

OSHKOSH (920) 236-4890 FOX CITIES (920 727-2880 FAX (920) 303-3025

E-mail: countyclerk@co.winnebago.wi.us

415 JACKSON STREET, P.O. BOX 2808

OSHKOSH, WISCONSIN 54903-2808

The Wave of the Future

#### **NOTICE OF CLAIM**

Date:

February 8, 2018

To:

Doug, Linda and Joan

Re:

Claim from Wisconsin Public Service for damage to a power box caused by a

county lawn mower

This claim will be presented to the County Board at their March 20, 2018 meeting.

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Bill Date	Account Number	Payment Due Date	Amount Due
01/26/2018	0401879368-00023	02/19/2018	\$2,505,52

**Customer Name** 

WINNEBAGO COUNTY HWY COMM

Service Address

**NEKIMI & SOUTH HWY 45** 

OSHKOSH WI

**Activity Since Last Bill** 

Previous Balance \$0.00 \$0.00 Balance **Total Current Charges** \$2,505.52 **Total Current Balance** \$2,505.52

Other Charges/Credits

09/26/2017 Electric Service Repair

Claim #CL-201785587

**Material Cost** \$495.06 \$295.10 Oil Spill Clean-up Cost Labor Cost \$1,416.88 \$254.48 **Transportation Cost** \$44.00 **Administrative Cost Total Other Charges/Credits** \$2,505.52

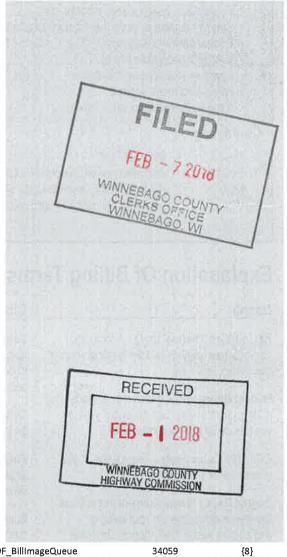
**Total Current Charges** 

\$2,505.52

Messages

You can view your bills online by enrolling in the Your Account section of our website.

Danage - lawn mowing activity



ACCOUNT NUMBER: 0401879368-00023

Page 1 of 1

TEG\_PDF\_BillImageQueue

Please return this stub with your payment.



Account Number: 0401879368-00023

WINNEBAGO COUNTY HWY COMM 901 W COUNTY ROAD Y OSHKOSH WI 54901-8119

**Amount Due By** 02/19/2018 \$2,505.52 Please write your account number on your check Amount Enclosed

Wisconsin Public Service PO Box 3140 Milwaukee, WI 53201-3140

## **Helpful Information**

#### **Billing Questions Or Complaints**

If you have any questions or concerns about your bill, please contact us prior to the bill due date, so we can help.

You can also contact us for any of the following:

- · Rate options & explanation of rates.
- · How to calculate or verify the accuracy of your bill.
- · Evaluating your energy use.
- · Energy conservation efforts.
- · Updating your account information.
- · Billing & payment options.
- · A free customer information booklet.

### **Contacting Us**

Phone:

800-450-7260

Email: Mail: customerservice@wisconsinpublicservice.com PO Box 19003, Green Bay, WI 54307-9003

Web:

www.wisconsinpublicservice.com

#### **Late Payments**

Your payment is considered late if it is not received by the Payment Due Date. When this happens, a late payment charge of 1% of the unpaid balance will be added to the next bill.

#### Safety Reminder

- If you smell natural gas, leave the premise immediately and call our 24-Hour Emergency Service at 800-450-7280.
- Call 811 at least 3 working days before you dig to have lines marked.

#### **Public Service Commission of Wisconsin**

As a natural gas and electric utility, WPS is regulated by the Public Service Commission of Wisconsin (PSCW). You can learn more about the PSCW at http://psc.wi.gov.

Importante: Esta información se refiere a su servicio y tarifas. Es posible que quiera una traducción. Llame al 800-450-7260 para pedir una traducción.

# **Explanation Of Billing Terms**

### **Usage**

**BTU (British Thermal Unit)** – A factor that converts gas volumes into the heating value of the gas.

**Budget Billing** – Billing plan that spreads your energy costs evenly over the entire year, so you can avoid high seasonal bills.

**CCF (100 Cubic Feet)** – The volume of gas measured by your meter.

Degree Days – A measurement that reflects the effects of weather on your heating and cooling needs. Daily degree days are calculated by subtracting the average daily temperature from 65°F. Heating degree days result if temperatures are less than 65°F; cooling degree days if more than 65°F.

**KWH (Kilowatt Hour)** – A measurement of electric use that is used to calculate your charges. One KWH will light a 100-watt bulb for 10 hours.

Therms – A measurement of the heat energy in natural gas that is used to calculate your charges. For billing, it's the volume of natural gas in CCFs multiplied by the heat factor (BTU).

### Charges

**Daily Fixed Charge** – A daily charge that helps cover the fixed costs of providing service to customers. This includes equipment, billing and programs.

**Distribution Charge** – The charge for the safe and reliable delivery of gas to customers.

**Energy Charge** – The cost for the actual amount of electricity used, measured in kilowatt-hours.

**Fuel Cost Adjustment** – A charge or credit that's applied when our actual cost to purchase natural gas is higher or lower than what was projected in your gas rates.

Gas Supply Acquisition Service – A charge for the purchase and management of gas supplies, including the carrying costs of purchasing supplies in the summer and storing until winter.

