

Recommendation Memo

To:

Eric Earls, Department of Public Works

From:

Treasury Dept

Date:

April 13, 2022

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: 04/04/22

Police/tow/auto report: N 5581472

Claimant:

Chelsea Mello

48 Hurdis Street

North Providence, RI 02904

Claim:

Hit a pothole on Sandy Lane

Estimates:

Town Fair Tire

\$162.64

Fountain Tire

\$186.99

Mbenzgram

\$138.79

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 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, nor was there any notification to the City regarding this incident per the signed affifdavit. Further, Sandy Lane was paved in November 2021 and there are no pothole present.

5/24/22

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. Po-hole
□Motor Vehicle Accident □Property Damage □Tax Waiver □Other Claimant Name: □ HURD SH HURD SH
City, State, Zip: NORth Providence Telephone #: 401 304518
Date of incident (M/DIY) D4 04 22 Time: 12:43 AM I PM
Description of Incident/Claim: QS WOS TURNING ONTO SONAY LANE OVER NEAR MICHELY StevenS Where was this big pot hole that hit. At that time I had to turn into Michely StevenS Decays my time was completly Ame and had no air psi in the time. That's when I cay la first in warwick Vehicle Year: 2021 Make: Hyundai Model: Kara Odometer reading: 24054 The Pothole was located on Sonay Lane, near warwicked Public I notified the Finance I Public Works department on NA (date).
The nature of my property damage is: MY drivers place back
Additional information about Tax Waiver (include letter from Tax Collector stating adverse decision) NONE
I request reimbursement in the amount of \$200.00
SIGNATURE OF CLAIMANT: Chille Millo DATE 04/13/22

AFFIDAVIT

(Petitioner Name) MUSIA MUID , 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) 04/04/22 as a result of (please provide brief description):
htting pothole on Sandy Lane / Near Warvick
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 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.
Signature of Claimant or its Representative Chuse Mulo Printed Name
State of Rhode Island County of
Subscribed and sworn to before me on thisday of, 20
DEBRA A HAMMOND

DEBRA A HAMMOND

(Notary Fublic, State of Rhode Island
My Commission Expires FEB. 01, 2026

Commission # 768157

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TOWN FAIR TIRE 548 1085 BALD HILL RD WARWICK, RI 02886 401-822-7700

SALE

Order# 85522

Date/Time: 3/18/2022 2:00:57 PM

Trans Type: Sale
Amount: \$911.96
Entry Method: KEYED

Cardholder: chelsea e mello

Card Type: CFNA

OrderID: 1503084914 TransID: 1825591900

AuthCode: 0618

RefCode: 1825591900-0618

APPROVED

Consumer acknowledges receipt of goods and/or services in the amount shown hereon and agrees to perform the obligations set forth by the cardmember's agreement with the issuer.

Authorized Signature

TOWN FAIR TIRE CENTERS OF RHODE ISLAND LLC 1085 BALD HILL RD, WARWICK, RI. TEL (401) 822-7700

INVOICE

INVOICE NO.

85522-548

ACCOUNT # P.O. # E-MAIL

PHONE # (401) 304-5181

MR. MRS. CURRENT MILEAGE CHELSEA MELLO YEAR, MAKE, MODEL ADDRESS PO BOX 7367 22767 21 HYUNDAI KONA CITY STATE ZIP WARWICK 02887

SALE TYPE QH-111 CLERK# G.P. # 01 DATE 490F 03/18/2022/14:00 QTY SIZE DESCRIPTION IBM# LIST PRICE 4 205/60R16H TOYO CELSIUS AMOUNT 4 16 COMPUTER BALANCING 43138 206.00 152.00 608.00 4 TPMS VALVE 00154 SENSOR RECONDITIONING 18.95 25.00 75.80 ROAD HAZD FREE TIRE REPLACEMENT FREE FLAT REPAIR 00445 9.00 6.95 27.80 00227 LIFETIME 26.95 18.95 LIFETIME 75.80 01258 FREE ROTATION 29.95 0.00 0.00 DISMOUNT + MOUNT 01235 29.95 0.00 30 DAY TEST DRIVE 00197 0.00 10.95 0.00 AFTER SALE 1 0.00 GUARANTEED LOWEST PRICE 13000 0.00 0.00 NATIONWIDE WARRANTY 13002 0.00 0.00 0.00 4 LIFETIME SNOW TIRE CHANGEOVER 0.00 13001 0.00 0.00 1 FREE 00195 0.00 ALIGN FRONT WHEELS 39.95 0.00 ALIGNMENT 0.00 00199 FACTORY RECOMMENDED 89.00 0.00 0.00 00163 124.00 64.00 64.00 IBM#: 43138 WORKMANSHIP: YES ROAD HAZARD: LIFE MILEAGE W/O CARE: 30000 MILEAGE WITH CARE: 60000 TIRE REMOVAL SERVICE 3.75 15.00 Explanation: 4 WORKS TOSS OLD AND ALIGN SUB-TOTAL 650.80 RISALES TAX 45.56 TOROUE: 79-94 PSI -- FR: 33 RR: 33 NON-TAXABLE 215.60 SIGNATURE

RdKg-CFNA 911.96 Card# xxxxxxxxx3143

Attention Customer: We gave you the voluntary tire registration form. You must mail the form for the registration to be valid.

