

1 **345-032024**

2
3 **RESOLUTION: 345-032024 Disallow Claim for Dan & Paula Rabideau**

4
5 **TO THE WINNEBAGO COUNTY BOARD OF SUPERVISORS:**

6
7 **WHEREAS**, your Personnel and Finance Committee has had the claim of Lane Fritch referred to it for
8 review; and
9

10 **WHEREAS**, your Committee has investigated the claim and recommends it be disallowed by Winnebago
11 County.
12

13 **NOW, THEREFORE, BE IT RESOLVED** by the Winnebago County Board of Supervisors that the claim
14 of Dan & Paula Rabideau, filed with the County Clerk on February 20, 2024, is hereby disallowed since
15 there is no basis for liability on the part of Winnebago County.
16
17

Respectfully submitted by:
PERSONNEL & FINANCE COMMITTEE
Committee Vote: 5-0

18
Fiscal Note: No fiscal impact.

Vote Required for Passage: **Majority of Members Present**

19
20
21 Approved by the Winnebago County Executive on _____
22
23 _____
24 Jonathan D. Doemel
25 Winnebago County Executive
26



Winnebago County
Office of the County Clerk

The Wave of the Future

OSHKOSH (920) 232-3430
FAX (920) 232-3435
E-mail: countyclerk@winnebagocountywi.gov

NOTICE OF CLAIM

DATE: February 20, 2024
TO: Joel Luepke and Melanie Boelter
FROM: Cassie Smith-Gregor
RE: Claim from Dan & Paula Rabideau

This claim will be forwarded to the Personnel & Finance Committee for action on March 7, 2024, and presented to the County Board at their February 27, 2024 meeting.

WE WERE AT FRIARTUCKS EATING SUPER
WE WERE NOT IN THE CAR WHEN IT WAS
HIT BY THE COUNTY WIECKE.

HIT IN THE BACK BUMPER CRACKED
BEYOND REPAIR.

WE WON'T KNOW OF OTHER DAMAGE TELL
THE BUMPER COMES OFF.

DAN RABIDEAU

576 RIFORD RD.

NEENAWI. 54956

☎ 920 486 3300

GEIGER AUTO BODY

josh@geigerauto.com
7285 state 76, neenah, WI 54986
Phone: (920) 725-3267
FAX: (920) 725-3597

Workfile ID: 5792fea2
PartsShare: 7JW9HJ
Federal ID: 39-1856112

Preliminary Estimate

Customer: Rabideau, Paula

Job Number:

Written By: Josh Levitas

Insured: Rabideau, Paula
Type of Loss:
Point of Impact:

Policy #:
Date of Loss:

Claim #:
Days to Repair: 0

Owner:
Rabideau, Paula
(920) 486-3300 Cell

Inspection Location:
GEIGER AUTO BODY
7285 state 76
neenah, WI 54986
Repair Facility
(920) 725-3267 Business

Insurance Company:

VEHICLE

2013 HOND Accord Sedan EX-L w/Continuously Variable Transmission/Navigation PZEV 4D SED 4-2.4L Gasoline Direct Injection

VIN: 1HGCR2F85DA272511
License:
State: WI

Interior Color:
Exterior Color:
Production Date:

Mileage In:
Mileage Out:
Condition:

Vehicle Out:
Job #:

TRANSMISSION

Automatic Transmission

POWER

Power Steering
Power Brakes
Power Windows
Power Locks
Power Mirrors
Heated Mirrors
Power Driver Seat
Power Passenger Seat
Memory Package

DECOR

Dual Mirrors
Console/Storage

CONVENIENCE

Air Conditioning
Intermittent Wipers
Tilt Wheel
Cruise Control
Rear Defogger
Keyless Entry
Alarm
Message Center
Steering Wheel Touch Controls
Telescopic Wheel
Climate Control
Navigation System
Backup Camera

RADIO

AM Radio
FM Radio

Stereo

Search/Seek
CD Player
Auxiliary Audio Connection
Satellite Radio

SAFETY

Drivers Side Air Bag
Passenger Air Bag
Anti-Lock Brakes (4)
4 Wheel Disc Brakes
Front Side Impact Air Bags
Head/Curtain Air Bags
Hands Free Device
Lane Departure Warning

