



Recommendation Memo

To: Eric Earls, Department of Public Works
From: Margie White, Finance Department ext. 9641
Date: March 15, 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: 3/01/21

Police/tow/auto report: AAA

Claimant: Sandra Smith
52 Birch Street
Pawtucket, RI 02860

Claim: Hit a pothole on Knight Street causing damage to tire.

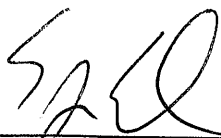
Invoice: Town Fair Tire \$168.27

Estimates: Firestone \$170.12
Monro \$129.18

Department Recommends:

Approval of this claim for **\$168.27**

Denial of this claim (please include comments below):



Director Signature

4/16/21

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: Sandra Smith

Address: 52 Birch St

City, State, Zip: Pawtucket, RI 02860

Telephone #: 401-663-6031

MAR 05 2021

Date of incident (M/D/Y) 3/1/21 Time: 7:17 AM PM

Description of Incident/Claim: Pothole on Knight St Warwick approaching 158 Knight Street for work at Westbay Residential. It was raining and water filled the hole. Could not avoid there was oncoming traffic on other side.

Vehicle Year 2013 Make: Toyota Model: Corolla Odometer reading: 87214

The Pothole was located on Knight Street road.

I notified the Finance | Public Works department on 3/1/21 ^{1st call 8:41 Am} (date).

The nature of my property damage is: right front tire beyond repair, having to purchase new one

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

I request reimbursement in the amount of \$ 168.27

SIGNATURE OF CLAIMANT: Sandra Capodilepo Smith DATE 3/1/21

AFFIDAVIT

(Petitioner Name) Sandra Capodilupo Smith, 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) 3/1/21 as a result of (please provide brief description):
hit pothole on Knight St travelling to work. AAA came & put spare on. Tire was not repairable. Rim was said to be OK. Had to replace tire.

Said claim was filed with the Finance Department on 3/1/21 (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.

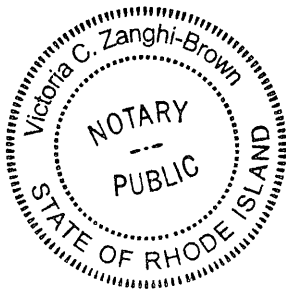
5. I have personal knowledge of the facts aforesaid.

Sandra Capodilupo Smith
Signature of Claimant or its Representative

Sandra Capodilupo Smith
Printed Name

State of Rhode Island
County of West

Subscribed and sworn to before me on this 1st day of March, 2021



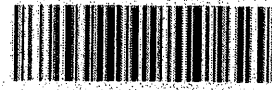
Victoria C. Zanghi-Brown
(Notary Public)
My Commission Expires 12/08/2021



STATE OF RHODE ISLAND
DIVISION OF MOTOR VEHICLES

600 NEW LONDON AVENUE
CRANSTON RI 02920-3024

Web Address: WWW.DMV.RI.GOV



BW19511788

SANDRA A CAPODILUPO SMITH
52 BIRCH ST
PAWTUCKET RI 02860-5502

Date: 01/12/2021

Registration Certificate

REG NUMBER: 1AT371	PLATE TYPE: PASSENGER	PLATE DESIGN: WAVE	VEHICLE TYPE: PASSENGER	DRIVERS LICENSE: 9511788	REG EXP DATE: 02/28/2022
YEAR: 2013	MAKE: TOYOTA	MODEL: COROLLA	BODY TYPE: SEDAN	MAJOR COLOR: RED	MINOR COLOR: RED
VEHICLE IDENTIFICATION NUMBER: 2T1BU4EE6DC036795		RENEWAL FEE: 92.50	GROSS WEIGHT: 3484 LBS	# OF PASSENGERS: 5	# OF CYLINDERS: 4
FUEL TYPE: GAS	CARRYING CAPACITY: N/A	LENGTH: N/A	CCs: N/A	MAX SPEED: N/A	
REGISTERED OWNER: SANDRA A CAPODILUPO SMITH 52 BIRCH ST PAWTUCKET RI 02860-5502	SECOND OWNER:				

TAX TOWN: **PAWTUCKET**

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 **02/01/2021** 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



