

# BOARD OF SUPERVISORS

Madison County, Mississippi

E-911 Administration Office

1633 W. Peace Street, PO Box 608, Canton, MS 39046

T: (601) 859-6485 F: (601) 859-4743

DATE: May 16, 2018  
TO: Madison County Board of Supervisors  
FROM: Emergency Management Office  
RE: Road Claim  
Charlene Gordon

After investigation on the above referenced claim, it is the recommendation of the Emergency Management Office to approve and pay the claim to the order of Charlean Gordan, in the amount of \$ 138.00 for stated repairs. If any further information is needed, please contact our office.

*Repairs not completed within 7 day period allowed per Madison County Road Claim Policy.*

## ROAD CLAIM INCIDENT REPORT

In order to process the claim, please print & fill out completely and return to Madison Co. EMA office along with two signed estimates for damages being claimed. All required paperwork must be returned within 7 days of incident. NOTE: Our policy is a reimbursement policy. We DO NOT replace nor arrange to have any repairs made. It is to your own discretion to when the repairs are made. If your claim is approved a reimbursement check will be mailed to you at the given address given below.

<p><b>Personal Information</b></p>	<p>Date: <u>4-18-2018</u></p> <p>Name: <u>Charlean Gordon</u></p> <p>Mailing Address:  <u>106 Parkview Dr APT 72</u>  <u>Canton MS 39046</u></p> <p>Contact #: <u>601 859-5929</u></p> <p>Make/ Model of Vehicle: <u>2011 Hyundai</u></p>
<p><b>Incident Information</b></p>	<p>Please answer questions below in relations to the incident being reported:</p> <p>Date: <u>4/15/2018</u> Time: <u>1:30 pm</u></p> <p>Location: <u>Old Yazoo Road</u>  <small>(name of road incident occurred)</small></p> <p>Area Landmarks: <u>Old Yazoo Road Near St James Church</u></p> <p>Approx. Speed at time of incident: <u>40 mph</u></p> <p>Direction of Travel: <u>Gone North</u></p> <p>Cause of Incident: <u>pothold</u>  <small>(ie: pothole, rock, etc..)</small></p> <p>Area of vehicle damaged: <u>Real Tire on driving side</u></p>
<p><b>Incident Summary</b></p>	<p>Please write a brief summary of the incident (use back if needed):</p> <p><u>I was going to a funeral &amp; was driving about 40 min mile per hour and hit a pothold causing damage on Real tire on driver side</u></p>
<p><b>Signature</b></p>	<p><u>Charlean Gordon</u> <u>4/18/2018</u>                  Signature Date</p> <p><input checked="" type="checkbox"/> Please check box, indicating that you have read and understand the Madison Co. Road Claim Policy:</p>

OFFICE USE ONLY:

Date Received: 4/16/18 Received by: JCC / Office Dept: EMA

# SUPERIOR TIRE RECAPPERS, INC.

TIRES - TUBES - ALIGNMENT - SERVICE

3247 S. Liberty Street ———●————— Phones 859-2432  
P.O. Box 188 859-2433

CANTON, MISS. 39046-0188

1.5% FINANCE CHARGE AFTER 30 DAYS

Customer's Order No. \_\_\_\_\_ Date 4-16-18

Name Quote

Address \_\_\_\_\_

Phone # \_\_\_\_\_

SOLD BY	CASH	C.O.D.	CHARGE	ON ACCT.	MOSE. RETD.	PAID OUT
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QUAN	DESCRIPTION	PRICE	AMOUNT
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1	225/45 R18 Nexen UHP RADIAL		128 <sup>00</sup>
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Quote

White 2011 Hyundai

SHOP SUPPLIES

1 WASTE TIRE DISPOSAL FEE 1.00

All claims and returned goods MUST be accompanied by this bill.

200023	Received By _____	7% TAX 9.03
		1.5% TAX
		TOTAL <u>138.03</u>

**Manning Tire Co., Inc.**  
**859-9494**  
 3113 S. Liberty St. • Canton, MS 39046

NAME *Madison Co. Road Maint.*

ADDRESS

CITY

DATE *4/16/18* CUST. ORDER NO. WHEN PROMISED PHONE

QUAN. PART NO. NAME OF PART SALE AMT.

YEAR & MAKE OF CAR-TYPE OR MODEL SERIAL NO.

MOTOR NO.

LICENSE NO. MILEAGE

WRITTEN BY *CA*

DESCRIPTION OF WORK AMOUNT

*1- 225/45R-18 Nexen 150.00*

*Quote*

GAS, OIL, GREASE, WASH, POLISH LABOR ONLY

GAS GALS LUBRICATE PARTS

(SEE BACK FOR ADDITIONAL PARTS) TOTAL PARTS ➤

OIL QTS CHANGE ENGINE OIL ACCESSORIES

ACCESSORIES—TIRES AND TUBES

GREASE LBS TRANSMISSION GAS, OIL & GREASE

DIFFERENTIAL MISC. MERCHANDISE

WASH/POLISH TAX

TOTAL GAS, OIL & GREASE ➤ TOTAL SERVICE ➤ GAS CREDIT CARD CHARGE

TOTAL ACCESSORIES ➤

AUTHORIZED BY: TOTAL ➤

ESTIMATES ARE FOR LABOR ONLY. MATERIAL ADDITIONAL.

I HEREBY AUTHORIZE THE ABOVE REPAIR WORK TO BE DONE ALONG WITH NECESSARY MATERIALS. YOU AND YOUR EMPLOYEES MAY OPERATE ABOVE VEHICLE FOR PURPOSES OF TESTING, INSPECTION OR DELIVERY AT MY RISK. AN EXPRESS MECHANIC'S LIEN IS ACKNOWLEDGED ON ABOVE VEHICLE TO SECURE THE AMOUNT OF REPAIRS THERETO. IT IS UNDERSTOOD THAT THIS COMPANY ASSUMES NO RESPONSIBILITY FOR LOSS OR DAMAGE BY THEFT OR FIRE TO VEHICLES PLACED WITH THEM FOR STORAGE, SALE, REPAIR OR WHILE ROAD TESTING.

1-1.2% INTEREST WILL BE CHARGED PER MONTH ON THE UNPAID BALANCE OF THIS ACCOUNT. CUSTOMER IS RESPONSIBLE FOR ANY AND ALL COLLECTION FEES THAT MAY BE INCURRED.

**THIS IS YOUR INVOICE**

No. 90243