SAFETY WARNING

After installation of mag wheels, all nuts or bolts must be retorqued (retightened) after the first 25 miles CUSTOMER INITIALS

COMMENTS - COMPLIMENTS - COMPLAINTS

Town Fair serves thousands of customers each year. In order to help us serve you better, if you have a comment, compliment, or complaint or just want to talk to us about our operation - please call - it will be greatly appreciated.

Contact or Write TOWN FAIR TIRE CUSTOMER SERVICE 460 COE AVENUE EAST HAVEN, CT 06512 TELEPHONE (203)467-8600 X 213 OR TOLL FREE 1 (800) 972-2245 OR 1 (888) TOWNFAIR OR VISIT OUR WEBSITE @ www.townfair.com

TOTAL

911.96



TOWN FAIR TIRE CENTERS OF RHODE ISLAND LLC 1085 BALD HILL RD, WARWICK, RI. TEL (401) 822-7700

REPRINT FACSIMILE-NOT AN INVOICE

Ver 21-09mpb

INVOICE NO.

87364-548

ACCOUNT # PHONE # (401) 304-5181 P.O. # E-MAIL YEAR, MAKE, MODEL CURRENT MILEAGE MRS. CHELSEA MELLO 21 HYUNDAI KONA MS. 23581 **ADDRESS** PO BOX 7367 CITY STATE ZIP WARWICK QH-111 RI 02887 SALE TYPE CLERK# TIME G.P. # DATE 01 -9 04/04/2022 14:22 202F QTY SIZE **AMOUNT** DESCRIPTION PRICE LIST IBM# 205/60R16H 152.00 1 TOYO CELSIUS 152.00 206.00 43138 0.00 1 COURTESY TIRE PROTECTION 30 DAY 0.00 9.95 00205 1 LIFETIME 0.00 FREE FLAT REPAIR 29.95 0.00 01258 1 LIFETIME 0.00 FREE ROTATION 0.00 29.95 01235 1 0.00 DISMOUNT + MOUNT 0.00 00197 10.95 0.00 1 0.00 30 DAY TEST DRIVE 0.00 13000 1 AFTER SALE 0.00 0.00 GUARANTEED LOWEST PRICE 0.00 13002 0.00 0.00 NATIONWIDE WARRANTY 0.00 13001 LIFETIME SNOW TIRE CHANGEOVER 0.00 0.00 39.95 00195 IBM#: 43138 WORKMANSHIP: YES ROAD HAZARD: 30 DY MILEAGE W/O CARE: 30000 60000 Explanation: 1 WORKS TO L/R, ADJ OLD SUB-TOTAL 152.00 TOROUE: 79-94 **RISALES TAX** 10.64 PSI--FR:33 RR:33 SIGNATURE NON-TAXABLE 0.00

162.64 #99046

Attention Customer: We gave you the voluntary tire registration form. You must mail the form for the registration to be valid.

SAFETY WARNING

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TOTAL

162.64

CUSTOMER COPY

■ Search

Fountain Tire

MY STORE: <u>CALGARY (WESTBROOK)</u> (403) 249-8991

Tue: 7:30 AM - 6:00 PM



winter safety in regions with occasional snow falls and cold weather conditions. The Celsius is positioned between an all-season and winter tire with a tread design that provides better ice and snow traction than a typical all season tire and longer tread life than a winter tire.

