

PK2011

POLICE # 21-12

ACCIDENT #

<input checked="" type="checkbox"/> Reportable Accident		<input type="checkbox"/> On Emergency		<input type="checkbox"/> Amended		DOT Document Number LF58K41		Document Override Number	
Agency Accident Number				Police Number 21-12					
4 - Accident Date 01/05/2012		5 - Time of Accident (Military Time) 1307		6 - Total Units 01		7 - Total Injured 01		8 - Total Killed 00	
2 - County POLK - 48		3 - Municipality LINCOLN - 16, TOWN				11 - Accident Location NON-INTERSECTION			
14 - On Hwy No.	14 - On Street Name 110TH ST			14 - Bus/Frnt/Rmp		15 - Est. Dist 300	Ft/Mi F	15 - Hwy. Dir SOUTH	
16 - Fr/At Hwy No.	16 - From/At Street Name 110TH AVE				16 - Business/Frontage/Ramp				
17 - Structure Type		17 - Structure Number		12 - Latitude		13 - Longitude -			
80 - First Harmful Event DITCH				93 - Manner of Collision NO COLLISION WITH MOTOR VEHICLE IN TRANSPORT					
112 - Access Control NO CONTROL		113 - Road Curvature STRAIGHT		113 - Road Terrain LEVEL/FLAT		Surface Type BLACKTOP (BITUMINOUS) - 2			
115 - Traffic Way NOT-PHYSICALLY-DIVIDED-(2-WAY TRAFFIC)									
117 - Relation To Roadway ON-ROADWAY									
114 - Light Condition DAYLIGHT			116 - Road Surface Condition ICE			118 - Weather CLEAR			
9 <input type="checkbox"/> Hit and Run	9 <input checked="" type="checkbox"/> Government Property			9 <input type="checkbox"/> Fire	9 <input 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 type="checkbox"/> Supplemental Reports		102 <input type="checkbox"/> Witness Statements			103 <input type="checkbox"/> Measurements Taken			79 - E M S Number	

GENERAL INFORMATION

Operator/Pedestrian

Unit Status		81 - Most Harmful Event: Collision With DITCH		23 - Dir Of Travel NORTH		24 - Speed Limit 55	
36 - Operating as Classified D CLASS		37 - Endorsements		35 <input type="checkbox"/> Operating Commercial Motor Vehicle			
29 - Driver's License Number 3308462804			30 - State WI	31 - Expiration Year 2019	34 - On Duty Accident		
25 - Operator/Pedestrian Last Name RAIOLO			25 - First Name HEIDI		25 - Middle Initial JEAN	25 - Suffix	
32 - Date Of Birth 04-1984		33 - Sex FEMALE					
26 - Address Street & Number 514 BIRCHWOOD AVE						26 - PO Box	
27 - City AMERY			27 - State WI	27 - Zip Code 54001		28 - Telephone Number (715) 222-0286 EXT.	
39 - Seat Position FRONT-SEAT-LEFT-SIDE-(MC/BIKE DRIVER, TRAIN CONDUCTOR)				40 - Safety Equipment SHOULDER-BELT-AND-LAP-BELT-USED			
38 - Injury Severity C - POSSIBLE INJURY		41 - Airbag NON-DEPLOYED		42 - Ejected NOT-EJECTED		44 <input type="checkbox"/> Medical Transport	
43 - Trapped/Extricated NOT-TRAPPED		92 - Pedestrian Location		92 - Pedestrian Action			
119 - What Driver Was Doing GOING-STRAIGHT			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 APPEARED NORMAL		89 - Substance Presence NEITHER-ALCOHOL-NOR-DRUGS-PRESENT					
90 - Alcohol Test TEST NOT GIVEN			90 - Alcohol Content		91 - Drug Test TEST-NOT-GIVEN		

OPERATOR/PEDESTRIAN 01

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91 - Drugs Reported
124 - Highway Factors SNOW,ICE,-OR-WET

Vehicle

VEHICLE 01	21 - Unit Type AUTOMOBILE		Vehicle Type PASSENGER-CAR			22 - Total Occupants 1
	56 - License Plate Number 859TFY		57 - Plate Type AUT	58 - State WI	59 - Exp Year 2012	55 - Vehicle Identification Number 1G2WP12KXYF151659
	50 - Year 2000	51 - Make PONT	52 - Model GRAND PRIX	53 - Body Style 4D	54 - Color RED	100 - Skidmarks to Impact (Ft) 0
	94 - Vehicle Damage UNDERCARRIAGE					
	95 - Extent Of Damage VERY-MINOR		96 <input checked="" type="checkbox"/> Vehicle Towed Due To Damage		97 - Vehicle Removed By JERRY'S TOWING NEW RICHMOND	
	123 - Vehicle Factors NOT-APPLICABLE					

Vehicle Owner

VEH OWNER 01	45 <input checked="" type="checkbox"/> Vehicle Owner Same As Operator					
	46 - Vehicle Owner Last Name RAIOLO		46 - First Name HEIDI		46 - Middle Initial JEAN	46 - Suffix
	Date Of Birth 04/1984					
	46 - Company Name					
	47 - Address Street & Number 514 BIRCHWOOD AVE			47 - PO Box		
48 - City AMERY		48 - State WI	48 - Zip Code 54001		49 - Telephone Number (715) 222-0286 EXT.	

Insurance

INS 01	63 - Liability Insurance Company PROGRESSIVE-ADVANCED-INSURANCE-CO				60 <input checked="" type="checkbox"/> Policy Holder Same As Owner	
	61 - Policy Holder Last Name RAIOLO			61 - Policy Holder First Name HEIDI		
	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			

Property

Organization Type GOVERNMENT	84 - Property Owner Last Name	84 - First Name	84 - Middle Initial	84 - Suffix
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PROPERTY OWNER 01	84 - Company Name LINCOLN TOWNSHIP		Government Property Type COUNTY/MUNICIPAL		
	85 - Address Street & Number 661 85TH ST		85 - PO Box		
	86 - City AMERY	86 - State WI	86 - Zip Code 54001	87 - Telephone Number	
	83 - Government Damage Tag Number				
	Fixed Objects Struck				
82 - Striking Unit 1	82 - Object Struck DITCH	82 - Striking Unit	82 - Object Struck		
82 - Striking Unit	82 - Object Struck	82 - Striking Unit	82 - Object Struck		
82 - Striking Unit	82 - Object Struck	82 - Striking Unit	82 - Object Struck		

Diagram and Narrative

DIAGRAM AND NARRATIVE	105 - PHOTOS BY
	<p>RESPONDED TO A 1 VEH CRASH W/ UNKNOWN INJURIES. EMS ARRIVED PRIOR TO MY ARRIVAL. OBSERVED UNIT 1 IN WEST DITCH W/POSSIBLE UNDERCARRIAGE DAMAGE DUE TO DEEP SNOW IN DITCH. DRIVER WAS SEEN BY EMS ABOARD AN AMBULANCE, BUT NOT TRANSPORTED. DRIVER STATED SHE SLIPPED ON ICE AND ENTERED DITCH. VEH WAS TRAVELLING NB.</p>

Officer Information

OFFICER INFORMATION	125 - Officer Last Name STONE	125 - First Name DELL	125 - Middle Initial	131 - Officer ID 933
	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 01/05/2012	133 - Time Notified (Military Time) 1307	134 - Time Arrived (Military Time) 1317	135 - Date Of Report 01/11/2012
	Agency Accident Number	Police Number 21-12	19 - Special Study	
	18 - Agency Space ID'D BY VALID WI DL.			