the City of Warwick with respect to the receipt (s) to the Finance Department of the City of Warwick with respect to the receipt (s) to the Finance Department of the City of Warwick with respect to the receipt (s) to the Finance Department of the City of Warwick with respect to the receipt (s) to the Finance Department of the City of Warwick with respect to the receipt (s) to the Finance Department of the City of Warwick with respect to the receipt (s) to the Finance Department of the City of Warwick with respect to the receipt (s) to the Finance Department of the City of Warwick with respect to the receipt (s) to the Finance Department of the City of Warwick with respect to the receipt (s) to the Finance Department of the City of Warwick with respect to the receipt (s) to the Finance Department of the City of Warwick with respect to the receipt (s) to the Finance Department of the City of Warwick with respect to the receipt (s) to the Finance Department of the City of Warwick with respect to the receipt (s) to the Finance Department of the City of Warwick with receipt (s) the receipt	ed incident, and if I should receive any o the above described incident, I will
5. I have personal knowledge of the facts aforesaid.	
Signature of Claimant or its Representative Printed Nar	cott BEVINO
State of Rhode Island County of VEW Subscribed and sworn to before me on this 11 day of Ay	2
Subscribed and sworn to before me on thisday of	, 20_25
Paul M Andrade Notary Public- State of Rhode Island ID # 762072 ID # 762072 III Wyzcommission Expires on 01/30/2027	blic) ssion Expires
-Apriles of 01/30/2027	



STATE OF RHODE ISLAND DIVISION OF MOTOR VEHICLES

600 NEW LONDON AVENUE CRANSTON RI 02920-3024

Web Address: WWW.DMV.RI.GOV



BW 12 1504 11

Date: 08/04/2023

SCOTT R BELLINO 69 BENEFIT ST WARWICK RI 02886-6701

Registration Certificate

REGISTERED OWNER: SCOTT R BELLINO 69 BENEFIT ST WARWICK RI 02886-6701		SECOND OWNER:			
GAS		N/A	N/A	N/A	N/A
FUEL TYPE:		CARRYING CAPACITY:	LENGTH:	CCs:	MAX SPEED:
JN8AZ1MU1DW209915		57.50	4591 LBS	5	6
VEHICLE IDENTIFICATION	NUMBER:	RENEWAL FEE:	GROSS WEIGHT:	# OF PASSENGERS:	# OF CYLINDERS:
	MISSAIT	WORANG	VEHICLE	VVIIIE	WHITE
2013	NISSAN	MURANO	SPORT UTILITY	WHITE	WHITE
YEAR:	MAKE:	MODEL:	BODY TYPE:	MAJOR COLOR:	MINOR COLOR:
4949	COMMERCIAL	OCEAN	PASSENGER	2150411	03/31/2024
REG NUMBER:	PLATE TYPE:	PLATE DESIGN:	VEHICLE TYPE:	DRIVERS LICENSE:	REG EXP DATE:

- TAX TOWN: WARWICK
- · 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 02/14/2025 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

Page:

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For Date: 07/23/2023 - Sunday

Call Number Time Call Reason Action Priority 23-42073

1210 Phone - POT HOLE INFORMATION GIVEN 3

Call Taker: KWALKER - Civilian Kristen M Walker

Call Closed By: JPARENT - Civilian Jerry A Parenteau 07/23/2023 1356 Location/Address:

Calling Party: BELLINO, SCOTT R @ 69 BENEFIT ST Apt. #24B - WARWICK, RI 02886 401-500-5202 Race: W Sex: M

P7 Officer Joseph P Dilorio Unit:

Disp-12:30:52 Arvd-12:50:47 Clrd-13:03:37 Vehicle: WHI 2013 NISS UT MURANO Reg: CO RI 4949 VIN: JN8AZ1MU1DW209915 BELLINO, SCOTT R @ 69 BENEFIT ST Apt. #24B - WARWICK, RI 02886

Race: W Sex: M

Insurance Co: Policy No:

07/23/2023 1211 Civilian Kristen M Walker Narrative:

male hit pothole on benefit and now his front end is damaged

07/23/2023 1304 Officer Joseph P Dilorio

NO VISIBLE DAMAGE TO THE VEHICLE. RP STATED HE HIT THE POT HOLE ON HIS ROAD A WEEK AGO, DOESN'T KNOW WETHER OR NOT IT DAMAGED HIS VEHICLE...ADVISED TO CONTACT THE CITY TOMORROW MORNING ABOUT THE POT HOLE ON BENEFIT ST.