\$ 18699

\$70.00 mail-in rebate on 4*

SPECIAL ORDER*

SIZE

205/60R16

WARRANTY

100000 KM

I LOAD

RANGE

N/A

I SPEED

RATING

92H

APPLICATION

CITY / HIGHWAY

SIDEWALL

BSW





BOOK APPOINTMENT



VIEW QUOTE

7:17 4



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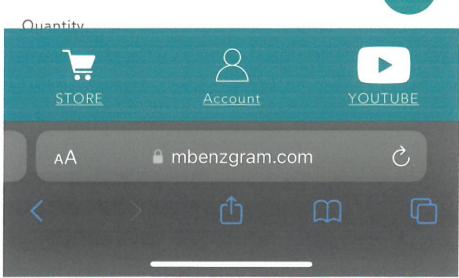
TOYO

TOYO CELSIUS TIRE - 205/60R16 92H

SKU: TOY128360

\$138.79







STATE OF RHODE ISLAND

DIVISION OF MOTOR VEHICLES

600 NEW LONDON AVENUE CRANSTON RI 02920-3024

Web Address: WWW.DMV.RI.GOV

BW13412844

Date: 11/29/2021

CHELSEA E MELLO 48 HURDIS ST NORTH PROVIDENCE RI 02904-4906

Registration Certificate

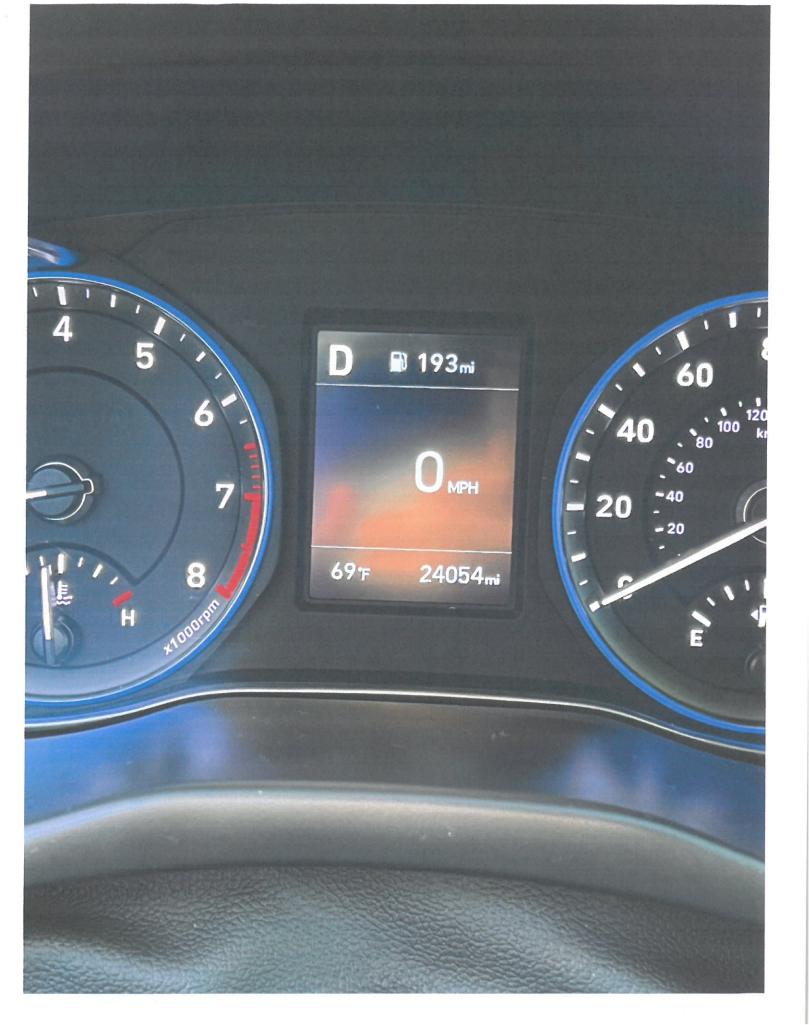
REGISTERED OWNER: CHELSEA E MELLO 48 HURDIS ST NORTH PROVIDENCE RI 02904-4906		SECOND OWNER:			
FUEL TYPE: GAS		CARRYING CAPACITY:	LENGTH:	CCs: N/A	MAX SPEED: N/A
VEHICLE IDENTIFICATION NUMBER: KM8K12AASMU609149		RENEWAL FEE: 92.50	GROSS WEIGHT: 3640 LBS	# OF PASSENGERS: 5	# OF CYLINDERS:
YEAR: 2021	MAKE: HYUNDAI	MODEL: KONA	BODY TYPE: SPORT UTILITY VEHICLE	MAJOR COLOR: GRAY	MINOR COLOR: GRAY
EG NUMBER:	PLATE TYPE: PASSENGER	PLATE DESIGN: WAVE	PASSENGER	DRIVERS LICENSE: 3412844	REG EXP DATE: 08/31/2022

- TAX TOWN: NORTH PROVIDENCE
- 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
- 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
- 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
- Failure to obtain an Emissions Inspection on or before 01/14/2024 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. Fallure to obtain an overweight permit may result in the imposition of fines and/or other penalties.

WALTER R. CRADDOCK ADMINISTRATOR

DIVISION OF MOTOR VEHICLES

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