ROOF

Electric Glass Sunroof

SEATS

Bucket Seats
Leather Seats
Heated Seats

WHEELS

Aluminum/Alloy Wheels

PAINT

Clear Coat Paint

OTHER

Fog Lamps
Traction Control
Stability Control
Signal Integrated Mirrors
Power Trunk/Liftgate

Preliminary Estimate

Customer: Rabideau, Paula

Job Number:

2013 HOND Accord Sedan EX-L w/Continuously Variable Transmission/Navigation PZEV 4D SED 4-2.4L Gasoline Direct Injection

Line	Oper	Description	Part Number	Qty	Extended Price \$	Labor	Paint
1		REAR BUMPER					
2		O/H rear bumper				1.1	
3	Repl	Bumper cover	04715T2AA90ZZ	1	507.41	Incl.	2.8
4		Add for Clear Coat					1.1
open	Repl	Impact bar (HSS)	71530T2AA00	1	187.00	0.4	
6	#	Subl Hazardous waste removal		1	4.50 T		
7	#	not the picture possible damage to rear body panel		1			
8	#	Repl Flex additive		1	5.00 T		
SUBTOTALS					703.91	1.5	3.9

ESTIMATE TOTALS

Category	Basis	Rate	Cost \$
Parts			694.41
Body Labor	1.5 hrs @	\$ 72.00 /hr	108.00
Paint Labor	3.9 hrs @	\$ 72.00 /hr	280.80
Paint Supplies	3.9 hrs @	\$ 50.00 /hr	195.00
Miscellaneous			9.50
Subtotal			1,287.71
Sales Tax	\$ 1,287.71 @	5.0000 %	64.39
Grand Total			1,352.10
Deductible			0.00
CUSTOMER PAY			0.00
INSURANCE PAY			1,352.10

MOTOR VEHICLE REPAIR PRACTICES ARE REGULATED BY CHAPTER ATCP 132, WIS. ADM. CODE, ADMINISTERED BY THE BUREAU OF CONSUMER PROTECTION, WISCONSIN DEPT. OF AGRICULTURE, TRADE AND CONSUMER PROTECTION, P.O. BOX 8911, MADISON, WISCONSIN 53708-8911.

Preliminary Estimate

Customer: Rabideau, Paula

Job Number:

2013 HOND Accord Sedan EX-L w/Continuously Variable Transmission/Navigation PZEV 4D SED 4-2.4L Gasoline Direct Injection

Estimate based on MOTOR CRASH ESTIMATING GUIDE and potentially other third party sources of data. Unless otherwise noted, (a) all items are derived from the Guide ARG4439, CCC Data Date 12/15/2023, and potentially other third party sources of data; and (b) the parts presented are OEM-parts. OEM parts are manufactured by or for the vehicle's Original Equipment Manufacturer (OEM) according to OEM's specifications for U.S. distribution. OEM parts are available at OE/Vehicle dealerships or the specified supplier. OPT OEM (Optional OEM) or ALT OEM (Alternative OEM) parts are OEM parts that may be provided by or through alternate sources other than the OEM vehicle dealerships with discounted pricing. Asterisk (*) or Double Asterisk (**) indicates that the parts and/or labor data provided by third party sources of data may have been modified or may have come from an alternate data source. Tilde sign (~) items indicate MOTOR Not-Included Labor operations. The symbol (<>) indicates the refinish operation WILL NOT be performed as a separate procedure from the other panels in the estimate. Non-Original Equipment Manufacturer aftermarket parts are described as Non OEM, A/M or NAGS. Used parts are described as LKQ, RCY, or USED. Reconditioned parts are described as Recond. Recored parts are described as Recore. NAGS Part Numbers and Benchmark Prices are provided by National Auto Glass Specifications. Labor operation times listed on the line with the NAGS information are MOTOR suggested labor operation times. NAGS labor operation times are not included. Pound sign (#) items indicate manual entries.

Some 2023 vehicles contain minor changes from the previous year. For those vehicles, prior to receiving updated data from the vehicle manufacturer, labor and parts data from the previous year may be used. The CCC ONE estimator has a list of applicable vehicles. Parts numbers and prices should be confirmed with the local dealership.