Thompson Auto Sales & Service	LLC		and the second control of the second control	-	-
504 Quaker Highway Uxbridge, MA 01569	NAME Balling	Scott -	PHONE 401 - 500	-520	7
(508)-341-0850 / (401)-809-122	/				
LIC# 042219 MATERIAL: ALL PARTS NEW UNLESS SPECIFIED: U-USED, R-REBUILT, RC-RECONDITIONED	2ND AUTHORIZED NAME		PHONE		
QTY. PART NO. NAME OF PART PRICE WARR		CUSTOMER'S INFORMAT	ION	265	EAST
		A.M. CUSTOMER'S ORDER NO. P.M.	PROMISED (DATE & TIME	E) A.M.	
12500 71	YEAR • MAKE • MODEL		SERIAL #/VIN		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	100 M	23-10 Marine 0	MOTOR #		
	LICENSE NO.	ODOMETER	WRITTEN BY		
	LUBE OIL CH	HANGE FLUSH TRANS. FLUSH	DIFF. WASH	PO	LISH
	CHARGE FOR HA	AZARDOUS OR OTHER WAS	TE REMOVAL*	T	:
					1
					1
NK Kal					1
	۲				1
					1
					1
TOTAL PARTS	METHOD OF PAYMENT:	Daily Storage fee after repair work has been	LABOR ONLY	150	00
MECHANICS RECOMMENDATIONS	☐ CHECK ☐ CHARGE		PARTS	100 F	50
Roth Tie Rods bent	☐ CASH	period of 3 working days from date of notification.	ACCESSORIES	0 -	1
Sicolian 4.	LABOR	GUARANTEED ITEM(S)	GAS, OIL & GREASE		-
	FLAT RATE HOURLY		MISC. MERCHANDISE		1
Estimated cost S Estimate Charge Basis for Charge		GUARANTEE EFFECTIVE UNTIL:	SUBLET REPAIRS		1
LEASE READ CAREFULLY, CHECK ONE OF THE STATEMENTS BELOW, AND SIGN:	RETAIN PARTS	TIME	STORAGE FEE		
UNDERSTAND THAT, UNDER STATE LAW, I AM ENTITLED TO A WRITTEN ESTIMATE	DESTROY PARTS	MILEAGE	TAX		
VCLUDING A COMPLETION DATE, IF MY FINAL BILL WILL EXCEED \$100. (\$50 in M	AUTHORIZED BY		TOTAL ▶	35	-
I REQUEST A WRITTEN ESTIMATE. THE FINAL BILL MAY NOT EXCEED THIS ESTIMATE WITHOUT MY WRITTEN APPROVAL.		You are entitled by law to the return of all parts rep you agree otherwise by initialing the following: replaced during the authorized repairs.	placed, except those for which there	is a core cham	ge, unless is that are
I DO NOT REQUEST A WRITTEN ESTIMATE, AS LONG AS THE REPAIR COSTS DESCRIPTION OF THE SHOP MAY NOT EXCEED THIS AMOUNT WITHOUT MY LOON NOT REQUEST A WRITTEN ESTIMATE.	00 NOT EXCEED YWRITTEN OR ORAL APPRO	Estimate good for 30 days. Not responsible for d	terials. I authorize you and your er I delivery at my risk. An express m amount of the repairs thereto. If Loa	mployees to op nechanic's lien noel renairs no	perate my
Checked lines apply (Preparer must check at least one):		SIGNED	2		
This charge represents costs and profits to the motor vehicle repair facility for miscellaneous This amount includes a charge of \$, which is required under	shop supplies or waste disposal. law,	DATE7/25/	7 3	GT3 09-1	
				- v3-	



PATS AUTO SALES, AUTO BODY, Inc.

Quality Work is All We Do!!!-"Since 1972" 363 GEORGE WATERMAN RD, JOHNSTON, RI 02919

Phone: (401) 231-8270 FAX: (401) 231-4200

Preiiminary Estimate

Workfile ID: PartsShare:

Federal ID:

8ca4351t 7wL9Y3

050494446-01

Customer: Scott Bellino

Job Number:

Written By: Pat Matarese

Insured:

Scott Bellino

Policy #:

Claim #:

Type of Loss: Point of Impact: Date of Loss:

Days to Repair: 0

Charmon

Scott Bellino

Inspection Location:

PATS AUTO SALES, AUTO BODY, Inc.

