

PK2011

POLICE # 24-12

ACCIDENT #

GENERAL INFORMATION

OPERATOR/PEDESTRIAN 01

<input checked="" type="checkbox"/> Reportable Accident		<input type="checkbox"/> On Emergency		<input type="checkbox"/> Amended		DOT Document Number LF5GGW6		Document Override Number	
Agency Accident Number				Police Number 24-12					
4 - Accident Date 01/01/2012		5 - Time of Accident (Military Time) 0030		6 - Total Units 02		7 - Total Injured 00		8 - Total Killed 00	
2 - County POLK - 48		3 - Municipality DRESSER - 55, VILLAGE				11 - Accident Location PARKING LOT			
14 - On Hwy No.	14 - On Street Name PARKING LOT			14 - Bus/Frnt/Rmp		15 - Est. Dist	Ft/Mi	15 - Hwy. Dir	
16 - Fr/At Hwy No.	16 - From/At Street Name EAST AVE			16 - Business/Frontage/Ramp					
17 - Structure Type HOUSE #	17 - Structure Number 201		12 - Latitude			13 - Longitude -			
80 - First Harmful Event PARKED MOTOR VEHICLE				93 - Manner of Collision UNKNOWN					
112 - Access Control NO CONTROL		113 - Road Curvature STRAIGHT		113 - Road Terrain LEVEL/FLAT		Surface Type BLACKTOP (BITUMINOUS) - 2			
115 - Traffic Way PARKING-LOT-OR-PRIVATE-PROPERTY									
117 - Relation To Roadway PARKING-LOT-OR-PRIVATE-PROPERTY									
114 - Light Condition DARK-LIGHTED			116 - Road Surface Condition SNOW/SLUSH			118 - Weather SNOW			
9 <input checked="" type="checkbox"/> Hit and Run	9 <input type="checkbox"/> Government Property		9 <input type="checkbox"/> Fire	9 <input checked="" type="checkbox"/> Photos Taken		9 <input type="checkbox"/> Trailer or Towed			
9 <input type="checkbox"/> Truck, Bus, or Hazardous Materials		9 <input type="checkbox"/> Load Spillage		9 <input type="checkbox"/> Construction Zone		9 <input type="checkbox"/> Names Exchanged			
101 <input checked="" type="checkbox"/> Supplemental Reports		102 <input type="checkbox"/> Witness Statements		103 <input type="checkbox"/> Measurements Taken		79 - E M S Number			

Operator/Pedestrian

Unit Status L - LEGALLY PARKED		81 - Most Harmful Event: Collision With MOTOR VEHICLE IN TRANSPORT		23 - Dir Of Travel		24 - Speed Limit 05	
36 - Operating as Classified D CLASS		37 - Endorsements		35 <input type="checkbox"/> Operating Commercial Motor Vehicle			
29 - Driver's License Number		30 - State	31 - Expiration Year	34 - On Duty Accident			
25 - Operator/Pedestrian Last Name			25 - First Name		25 - Middle Initial	25 - Suffix	
32 - Date Of Birth		33 - Sex					
26 - Address Street & Number						26 - PO Box	
27 - City			27 - State	27 - Zip Code		28 - Telephone Number	
39 - Seat Position BLANK				40 - Safety Equipment NOT-APPLICABLE-NONMOTORIST			
38 - Injury Severity		41 - Airbag NOT APPLICABLE		42 - Ejected NOT-APPLICABLE		44 <input type="checkbox"/> Medical Transport	
43 - Trapped/Extricated NOT-APPLICABLE		92 - Pedestrian Location		92 - Pedestrian Action			
119 - What Driver Was Doing LEGALLY-PARKED			120 - Traffic Control NO-CONTROL			62 - No. of Citations Issued 0	
64 - 1st Statute No.	64 - 2nd Statute No.	64 - 3rd Statute No.		64 - 4th Statute No.		64 - 5th Statute No.	
122 - Driver Factors NOT-APPLICABLE							
88 - Driver or Pedestrian Cond		89 - Substance Presence					
90 - Alcohol Test			90 - Alcohol Content			91 - Drug Test	

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91 - Drugs Reported
124 - Highway Factors NOT-APPLICABLE

Vehicle

VEHICLE 01	21 - Unit Type AUTOMOBILE		Vehicle Type PASSENGER-CAR			22 - Total Occupants 0
	56 - License Plate Number 562PDE		57 - Plate Type AUT	58 - State WI	59 - Exp Year	55 - Vehicle Identification Number 1G4NJ52T5VC417770
	50 - Year 1997	51 - Make BUIC	52 - Model SKYLARK	53 - Body Style 4D	54 - Color	100 - Skidmarks to Impact (Ft)
	94 - Vehicle Damage FRONT, FRONT DRIVER SIDE					
	95 - Extent Of Damage MODERATE		96 <input type="checkbox"/> Vehicle Towed Due To Damage		97 - Vehicle Removed By	
	123 - Vehicle Factors NOT-APPLICABLE					

Vehicle Owner

VEH OWNER 01	45 <input type="checkbox"/> Vehicle Owner Same As Operator					
	46 - Vehicle Owner Last Name ANDERSON		46 - First Name SHERI		46 - Middle Initial A	46 - Suffix
	46 - Company Name					
	47 - Address Street & Number 200 SEMINOLE AVE #69				47 - PO Box	
	48 - City OSCEOLA		48 - State WI	48 - Zip Code 54020		49 - Telephone Number (715) 417-3020 EXT.