The following is a list of additional abbreviations or symbols that may be used to describe work to be done or parts to be repaired or replaced:

SYMBOLS FOLLOWING PART PRICE:

m=MOTOR Mechanical component. s=MOTOR Structural component. T=Miscellaneous Taxed charge category. X=Miscellaneous Non-Taxed charge category.

SYMBOLS FOLLOWING LABOR:

D=Diagnostic labor category. E=Electrical labor category. F=Frame labor category. G=Glass labor category. M=Mechanical labor category. S=Structural labor category. (numbers) 1 through 4=User Defined Labor Categories.

OTHER SYMBOLS AND ABBREVIATIONS:

Adj.=Adjacent. Algn.=Align. ALU=Aluminum. A/M=Aftermarket part. Blnd=Blend. BOR=Boron steel. CAPA=Certified Automotive Parts Association. D&R=Disconnect and Reconnect. HSS=High Strength Steel. HYD=Hydroformed Steel. Incl.=Included. LKQ=Like Kind and Quality. LT=Left. MAG=Magnesium. Non-Adj.=Non Adjacent. NSF=NSF International Certified Part. O/H=Overhaul. Qty=Quantity. Refn=Refinish. Repl=Replace. R&I=Remove and Install. R&R=Remove and Replace. Rpr=Repair. RT=Right. SAS=Sandwiched Steel. Sect=Section. Subl=Sublet. UHS=Ultra High Strength Steel. N=Note(s) associated with the estimate line.

CCC ONE Estimating - A product of CCC Intelligent Services Inc.

The following is a list of abbreviations that may be used in CCC ONE Estimating that are not part of the MOTOR CRASH ESTIMATING GUIDE:

BAR=Bureau of Automotive Repair. EPA=Environmental Protection Agency. NHTSA= National Highway Transportation and Safety Administration. PDR=Paintless Dent Repair. VIN=Vehicle Identification Number.

Geiger
auto body

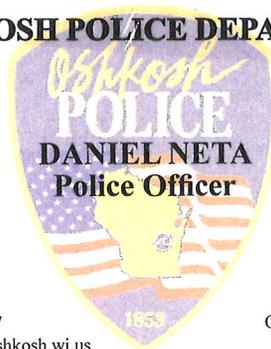
7285 STATE ROAD 76
NEENAH, WI 54956

920-725-3267
FAX 920-725-3597

JOSH GEIGER
SHOP MANAGER
Josh@GeigerAuto.com

WWW.GEIGERAUTOBODY.COM

OSHKOSH POLICE DEPARTMENT



P: (920) 236-5700
Fax: (920) 236-5087
Email: DNeta@ci.oshkosh.wi.us

420 Jackson Street
Oshkosh, Wisconsin 54901
www.oshkoshpd.com



SCAN FOR MORE INFORMATION

Oshkosh Police Department is committed to enhance the quality of life in our community through innovative policing and community partnerships

We value Professionalism, Pride, Integrity and Teamwork

COMPLAINT# 23-047445

5NL17X84S6
23-047445

WISCONSIN MOTOR VEHICLE
CRASH REPORT

OSHKOSH POLICE DEPARTMENT
420 JACKSON STREET
OSHKOSH, WI 54903
(920) 236-5700

5NL17X84S6

Document Number Override		Primary Crash Document #	Agency Crash Number 23-047445	Investigating Officer/Deputy D. NETA	
Crash Date 12/28/2023		Crash Time 05:10 PM	Date Arrived 12/28/2023	Time Arrived 05:33 PM	
Date Notified 12/28/2023		Time Notified 05:12 PM	Total Units 02	Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone	<input type="checkbox"/> Trailer or Towed	<input type="checkbox"/> Reporting Threshold
<input type="checkbox"/> Government Property	<input type="checkbox"/> Active School Zone	School Bus Related NO		Tags	
<input checked="" type="checkbox"/> Reportable	Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

Description

Diagram	Reconstruction By
	Photos By
	Additional Information NONE

I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

U1 WAS DRIVING THROUGH THE PARKING LOT OF FRIAR TUCKS AT 1651 SOUTH PARK AV IN THE CITY OF OSHKOSH, WI, WINNEBAGO COUNTY. WHILE DOING SO HE WENT TO NAVIGATE AROUND AN UNOCCUPIED PARKED VEHICLE BUT STRUCK THE REAR END OF U2 WITH THE FRONT OF HIS DUE TO THE HEAVY RAIN.