363 GEÜKGE WATEKMAN KU

JOHNSTON, RI 02919

Repair Facility

(401) 231-8270 Other

Incurance Company:



VEHICLE

2013 NISS Murano S 4D UTV 6-3.5L Gasoline Electronic Fuel Injection

VIN:

JN8AZ1MU1DW2U9915

Interior Color:

Mileage In:

Vehicle Out:

License:

Exterior Color:

Mileage Out:

Job #:

State:

Production Date:

Condition:

TRANSMISSION

Automatic Transmission

POWER

Power Steering

Power Brakes

Power Windows

Power Locks

Power Mirrors

DECOR

Dual Mirrors Privacy Giass

Console/Storage

CONVENIENCE

Air Conditioning

Intermittent Winers

Tilt Wheel

Cruise Control

Rear Defogger

Keyless Entry

Message Center

Rear Window Wiper

Telescopic Wheel

Climate Control

RADIO

AM Radio

FM Radio

Stereo

Search/Seek

Auxiliary Audio Connection

CD Changer/Stacker

SAFETY

Drivers Side Air Bag

Passenger Air Bag

Anti-Lock Brakes (4)

4 Wileel Disc Brakes

Traction Control

Stability Control

Front Side Impact Air Bags

Head/Curtain Air Bags

Positraction

SEATS

Cloth Seats

Bucket Seats

Reclining/Lounge Seats

WHEELS

Aluminum/Alloy Wheels

PAINT

Cloar Coat Paint

Hynak #1

Preliminary Estimate

Customer: Scott Bellino

2613 NISS Murano 5 4D UTV 6-3.5L Gasoline Electronic Fuel Injection

Job Number:

Line	Oper	Description	Part Number	Qty	Extended Price \$	Labor	Paint
1	STEERING GEAR &	LINKAGE			Price \$		
2	Repl	RT Outer tie rod all	D85201AA1A	4	100.00		
3	Repl	LT Outer tie rod all		7	103.80 m	0.6 M	
4	0		D86401AA1A	1	103.80 m	0.6 M	
e distribution and a large	# Subl	Four wheel alignment		1	99.95 X		
			SUBTOTALS		307.55	1.2	0.0

ESTIMATE TOTALS

	-		
ভিন্নভাৰ		Auto	Cost \$
			207.60
1.2 hrs	@	\$ 65.00 /hr	78.00
1.2 hrs	@	\$ 15.00 /hr	18.00
			99.95
			403.55
\$ 207.60	@	7.0000 %	14.53
	(Proposition of the last	/10000 //	418.08
	1.2 hrs	1.2 hrs @ 1.2 hrs @	1.2 hrs @ \$ 65.00 /hr 1.2 hrs @ \$ 15.00 /hr

PURSUANT TO RHODE ISLAND LAW, THE CONSUMER HAS THE RIGHT TO CHOOSE THE REPAIR FACILITY TO COMPLETE REPAIRS TO A MOTOR VEHICLE; AND AN INSURANCE COMPANY MAY NOT INTERFERE WITH THE CONSUMER'S CHOICE OF REPAIRER.

FOR ANY VEHICLE THAT IS LESS THAN FORTY-EIGHT (48) MONTHS BEYOND THE DATE OF MANUFACTURE, RHODE ISLAND LAW ENTITLES THE VEHICLE OWNER TO ORIGINAL EQUIPMENT MANUFACTURER (OEM) PARTS IN THE REPAIR OF A MOTOR VEHICLE PART. THIS ESTIMATE WILL INDICATE IF/WHEN AFTERMARKET BODY PARTS ARE SPECIFIED.

Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.

BALASCO'S GARAGE

Sub Estimate

1850 Cranston street Cranston, RI. 02920

Phone: 401-585-2599 Fax: - -

Estimate for Services

Estimate Date : 9/11/2023

BELLINO, SCOTT

2009 Nissan - Murano SL - 3.5L,V6 (213Cl) VIN(A)

69 BENEFIT ST

Lic #: 4949 - RI

Odom. In: 0

Warwick, RI 02886 Cellular: 401-500-5202

VIN #: JN8AZ18W3 9W205576

Part Description / Number	Qty	Sale	Ext	Labor Description	Extended
Tie Rod End AX07234	1.00	91.07	91.07	Side - [Includes: R&I Outer Tie Rod End.] - [Includes: Adjust toe-in only. NOTE: Deduct .4 if alignment is also	131.10
Tie Rod End	1.00	35.24	35.24		
ES800357				NOTE: Manufacturer recommends removal of Rack and Pinion Steering Gear when replacin	
Shop Supplies			3.79	WHEELALIGNMENT	95.00
				Hazardous Materials	4.83



