



Recommendation Memo

To: Eric Earls, Department of Public Works
From: Margie White, Finance Department ext. 9641
Date: May 13, 2021
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: 4/18/2021

Police/tow/auto report: AAA

Claimant: Linda Radcliffe
33 Cavalcade Blvd
Warwick, RI 02889

Claim: Hit a pothole on Kilvert Street causing damage to tires.

Invoice: New England Tire \$920.76

Estimates: SEE NOTE

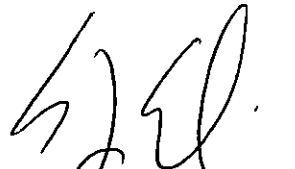
Firestone \$185.01
\$267.01

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.



Director Signature

5/26/21

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.

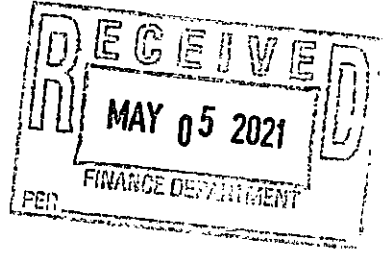
Motor Vehicle Accident Pothole Property Damage Tax Waiver Other

Claimant Name: Linda Radcliffe

Address: 33 CAVALCADE Blvd

City, State, Zip: Warwick RI 02889

Telephone #: 401-484-2483



Date of Incident (M/D/Y): 4-18-21 Time: 3:15 AM PM

Description of Incident/Claim: Hit an unavoidable pothole on Kilvert St. Impact blew out both tires on the passenger side. Not drivable, car had to be towed to Town Fair Tire in WARWICK by AAA. I needed all 4 tires replaced because my car is All wheel drive. I WAS without a car for 3 1/2 days. Please see reverse side

Vehicle Year: 2015 Make: Lexus Model: IS 250 Odometer reading: 54,913 side →

The Pothole was located on Kilvert Street road.

I notified the Finance | Public Works department on 4-18-21 (date).

The nature of my property damage is: 2 flat tires because of the pothole. See photos.

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

I request reimbursement in the amount of \$ 920.76

SIGNATURE OF CLAIMANT: Linda Radcliffe DATE 4-26-21

AFFIDAVIT

(Petitioner Name) Linda Radcliffe, 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) 4-18-21 as a result of (please provide brief description):

Hit a large unavoidable pothole. Blew out both tires on the passenger side. Had to get 4 tires because my

Said claim was filed with the Finance Department on _____ (date). = car is AWOL.

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.

Linda Radcliffe
Signature of Claimant or its Representative

LINDA RADCLIFFE
Printed Name

State of Rhode Island
County of Kent

Subscribed and sworn to before me on this 30th day of April, 2021

B. Johnson
(Notary Public)
My Commission Expires 09/22/2024

BRYAN JOHNSON ID #765878
Notary Public, State of Rhode Island
My Commission Expires Sept. 22, 2024



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



Date: 10/25/2019

LINDA M RADCLIFFE
33 CAVALCADE BLVD
WARWICK RI 02889

Registration Certificate

Table with 6 columns: REG NUMBER, PLATE TYPE, PLATE DESIGN, VEHICLE TYPE, DRIVERS LICENSE, REG EXP DATE, etc. containing registration details for a 2015 Lexus IS.

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 Reparatons 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 02/14/2020 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.

Handwritten signature of Walter R. Craddock

WALTER R. CRADDOCK
Administrator
Division Of Motor Vehicles

10/25/2019



Frank J. Picozzi
Mayor

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

May 6, 2021

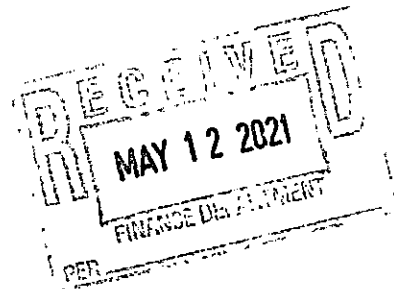
Linda Radcliffe
33 Cavalcade Blvd
Warwick, RI 02889

Dear Linda,


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 – One paid invoice and two estimates Or three estimates are required.

Mail to:
City of Warwick Claims
3275 Post Road
Warwick, RI 02886



Once the above information in received your claim can be processed. If you have any questions, please call 738-2015.


