



Recommendation Memo

To: Eric Earls, Department of Public Works
From: Margie White, Finance Department ext. 9641
Date: March 1, 2022
Re: Council Claim

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

Date of Incident: 02/08/2022

Police/tow/auto report: AAA

Claimant: Lucy Greene
17 Duke Street
East Greenwich, RI 02818

Claim: Hit a pothole on Cowesett Avenue causing damage to tire.

Invoice: Pep Boys \$193.35

Estimates: Firestone \$196.96
Town Fair Tire \$180.13

Department Recommends:

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

Denial of this claim (please include comments below):

As required by RIGL 24-8-35 regarding claims of damage from a pothole, requirements state any claim be filed with (7) seven days from the date of the incident. Claimant failed to submit paperwork in the required timeframe. As well, the claimant has offered no supporting documents/photos such as a police report, photos, address of incident etc. that provide evidence that the City of Warwick was negligent and responsible for this damage.



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.

☐ Motor Vehicle Accident ☒ Pothole ☐ Property Damage ☐ Tax Waiver ☐ Other

Claimant Name: Lucy Greene

Address: 17 Duke Street

City, State, Zip: Eg. RI 02818

Telephone #: 401 209 4609

Date of incident (M/D/Y) 2/8/22 Time: 11:20 ☒ AM ☐ PM

Description of Incident/Claim: RAN OVER POT HOLE ON
Cowesett Ave - POP TIRE Immediately

Vehicle Year: 2014 Make: Ford Model: Fusion Odometer reading: _____

The Pothole was located on Cowesett Avenue road.

I notified the Finance / Public Works department (circle one) on 2/8/22 (date).

The nature of my property damage is: A TIRE

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

I request reimbursement in the amount of \$ 193.35

SIGNATURE OF CLAIMANT: Lucy Greene DATE 2/17/22

AFFIDAVIT

FEB 28 2022

(Petitioner Name) Lucy Greene, 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) 02/08/22 as a result of (please provide brief description):

Said claim was filed with the Finance Department on 2/17/22 (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.

Lucy Greene
Signature of Claimant or its Representative

Lucy Greene
Printed Name

State of Rhode Island
County of Kent

Subscribed and sworn to before me on this 17 day of February, 2022.

ANN MARIE KNISKERN
NOTARY PUBLIC
STATE OF RHODE ISLAND
MY COMMISSION EXPIRES JULY 09, 2025

Ann Marie Kniskern
(Notary Public)
My Commission Expires July 9, 2025



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
DIVISION OF MOTOR VEHICLES

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



LUCY N GREENE
17 DUKE ST
EAST GREENWICH RI 02818-3819

Date: 05/20/2020

Registration Certificate

REG NUMBER: 43700	PLATE TYPE: PASSENGER	PLATE DESIGN: WAVE	VEHICLE TYPE: PASSENGER	DRIVERS LICENSE: 5913680	REG EXP DATE: 05/31/2022
YEAR: 2014	MAKE: FORD	MODEL: FUSION	BODY TYPE: SEDAN	MAJOR COLOR: GRAY	MINOR COLOR: GRAY
VEHICLE IDENTIFICATION NUMBER: 3FA6P0H74ER153680		RENEWAL FEE: \$112.50	GROSS WEIGHT: 4050	# OF PASSENGERS: 5	# OF CYLINDERS: 4
FUEL TYPE: GAS		CARRYING CAPACITY: N/A	LENGTH: N/A	CCs: N/A	MAX SPEED: 0
REGISTERED OWNER/LEASING COMPANY: LUCY N GREENE 17 DUKE ST EAST GREENWICH RI 02818-3819			SECOND OWNER:/LESSEE		

- TAX TOWN: **EAST GREENWICH**
- 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 Repairs 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 **11/14/2021** 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

05/20/2020



Pep Boys #196
375 QUAKER LANE
WEST WARWICK, RI 02893
(401) 826-3336
www.pepboys.com

02/08/2022 3:33:54 PM EST
Trans.: 211702 Store: 0196
Reg.: 101 Till: 101
Cashier: 495080