Sandra Smith <sasmith@westbayri.org>

Fwd: AAA Northeast Member Relations

1 message

Sandra Smith <three_gs@verizon.net>
To: sasmith@westbayri.org

Mon, Mar 1, 2021 at 12:52 PM

Sent from my iPhone

Begin forwarded message:

From: "Temple, Christina" <CTemple@aaanortheast.com>
Date: March 1, 2021 at 10:15:52 AM EST
To: three_gs@verizon.net
Subject: RE: AAA Northeast Member Relations

From: Temple, Christina
Sent: Monday, March 1, 2021 10:15 AM
To: three_gs@verizon.net
Subject: AAA Northeast Member Relations

03/01/2021

Sandra Smith
52 Birch Street
Pawtucket, RI 02860

Dear Sandra

As per your request, here are the details of your Roadside Assistance call record.

Date: 03/01/2021

Year and Make of Vehicle: 2013 Toyota Corolla

Location: 158 KNIGHT ST./ STAFFORD ST & BLEACHERY CT. WARWICK, RI

Time of initial call: 07:40 AM



TOWN FAIR TIRE CENTERS OF MASSACHUSETTS LLC
 120 HIGHLAND AVE, SEEKONK, MA. TEL (508) 336-1301

INVOICE

V 19-07npb

VOICE NO.
72680-551

ACCOUNT # P.O. # PHONE # (401) 663-6031
 E-MAIL

MR. MRS. MS. SANDRA SMITH CURRENT MILEAGE 87254 YEAR, MAKE, MODEL 13 TOYOTA COROLLA
 ADDRESS 52 BIRCH ST
 CITY STATE ZIP PAWTUCKET RI 02861

SALE TYPE CLERK # G.P. # DATE TIME
 01 265M 03/02/2021 16:03

QTY	SIZE	DESCRIPTION	IBM #	LIST	PRICE	AMOUNT
1	215/45R17W	GDY EAGLE SPORT A/S VSB	38185	169.00	132.00	132.00
1	17	COMPUTER BALANCING	00405	21.00	18.95	18.95
1	TPMS VALVE	SENSOR RECONDITIONING	00445	8.00	5.95	5.95
1	LIFETIME	FREE FLAT REPAIR	01258	29.95	0.00	0.00
1	LIFETIME	FREE ROTATION	01235	29.95	0.00	0.00
1		DISMOUNT + MOUNT	00197	10.95	0.00	0.00
1		30 DAY TEST DRIVE	13000	0.00	0.00	0.00
1	AFTER SALE	GUARANTEED LOWEST PRICE	13002	0.00	0.00	0.00
1		NATIONWIDE WARRANTY	13001	0.00	0.00	0.00
1	LIFETIME	SNOW TIRE CHANGEOVER	00195	39.95	0.00	0.00
1		IBM#: 38185 WORKMANSHIP: YES ROAD HAZARD: NO MILEAGE W/O CARE: NONE MILEAGE WITH CARE: NONE TIRE CASING DISPOSAL SERVICE			2.75	2.75

Explanation: 1 WORK TO LOOSE MOUNT TO R/F- GOOD YEAR TIRE IS NOT REPAIRABLE HOLE IN SIDE
 TORQUE: 76 PSI--FR:32 RR:32
 SIGNATURE *[Signature]* SUB-TOTAL 137.95
 MASALES TAX 8.62
 NON-TAXABLE 21.70
 TOTAL 168.27

Discover 168.27 Card# xxxxxxxxxxxxxx8716 Appr 00209B

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

<p>SAFETY WARNING</p> <p>After installation of mag wheels, all nuts or bolts must be retorqued (retightened) after the first 25 miles CUSTOMER INITIALS _____</p>	<p>COMMENTS - COMPLIMENTS - COMPLAINTS</p> <p>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.</p>	<p>Contact or Write CUSTOMER SERVICE TOWN FAIR TIRE 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</p>
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QUOTE
1551623

FIRESTONE COMPLETE AUTO CARE
46 WASHINGTON STREET
ATTLEBORO, MA. 02703-5531

SERVICE
01 JEFF
508.309

Printed on 03/12/2021

SMITH, SANDRA

2013 TOYOTA COROLLA S

LIC #
IN

VIN #

EST. MILEAGE 0

401.663.6031

Store # 349475

QUOTE

Description	Article Number	T#	Qty	Part	Labor	Extended Price	Job Total
GOODYEAR TIRE PACKAGE							
109053366 Eagle Sport All-Season BL 215/45R17 XLW	7086802		1	140.99		140.99	159
50,000 Mile Limited Warranty							
NEW TIRE WHEEL BALANCE LABOR	7013632		1		12.99	12.99	
VALIDATE RUBBER VALVE STEM	7015040		1	2.99		2.99	
[TIRE PACKAGE=1]							
SCRAP TIRE RECYCLING FEE	7075078		1		3.00	3.00	
LOW PROFILE TIRE INSTALLATION	7006472		1		N/C		

Prices valid for 30 days.