Claims Administration

Enclosed please find 2 additional estimates. Thank you

New England Tire Car Care Centers

1590 Warwick Ave., Warwick, RI 02889
 Phone: 401-737-1400
 newenglandtire.com

Celebrating 42 Years Servicing Our Customers

.....1978--2020.....

Customer Information	Work Order	Additional Information
LINDA RADCLIFFE 33 CAVALCADE BLVD Warwick, RI 02889 Acct Number: P: 4014842483 Contact:	Date: 5/11/2021 Reference: W-1026599 Salesperson: ROBERT HASTINGS Route: Delivery Date: 5/11/2021	PO Number: Work Order#: W-1026599 Entered By: Bill Coningford

Vehicle: 2015 Lexus IS250 (AWD) Desc: (U)TPMS Equipped *Lug Torque (ft. lbs): 76 *Inflation Front/Rear (psi): 36/36	Lic No: MC567 VIN:	Unit:	Mileage IN: Mileage OUT:	*OE Info
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Qty	Description	FET	Unit Price	Ext. Price
2.00	03522500000, P225/40R18 92W, ContiTouringContact CW 95 BW XL, Continental		160.00	320.00
1.00	FRONT TIRES		0.00	0.00
2.00	03507110000, P255/35ZR18 94Y, ContiSportContact 5P BSW XL, Continental		240.00	480.00
4.00	WHEEL BALANCE REGULAR		25.00	100.00
1.00	FREE FLAT REPAIRS		0.00	0.00

RI Taxable

Subtotal: 900.00

RI State Hard to Dispose Fee: 4.00
 Shop Supply Fee: 8.50
 RI State Sales Tax: 56.00
 Scrap Tire Disposal: 11.96

Total: \$980.46

THANK YOU FOR YOUR BUSINESS

I hereby authorize the stated repair work to be done along with the necessary material, and hereby grant New England Tire permission to operate the vehicle herein described on streets, highways or elsewhere for the purpose of testing and/or inspection. An express mechanic's lien is hereby acknowledged on above vehicle to secure the amount of repairs thereto. New England Tire is not responsible for loss or damage to vehicles, or articles left in vehicles, in case of fire, theft or any other cause beyond it's control. A 1.5% (18% APR) service charge will be assessed on any amount which becomes delinquent beyond 30 days.

QUOTE
4179756

FIRESTONE COMPLETE AUTO CARE
1689A POST RD
WARWICK, RI. 02888-5900

SERVICE ADVISOR:
01 CHIC
401.732.3141

Printed on 05/11/2021

RADCLIFFE, DAVID
33 CAVALCADE BLVD
WARWICK, RI 02889-1604

2015 LEXUS IS250 F SPORT [SILVER]
2.5L V6 FI GAS
LIC # MC567 RI VIN #
IN MILEAGE 52,300

Store # 014931

QUOTE

Description	Article Number	T#	Qty	Part	Labor	Extended Price	Job Total
CONTINENTAL TIRE PACKAGE							
025302225000 CONTI SPORT PLUS XL 225/40R18 90Y No Mileage Warranty	7099618		1	168.99		168.99	185.01
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	
CONTINENTAL TIRE PACKAGE							
0350710000 CONTACT SPORT PLUS XL 255/35R18 90W NO MILEAGE WARRANTY	7012508		1	250.99		250.99	267.01
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	

This estimate lists only the 2 tires that were damaged. I had to buy it because my car is all wheel drive. All paid invoice from Tom's Auto.

Prices valid for 30 days.

Summary	
Parts	419.98
Labor	32.04
Shop Supplies	1.82
Sub	453.84
Tax	29.95
Total	483.79

THIS IS NOT AN INVOICE- DO NOT PAY

4/30/2021

Gmail - (no subject)



Michael Reilly <msreillydds@gmail.com>

(no subject)

1 message

Michael Reilly <msreillydds@gmail.com>
To: msreillydds@gmail.com

Fri, Apr 30, 2021 at 11:58 AM



4/30/2021

Gmail - (no subject)



Michael Reilly <msreillydds@gmail.com>

(no subject)

1 message

Michael Reilly <msreillydds@gmail.com>
To: msreillydds@gmail.com

Fri, Apr 30, 2021 at 11:58 AM



4/30/2021

Gmail - (no subject)



Michael Reilly <msreillydds@gmail.com>

(no subject)

1 message

Michael Reilly <msreillydds@gmail.com>
To: msreillydds@gmail.com

Fri, Apr 30, 2021 at 11:57 AM