Service Work Order COMPLETE



019610121170220220208

COMP VEHICLE INSP		0.00 N
0787538	1 @ 0.00	
Order #: 2261772		
235/50ZR17 KU22		144.99 T
TIR2185423	1 @ 144.99	
Order #: 2261772		
TIRE INSTALLATION PACKAG		20.99 T
9084807	1 @ 20.99	
1897 TIRE MOUNTING	0.00	N
9125984	1 @ 0.00	
TIRE HANDLING CH PBV	3.00	T
8585558	1 @ 3.00	
90DAYS WHL BAL 16-1	17.99	N
8582685	1 @ 17.99	
FREE ALIGNMENT CHEC	0.00	N
0399078	1 @ 0.00	

Order #: 2261772

OUTSIDE PURCHASE		14.46 T
000	2 @ 22.61	
Item Discount Amt.	(-30.76)	

Order #: 2261772

MISC SHOP SUPPLIES		1.44 T
9303872	1 @ 1.44	

Order #: 2261772

Total Discount	(30.76)	
Sub-Total	181.88	
Tax	11.47	
Total	193.35	
Cash	200.00	
Total Tender	200.00	
Change Due	-6.65	



Invoice - Customer Copy - Page 1

W WARWICK
375 QUAKER LANE
375 QUAKER LN
WEST WARWICK RI 02893
(401) 826-3336

EPA# RID987486974

Service Manager: Rebecca Cardoso

TRACKING ID# *	
Store ID #	Service Work Order #

0196 2261772

Insurance :

If you have any questions
or concerns, please call:
(401) 428-5583

Policy Number :

Name:	rose marie greene	Year:	2014	Date :	2022-02-08
Address:	17 duke street	Make:	FORD	Entered By:	ALYSSA N
City:	East Greenwich	Model:	FUSION	Time In:	11:31:30
State:	RI	Engine:	4-1499 1.5L DOHC	Date/Time Promised:	2022-02-08 15:28:10
Zip:	02818	Vin No.:		Old Parts Returned:	no
Home Phone:	(401)209-4609	License No:	CO RE	Customer Waiting	
Contact Phone:	(401)209-4609	Mileage In / Out:	134154 / 134154		
		Color:			
Storage Charges: Any vehicle that is left unattended for more than 7 business days may be towed at the owner's expense. For more information, please see Store Manager					

I HEREBY AUTHORIZE PEP BOYS TO PERFORM THE REPAIRS ON THIS WORK ORDER AND TO FURNISH THE NECESSARY MATERIALS AND ITS EMPLOYEES TO OPERATE THE VEHICLE FOR PURPOSES OF INSPECTION, TESTING AND DELIVERY. I UNDERSTAND THAT ANY COST QUOTED IS AN ESTIMATE. I UNDERSTAND THAT UNLESS DIRECTLY CAUSED BY PEP BOYS, IT IS NOT RESPONSIBLE FOR ANY LOSS OR DAMAGE TO THE VEHICLE OR ITS CONTENTS. THAT THE VEHICLE MAY BE PARKED IN THE PEP BOYS' PARKING LOT AND THAT VEHICLES ARE LEFT OVERNIGHT AT OWNER'S RISK.

X

Initial Estimate	Parts \$:	Labor \$:	Total \$:	Date and Time:
	162.45	17.99	193.35	2022-02-08 11:31:30

CUSTOMER NOTIFIED OF AND APPROVED INCREASE(S) IN THE ORIGINAL ESTIMATED PRICE

(_) IN PERSON () PHONE

SIGNED _____ DATE _____

YOU WILL NOT BE CHARGED A TIRE HANDLING CHARGE IF YOU CHOOSE TO DISPOSE OF YOUR OWN TIRES.