5NL17X84S6
23-047445

WISCONSIN MOTOR VEHICLE
CRASH REPORT

OSHKOSH POLICE DEPARTMENT
420 JACKSON STREET
OSHKOSH, WI 54903
(920) 236-5700

Location

ON 1651 STH44 NB 269 FT S OF RIPON LN (HOUSE/BUILDING 1651) IN THE CITY OF OSHKOSH IN WINNEBAGO COUNTY	Latitude 43.994393417	Longitude -88.576108057
	X Coordinate 373624.46875	Y Coordinate 4872457.5
	Structure Type HOUSE/BUILDING	

Crash Scene

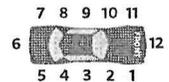
First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location OFF ROADWAY, LOCATION UNKNOWN	
Manner of Collision 03 - FRONT TO REAR		Light Condition DARK/LIGHTED	
Road Surface Condition(s) WET		Roadway Factor(s) NONE	
Environment Factor(s) WEATHER CONDITIONS			
Weather Condition(s) RAIN			
Animal Type		Relation To Trafficway NON TRAFFICWAY - PARKING LOT	
Crash Classification - Location PRIVATE PROPERTY		Crash Classification - Jurisdiction PRIVATE PROPERTY	
Tribal Land		Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION	

Unit Summary

UNIT 01	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type (SPORT) UTILITY VEHICLE				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel NOT ON ROADWAY	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit N/A	Total Lanes 0	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way PARKING LOT OR PRIVATE PROPERTY		Traffic Control OTHER		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature CURVE LEFT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

Vehicle

UNIT 01 VEHICLE 01	License Plate Number AEU9817		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number 1C4RJFAG9KC714939		Make JEEP	Year 2019	Model GRAND CHER	
	Color BLK - BLACK		Body Style SP - SPECIAL DESIGN VEHICLE		Bus Use	
	Initial Contact Point 11 - LEFT FRONT CORNER		Vehicle Damage 11 - LEFT FRONT CORNER, 12 - FRONT			
	Extent Of Damage MINOR DAMAGE					



5NL17X84S6
23-047445

WISCONSIN MOTOR VEHICLE
CRASH REPORT

OSHKOSH POLICE DEPARTMENT
420 JACKSON STREET
OSHKOSH, WI 54903
(920) 236-5700

UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
	What Driver Was Doing OTHER		Vehicle Factors	
	Driver Prior Action Other TURNING		NOT APPLICABLE	
	Driver Actions LOOKED BUT DID NOT SEE			
01 01	Owner Name COUNTY DISTRICT ATTORN WINNEBAGO		Owner Address 481 SUNNYBROOK DR OSHKOSH, WI 54904 , US	
	Sequence Of Events			
01 02 03 04	Event MOTOR VEH IN TRANSPORT			
	Event PARKED MOTOR VEHICLE			
	Event			
	Event			
UNIT	Policy Holder			
	Insurance Company WISCONSIN-COUNTY-MUTUAL-INS-CORP		Government WINNEBAGO COUNTY 920 236 5700	
UNIT INDIVIDUAL	Individual			
	Driver JAMES L GOGGINS		Citations Issued 0	Sex MALE
			Date of Birth 01/20/1948	Race WHITE
	Address 481 SUNNYBROOK DR OSHKOSH, WI 54904 , US		Driver License Number G2524524802008 STATE: WISCONSIN COUNTRY: UNITED STATES	
01 001	Safety Equipment		On Duty Crash	
			Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED
Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #
Hospital		Date of Death		Time of Death
Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				

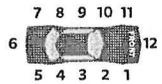
WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT INDIVIDUAL 01 001	Non Motorist		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other				To/From School
	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO	
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type		Alcohol Test Results
	Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results	
	Drug Type				
	Individual Condition APPEARED NORMAL				

Unit Summary

UNIT 02	Unit Status LEGALLY PARKED		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE
	Vehicle Type PASSENGER CAR				Operating As Endorsements
	Total Occs 0	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel NOT ON ROADWAY	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit N/A	Total Lanes 0
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE
	Traffic Way PARKING LOT OR PRIVATE PROPERTY		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL
	Truck Bus or HazMat NO				