Summary

Parts	140.99
Labor	16.24
Shop Supplies	3.65
Sub	160.88
Tax	9.24
Total	170.12

THIS IS NOT AN INVOICE- DO NOT PAY

MONRO

AUTO SERVICE *And* TIRE CENTERS

MONRO MUFFLER/BRAKE & SERVICE
1427 NEWPORT AVE.
SHOP 580
PAWTUCKET, RI 02861
(401)723-5810

Guest ID: 0 Year: 0
 Name: Make:
 Address: Model:
 Address 2: Lic No:
 City,State,Zip: . . VIN:
 Home Phone: () - Color:
 Work Phone: () - Engine:
 Other Phone: () - Mileage In: 0
 Tax Exempt #: Mileage Out: 0
 Manager: Inspect Due:

Date/Time: 03/12/21 12:42:04
 Estimate #: 318402
 Invoice #:
 PO Number:
 Unit Number:
 Email Address:
 Fleet/Wholesale: N
 Est Created On: 03/12/21 12:40:28

Services Requested:

Qty.	Part #	Car Loc	Description	Part	Labor	Amount
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Tire Pressure Spec: Not Available Wheel Torque: Not Available

INCLUDED WITH EVERY VISIT

1	CI		COURTESY INSPECTION			NO CHARGE
1	SM		SCHED. MAINT. REVIEW			NO CHARGE

TIRE

1	109053366	LB	* GDY EAGLE SPORT A/S Tire Size: 215/45R17 Speed Rating: W Ply: XL Load Range: B Sidewall: VSB Load Index: 91 Mileage Warranty: 50000	154.99	0.00	154.99
1		LB	ROAD HAZARD COVERAGE	24.80	0.00	24.80
1		LB	TIRE RECYCLING FEE	3.15	0.00	3.15
			TOTAL TIRE			182.94

TIRE SERVICE

1	LTI	LB	Lifetime Install Package Includes: Mounting, Balancing, Standard Valve Stem, TPMS Inspection & Reset if applicable Alignment Check, Wheel Torque PLUS: Lifetime Balancing, Lifetime Rotation, Lifetime Tire Repair	0.00	29.99	29.99
			TOTAL TIRE SERVICE:			29.99

*** Customer Wishes To Discard Old Parts ***

These parts were declined by the customer:

1	ALIGNMENT	LB	WHEEL ALIGNMENT	0.00	124.99	124.99
1	FEE			4.19	0.00	4.19
			Subtotal of declined parts (tax not included):	4.19	124.99	129.18

THIS IS A PHONE QUOTE ESTIMATE , NOT AN INVOICE! DO NOT MAKE ANY PAYMENTS FROM THIS PAPERWORK!

TECH:

SUB TOTAL 212.93
 SALES TAX 12.81
 GRAND TOTAL 225.74

SEE REVERSE SIDE FOR IMPORTANT AUTHORIZATION INFORMATION

Customer Signature

CAUTION: Owners of Mag, Custom, Alloy, or Dual Wheels must have lug-nuts retorqued after 25 miles or 24 hours!

The Company will gladly retorque these lug-nuts once after the first 25 miles at no charge.

Customer Initials



Frank J. Picozzi
Mayor

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

March 9, 2021

Sandra Smith
52 Birch Street
Pawtucket, RI 02860

Dear Sandra,

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 – We received one paid invoice. Two additional estimates are required.
- Claim Form – Page titled AFFIDAVIT. Question 2 an appropriate box needs to be checked.

If there is a reason estimates cannot be included in your claim, please state in a separate letter.

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

MAR 15 2021

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


Claims Administration

I have sent the required documents this time. Sorry about that. I actually got the estimates but by phone didn't realize I had to send them in. Thank you