Insurance

INS 01	63 - Liability Insurance Company NOT-REQUIRED		60 <input type="checkbox"/> Policy Holder Same As Owner			
	61 - Policy Holder Last Name			61 - Policy Holder First Name		
	61 - Policy Holder Company					

School Bus

BUS 01	Bus Travelling to/from <input type="radio"/> To <input type="radio"/> From	School Name	Body Make	Seating Capacity
	School District Contracted With			

Operator/Pedestrian

Unit Status H - HIT AND RUN		81 - Most Harmful Event: Collision With PARKED MOTOR VEHICLE		23 - Dir Of Travel	24 - Speed Limit 05
36 - Operating as Classified D CLASS		37 - Endorsements		35 <input type="checkbox"/> Operating Commercial Motor Vehicle	
29 - Driver's License Number		30 - State	31 - Expiration Year	34 - On Duty Accident	
25 - Operator/Pedestrian Last Name		25 - First Name		25 - Middle Initial	25 - Suffix
32 - Date Of Birth		33 - Sex			

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OPERATOR/PEDESTRIAN 02	26 - Address Street & Number				26 - PO Box	
	27 - City		27 - State	27 - Zip Code		28 - Telephone Number
	39 - Seat Position FRONT-SEAT-LEFT-SIDE-(MC/BIKE DRIVER, TRAIN CONDUCTOR)			40 - Safety Equipment RESTRAINT-USE-UNKNOWN		
	38 - Injury Severity N - NO APPARENT INJURY		41 - Airbag UNKNOWN		42 - Ejected UNKNOWN	
					44 <input type="checkbox"/> Medical Transport	
	43 - Trapped/Extricated UNKNOWN		92 - Pedestrian Location		92 - Pedestrian Action	
	119 - What Driver Was Doing		120 - Traffic Control NO-CONTROL			62 - No. of Citations Issued
	64 - 1st Statute No.	64 - 2nd Statute No.	64 - 3rd Statute No.	64 - 4th Statute No.	64 - 5th Statute No.	
	122 - Driver Factors NOT-APPLICABLE					
	88 - Driver or Pedestrian Cond NOT OBSERVED		89 - Substance Presence UNKNOWN			
	90 - Alcohol Test TEST NOT GIVEN		90 - Alcohol Content		91 - Drug Test TEST-NOT-GIVEN	
	91 - Drugs Reported					
124 - Highway Factors SNOW,-ICE,-OR-WET						

Vehicle

VEHICLE 02	21 - Unit Type AUTOMOBILE			Vehicle Type PASSENGER-CAR			22 - Total Occupants 1
	56 - License Plate Number		57 - Plate Type	58 - State	59 - Exp Year	55 - Vehicle Identification Number	
	50 - Year	51 - Make	52 - Model	53 - Body Style	54 - Color	100 - Skidmarks to Impact (Ft)	
	94 - Vehicle Damage UNKNOWN						
	95 - Extent Of Damage UNKNOWN		96 <input type="checkbox"/> Vehicle Towed Due To Damage		97 - Vehicle Removed By		
123 - Vehicle Factors NOT-APPLICABLE							

Vehicle Owner

VEH OWNER 02	45 <input type="checkbox"/> Vehicle Owner Same As Operator						
	46 - Vehicle Owner Last Name		46 - First Name		46 - Middle Initial	46 - Suffix	Date Of Birth
	46 - Company Name						
	47 - Address Street & Number				47 - PO Box		
	48 - City		48 - State	48 - Zip Code		49 - Telephone Number	

Insurance

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INS 02	63 - Liability Insurance Company UNKNOWN		60 <input type="checkbox"/> Policy Holder Same As Owner
	61 - Policy Holder Last Name	61 - Policy Holder First Name	
	61 - Policy Holder Company		

School Bus

BUS 02	Bus Travelling to/from <input type="radio"/> To <input type="radio"/> From	School Name	Body Make	Seating Capacity
	School District Contracted With			

Diagram and Narrative

DIAGRAM AND NARRATIVE	105 - PHOTOS BY 3212
<p>UNIT 1 WAS LEGALLY PARKED AT THE BOULEVARD BAR AND GRILL. SOMETIME BETWEEN 10:00 PM AND 3:00 AM, UNIT 1 WAS STRUCK BY UNIT 2 IN THE FRONT DRIVERS SIDE AND FRONT QUARTER PANEL. UNIT 2 LEFT THE SCENE WITHOUT MAKING CONTACT WITH ANYONE.</p>	

Officer Information

OFFICER INFORMATION	125 - Officer Last Name WARNER	125 - First Name STEPHANIE	125 - Middle Initial	131 - Officer ID 942	
	129 - Law Enforcement Agency No.	130 - Law Enforcement Agency Name POLK COUNTY SHERIFF			
	126 - Law Enforcement Agency Address Street & Number 1005 W MAIN ST SUITE 900				
	127 - City BALSAM LAKE	127 - State WI	127 - Zip Code 54810	128 - Telephone Number (715) 485-8300 EXT.	
	132 - Date Notified 01/01/2012	133 - Time Notified (Military Time) 0329	134 - Time Arrived (Military Time) 0329	135 - Date Of Report 01/04/2012	
	Agency Accident Number	Police Number 24-12	19 - Special Study		
	18 - Agency Space				