UNIT VEHICLE 02 02	Vehicle				
	License Plate Number 121PDK		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1HGCR2F85DA272511		Make HONDA	Year 2013	Model ACCORD EX-
	Color BLK - BLACK		Body Style 4D - 4DR		Bus Use
	Initial Contact Point 06 - REAR		Vehicle Damage		
	Extent Of Damage MINOR DAMAGE		06 - REAR		
Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR			



5NL17X84S6
23-047445

WISCONSIN MOTOR VEHICLE CRASH REPORT

OSHKOSH POLICE DEPARTMENT
420 JACKSON STREET
OSHKOSH, WI 54903
(920) 236-5700

UNIT VEHICLE	02	What Driver Was Doing LEGALLY PARKED	Vehicle Factors
	02	Driver Prior Action Other	NOT APPLICABLE
	02	Driver Actions NO CONTRIBUTING ACTION	
	02	Owner Name PAULA LEE RABIDEAU	Owner Address 576 RIFORD RD NEENAH, WI 54956 , US
UNIT	Sequence Of Events		
	01	Event MOTOR VEH IN TRANSPORT	
	02	Event PARKED MOTOR VEHICLE	
	03	Event	
	04	Event	
UNIT	Policy Holder		
		Insurance Company AMERICAN-FAMILY-INS-CO	Individual PAULA RABIDEAU
Property Owner			
PROP OWNER	01	Government WINNEBAGO COUNTY (920) 236-5700	Address 240 ALGOMA BLVD OSHKOSH, WI 54903 , US
Fixed Objects Struck			
	01	Striking Unit 01	Struck Object OTHER OBJECT - NOT FIXED
			Structure Number 0000000
			Damage Tag Number 0000000

1800 236 6885

Am. Family 800 692 6326

6000 AMERICAN PARKWAY
 MADISON, WI 53783-0001

Claim Number: 01-007-077452
 Date Of Loss: 12/28/2023
 Policy Number: 410372972885
 Policyholder: Dan Rabideau And Paula Rabideau

000707FC6500M01040021712 Q03A 001



DAN RABIDEAU
 576 RIFORD RD
 NEENAH, WI 54956-4204

January 2, 2024

Dear Dan Rabideau,

This correspondence contains important information regarding your claim. Please review and respond accordingly.

Thank you for insuring your automobile through American Family Insurance Company.

We acknowledge receipt of your claim and will begin our investigation. Every claim is important to us and your adjuster will typically contact you within one business day upon receiving first notice of your claim. Please note that during periods of high volume, such as a severe weather event that disrupts power or delays travel, you may be contacted in excess of one business day.

By providing this listing of coverages, this is not a confirmation that coverage will be afforded for the above referenced loss at this time. We must complete our coverage investigation to determine how coverage may be afforded.

Type	Per Person Limit	Incident Limit	Daily Limit
Liability - Bodily Injury	\$500,000	\$500,000	
Medical Expense	\$10,000		
Property Damage Liability		\$100,000	
Underinsured Motorist - Bodily Injury (UIMBI)	\$500,000	\$500,000	
Uninsured Motorist - Bodily Injury (UMBI)	\$500,000	\$500,000	

Type	Deductible
Collision	\$500
Comprehensive	\$250

During the first call, we will discuss with you the nature of the claim and the available coverage. If, for some reason, we have not been able to reach you, or you have questions or concerns which have not yet been addressed, please call us at 1-800-MY AMFAM (1-800-692-6326).

When speaking with us, it is helpful to use the claim number which is referenced at the top of the letter. Please retain this letter as a record of your claim and the Claim Department's contact information. We look forward to working with you to resolve your claim.

In the event there was a child seat or booster in the vehicle, there may be coverage under your policy for the replacement cost of this item. Please prepare to inform your adjuster of this information, along with any pictures or documentation you have on the year, make model and cost so that we can consider this in our investigation.

C000 00010001 000707 0000



We are committed to providing excellent customer service and are here to assist you. Please contact us with any questions you may have.

Sincerely,

Claims Department
AFICS on behalf of American Family Insurance Company

You can check the status of your claim online via the AMFAM mobile app, or online at MyAccount by visiting amfam.com and logging in or creating an account, or by scanning the QR code below with your smart device.