NOTICE: - IF YOU ELECT TO DISPOSE OF YOUR OWN TIRES, YOU ARE RESPONSIBLE FOR PROPERLY DISPOSING OF YOUR USED TIRES IN ACCORDANCE WITH EPA GUIDELINES AND ANY APPLICABLE LAWS

CUSTOMER SIGNATURE

TYPE	PART	DESCRIPTION	CODE	MECHANIC	HRLY RATE	HRS	QTY	SOURCE	EACH	TOTAL
PK	9084807	TIRE INSTALLATION PACKAGE								
LB		TIRE MOUNTING	N	MELVIN P			1		0.00	0.00
PN	6001	TIRE HANDLING CHARGE - PEPBOYS	N				1		3.00	3.00
LB		90 DAYS WHEEL BALANCE 16-19	N	MELVIN P			1		17.99	17.99
LB		FREE ALIGNMENT CHECK	N	MELVIN P			1		0.00	0.00
Package SubTotal : 20.99										
LB		COMPLIMENTARY VEHICLE INSPECTION	N	MELVIN P			1		0.00	0.00
PN	2185423	Kumho KU22 235/60ZR17 40,000 MILE PRORATED	N				1		144.99	144.99
PN	000	LUGNUTS Competitor PO# 10900022	N				2	OP	22.61 -15.38	14.46
OT		Shop Fee	N				1		1.44	1.44

Parts: 162.45 Labor : 17.99 Other : 1.44

Tax : 11.47

Total : 193.35

QUOTE
5351053

FIRESTONE COMPLETE AUTO CARE
400 BALD HILL RD STE 450
WARWICK, RI. 02886-1617

SERVICE ADVISOR:
15 ALEX
401.738.1661

Printed on 02/17/2022

NO CUSTOMER

2014 FORD FUSION SE
2.5L L4 FI GAS VIN 7 DOHC

LIC #
IN

VIN #

MILEAGE 0

Store # 014702

QUOTE

Description	Article Number	T#	Qty	Part	Labor	Extended Price	Job Total
KUMHO TIRE PACKAGE							
KU22 KU22 BW P235/50R17 96H No Mileage Warranty	7099618		1	167.99		167.99	184.01
NEW TIRE WHEEL BALANCE LABOR	7013632		1		12.99	12.99	
SCRAP TIRE RECYCLING FEE	7075078		1		3.03	3.03	
LOW PROFILE TIRE INSTALLATION	7006472		1		N/C	N/C	

Prices valid for 30 days.

Summary	
Parts	167.99
Labor	16.02
Shop Supplies	0.91
Sub	184.92
Tax	12.04
Total	196.96

THIS IS NOT AN INVOICE- DO NOT PAY

TOWN FAIR TIRE CENTERS, INC.

ESTIMATE#: RST_548_2168184

Name: ROSE MARRIE GREENE


Address: 17 DUKE ST, E. GREENWICH, RI
02818

Email:

Phone: 4012094609

Remaining Tread Life: FL-CNH FR-CNH RL-CNH RR-
CNH

Store: 548 Clerk: 327

ITEM	QUANTITY	PRICE	AMOUNT
 SPORT MS932 SIZE: 215/55R17V IBM#: 53725 MILEAGE WARRANTY WITH CARE: 55000	1	\$139.00	\$139.00
COMPUTERIZED WHEEL BALANCE	1	\$19.95	\$19.95
FRONT-WHEEL ALIGNMENT	1		
NEW RUBBER VALVE STEM OR TPMS RECONDITIONING	1	\$6.95	\$6.95
INCLUDED:		FREE	FREE
• FRONT WHEEL ALIGNMENT			
• DISMOUNT & REMOUNT			
• RESET TPM SENSORS			
• 30 DAY TEST DRIVE			
• NATIONWIDE WARRANTY			
• LIFETIME FLAT REPAIR			
• LIFETIME TIRE ROTATION			
• LIFETIME SNOW CHANGEOVER			
30 DAY COURTESY PROTECTION		FREE	FREE
CASINGS DISPOSAL	1	\$3.75	\$3.75
MISCELLANEOUS FEES (STATE RUBBER, RECYCLING FEE, ETC.)			
SUBTOTAL			\$169.65
SALES TAX			\$10.48
TOTAL (GOOD FOR 14 DAYS)			\$180.13