Gas Supply Service – The costs for providing natural gas to our customers. This includes Gas Supply Acquisition Service and Natural Gas Costs.

Local Distribution Service – The charge for the safe and reliable delivery of gas to customers. It includes a Daily Fixed Charge, Distribution Charge and Gas Supply Acquisition Service.

**Natural Gas Costs** – The actual cost of the natural gas used.

**WI Low Income Assistance Fee** – A fee required by state law that helps fund low-income assistance programs.

#### **Financial Assistance**

Winter KEEP Wisconsin Warm/Cool – Helps eligible customers pay their heating bills. For information, call 800-891-9276.

Wisconsin Home Energy Assistance Program (WHEAP) — Provides heating assistance grants to eligible customers. For assistance, call your county's social service agency, or WPS at 800-450-7260.

# Winnebago County Highway Department ACCIDENT/INCIDENT REPORT

DATE OF ACCIDENT/INCIDENT: 4/26/17	TIME: 1200 AM PM
LOCATION OF ACCIDENT/INCIDENT:	) ve
POLICE REPORT # OFFICER	R NAME
Attach police report  MUNICIPALITY  CITATIO	ON ISSUED: YES NO
DRIVER NAME Milhael Rotrate IF SO, T	O WHOM?
PASSENGER	
EQUIPMENT # YEAR MAKE/M	ODEL JOHn deer frontor
Broken Scratched Bent Stretched Over Heated Punctured Flattened Other	
DESCRIPTION OF ACCIDENT/INCIDENT (WHAT HAPPENED AND W	/HY)
proving ditch line and did not	See the Puner box
and hat it with the Winus. Did	nut think I did
that much dangue with it and	hard to see with
the weeds all over it next time	to freent this I vill
Des out of the tractor and lovic arm.	ed the area.
SUPERVISOR COMMENTS	
Upon my visiting of the site I observe	d will had alread, repaired
the transformer box. M. te states that	
the bearing on the end of the wing or	own. According to was
pictures there was significant damage.	I educad Mike to supp a pictur
DRIVER SIGNATURE	DATE
pictures there was significant damage.  DRIVER SIGNATURE  SUPERVISOR SIGNATURE  Line Land of the wing respectively and the wing respectively.	DATE 10/4/17
in the strue it he had an encounter to let ngut know asgo. One thing I	with an object in the oliter and
to let ngut know asgo. One thing I	hatted in the pictures is from
are no visible marking whips on the	Traces for mer.

# Winnebago County Highway Department ACCIDENT/INCIDENT REPORT

## WITNESS ACCOUNT OF ACCIDENT/INCIDENT

WITNESS NAME		090
WITNESS SIGNATURE	DATE	· ##
WITNESS NAME	2.31.3169	
WITNESS SIGNATURE	DATE	)
POLICE REPORT ATTACHED		
PICTURES ATTACHED		

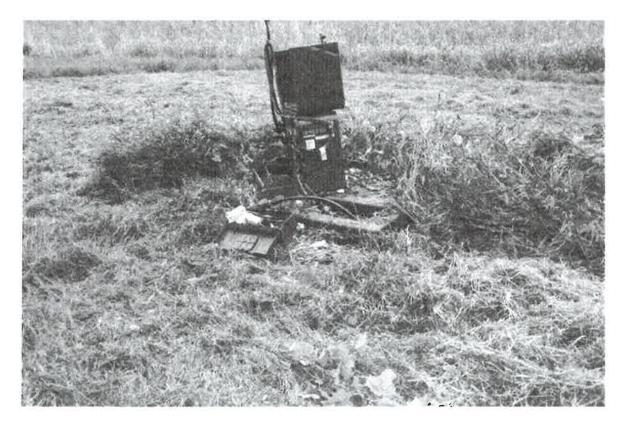












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		(#)	





# **WINNEBAGO COUNTY**

IF THIS IS AN AUTO ACCIDENT CONTACT APPROPRIATE LAW ENFORCEMENT CALL THE FINANCE DEPARTMENT 232-3448

COMPLETE THIS FORM TO THE BEST OF YOUR ABILITY – Keep a copy for your records and send a copy to the Finance Dept.

**EMPLOYEES: Do not** accept responsibility for ambulance bills.

## Was a County vehicle involved?

Complete the Accident Report Form that is kept in vehicle.

Was a County employee injured?

Call Personnel to report any Workers Compensation loss.

*************************
Date of Loss: 9/26/17 Location: E Nelson: Aue
Earl of STH 45
Description Of Loss: Ground Mounted Electrical Transformer (WPS)
was struct by highway dept momen.
Possible Contributing Conditions (icy, wet, cracked walkway, etc):
Partially observed by vogofation
Injuries: Name: Name:
Address & Phone:
Injury:
Remember to check the appropriate boxes below
Left the scene: □Walking □Ambulance MOther: Equipment # 125
ZCounty or □ Non-County Property: Auto or property description:
#225 John Deere Momen
Damages and estimated repair/replacement (if possible)
□ County or ★ Non-County Property: Auto or property description:
WPS Transformen Box
Damages and estimated repair/replacement (if possible)
Based on conversitions with cuts it will be rebuilt and reveal.
Witnesses: (Name, address, phone, dept. if applicable)
Completed by: Brigg Trobiatousk: Phone: 23d-1>55
FOR ADDITIONAL STATEMENTS, INFORMATION AND FACTS USE OTHER SIDE

Scared + enailed to log in Finance