Parts/Supplies: 130.10

Labor: 226.10

HazMat/Fees: 4.83

Tax: 9.11

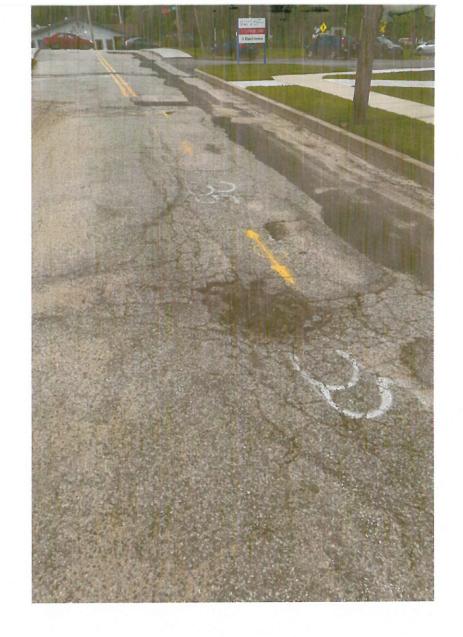
Total: \$ 370.14

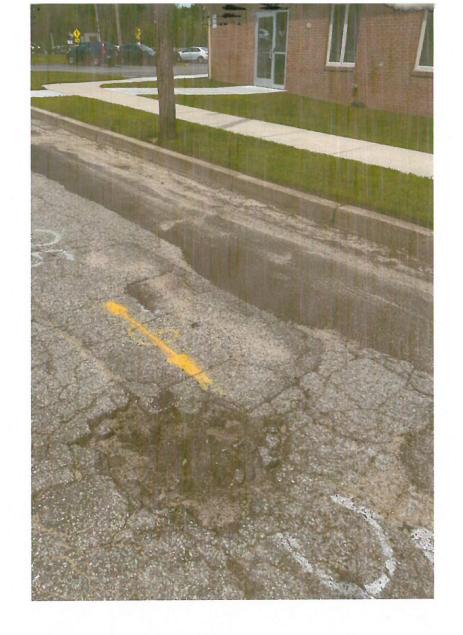
I hereby authorize the above repair work to be done along with the necessary material and hereby grant you and/or your employees permission to operate the vehicle described for testing and/or inspection. Express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto. SMOG: I understand that I can have emission service and/or adjustments done elsewhere. I hereby waive this right.

TEARDOWN ESTIMATE: I understand that my vehicle will be reassembled within _______days of the date shown above if I choose not to authorize the service

recommended. All Parts removed will be discarded unless instructed otherwise: Save all Parts_CARS OR ARTICLES LEFT IN CARS IN CASE OF FIRE, THEFT OR ANY OTHER CAUSE.

. NOT RESPONSIBLE FOR LOSS OR DAMAGE TO









Frank J. Picozzi Mayor

CITY OF WARWICK

FINANCE DEPARTMENT 3275 POST ROAD WARWICK, RHODE ISLAND 02886 (401) 738-2015

August 15, 2023

Scott Bellino 69 Benefit Street Warwick, RI 02886

Dear Scott,

This letter acknowledges receipt of your claim form to the City of Warwick. Unfortunately, the claim cannot be processed at this time due to the following reason(s);

• Estimates – Two estimates are required along with your invoice.

We have included copies of the instructions to submit a claim. Once the above information in received, your claim can be processed. If you have any questions, please call 738-2015.

Claims Administration





Frank J. Picozzi Mayor

CITY OF WARWICK

FINANCE DEPARTMENT 3275 POST ROAD WARWICK, RHODE ISLAND 02886 (401) 738-2015

August 28, 2023

Scott Bellino 69 Benefit Street Warwick, RI 02886



Dear Scott,

This letter acknowledges receipt of your claim form to the City of Warwick. Unfortunately, the claim cannot be processed at this time due to the following reason(s);

• Estimates – Two estimates are required along with the paid invoice. You must submit one more estimate.

We have included copies of the instructions to submit a claim. Once the above information in received, your claim can be processed. If you have any questions, please call 738-2015.

Claims Administration