

PK2011

POLICE # 88-12

ACCIDENT #

GENERAL INFORMATION

OPERATOR/PEDESTRIAN 01

<input checked="" type="checkbox"/> Reportable Accident	<input type="checkbox"/> On Emergency	<input type="checkbox"/> Amended	DOT Document Number <b>LF5LX6Z</b>	Document Override Number
Agency Accident Number		Police Number <b>88-12</b>		
4 - Accident Date <b>01/11/2012</b>	5 - Time of Accident (Military Time) <b>1639</b>	6 - Total Units <b>01</b>	7 - Total Injured <b>00</b>	8 - Total Killed <b>00</b>
2 - County <b>POLK - 48</b>	3 - Municipality <b>OSCEOLA - 21, TOWN</b>		11 - Accident Location <b>NON-INTERSECTION</b>	
14 - On Hwy No.	14 - On Street Name <b>90TH AVE</b>	14 - Bus/Frnt/Rmp	15 - Est. Dist <b>0.50</b>	Ft/Mi <b>M</b>
			15 - Hwy. Dir <b>EAST</b>	
16 - Fr/At Hwy No.	16 - From/At Street Name <b>EAST AVE</b>		16 - Business/Frontage/Ramp	
17 - Structure Type	17 - Structure Number	12 - Latitude		13 - Longitude -
80 - First Harmful Event <b>TREE</b>		93 - Manner of Collision <b>NO COLLISION WITH MOTOR VEHICLE IN TRANSPORT</b>		
112 - Access Control <b>NO CONTROL</b>	113 - Road Curvature <b>CURVE</b>	113 - Road Terrain <b>HILL</b>	Surface Type <b>BLACKTOP (BITUMINOUS) - 2</b>	
115 - Traffic Way <b>NOT-PHYSICALLY-DIVIDED-(2-WAY TRAFFIC)</b>				
117 - Relation To Roadway <b>SHOULDER-(OTHER THAN SHOULDER WITHIN MEDIAN OR GORE)</b>				
114 - Light Condition <b>DARK-NOT-LIGHTED</b>		116 - Road Surface Condition <b>ICE</b>		118 - Weather <b>SLEET-HAIL-(FREEZING RAIN OR DRIZZLE)</b>
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

Operator/Pedestrian

Unit Status	81 - Most Harmful Event: Collision With <b>TREE</b>	23 - Dir Of Travel <b>EAST</b>	24 - Speed Limit <b>45</b>
36 - Operating as Classified <b>D CLASS</b>	37 - Endorsements	35 <input type="checkbox"/> Operating Commercial Motor Vehicle	
29 - Driver's License Number <b>6369414902</b>	30 - State <b>WI</b>	31 - Expiration Year <b>2013</b>	34 - On Duty Accident
25 - Operator/Pedestrian Last Name <b>TJARDES</b>		25 - First Name <b>NICHOLAS</b>	25 - Middle Initial <b>RICHARD</b>
	25 - Suffix		
32 - Date Of Birth <b>04/1994</b>	33 - Sex <b>MALE</b>		
26 - Address Street & Number <b>508 239TH AVE</b>			26 - PO Box
27 - City <b>SOMERSET</b>	27 - State <b>WI</b>	27 - Zip Code <b>54025</b>	28 - Telephone Number <b>(651) 895-7601 EXT.</b>
39 - Seat Position <b>FRONT-SEAT-LEFT-SIDE-(MC/BIKE DRIVER, TRAIN CONDUCTOR)</b>		40 - Safety Equipment <b>SHOULDER-BELT-AND-LAP-BELT-USED</b>	
38 - Injury Severity <b>N - NO APPARENT INJURY</b>	41 - Airbag <b>NON-DEPLOYED</b>	42 - Ejected <b>NOT-EJECTED</b>	44 <input type="checkbox"/> Medical Transport
43 - Trapped/Extricated <b>NOT-TRAPPED</b>	92 - Pedestrian Location	92 - Pedestrian Action	
119 - What Driver Was Doing <b>NEGOTIATING-CURVE</b>		120 - Traffic Control <b>NO-CONTROL</b>	62 - No. of Citations Issued <b>0</b>
64 - 1st Statute No.	64 - 2nd Statute No.	64 - 3rd Statute No.	64 - 4th Statute No.
	64 - 5th Statute No.		
122 - Driver Factors <b>SPEED-TOO-FAST-FOR-CONDITIONS</b>			
88 - Driver or Pedestrian Cond <b>APPEARED NORMAL</b>	89 - Substance Presence <b>NEITHER-ALCOHOL-NOR-DRUGS-PRESENT</b>		
90 - Alcohol Test <b>TEST NOT GIVEN</b>	90 - Alcohol Content		91 - Drug Test <b>TEST-NOT-GIVEN</b>

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

**Vehicle**

<b>VEHICLE 01</b>	21 - Unit Type <b>AUTOMOBILE</b>		Vehicle Type <b>PASSENGER-CAR</b>			22 - Total Occupants <b>2</b>
	56 - License Plate Number <b>787SCK</b>		57 - Plate Type <b>AUT</b>	58 - State <b>WI</b>	59 - Exp Year <b>2012</b>	55 - Vehicle Identification Number <b>1HGCG1654YA036833</b>
	50 - Year <b>2000</b>	51 - Make <b>HOND</b>	52 - Model <b>ACCORD</b>	53 - Body Style <b>4D</b>	54 - Color <b>SIL</b>	100 - Skidmarks to Impact (Ft)
	94 - Vehicle Damage <b>FRONT, FRONT PASSENGER SIDE, MIDDLE PASSENGER SIDE, REAR PASSENGER SIDE, REAR, TOP OF VEHICLE</b>					
	95 - Extent Of Damage <b>MODERATE</b>		96 <input checked="" type="checkbox"/> <b>Vehicle Towed Due To Damage</b>		97 - Vehicle Removed By <b>EAST AVE</b>	
	123 - Vehicle Factors <b>NOT-APPLICABLE</b>					

**Vehicle Owner**

<b>VEH OWNER 01</b>	45 <input checked="" type="checkbox"/> <b>Vehicle Owner Same As Operator</b>					
	46 - Vehicle Owner Last Name <b>TJARDES</b>		46 - First Name <b>NICHOLAS</b>		46 - Middle Initial <b>RICHARD</b>	46 - Suffix
	46 - Company Name					
	47 - Address Street & Number <b>508 239TH AVE</b>				47 - PO Box	
	48 - City <b>SOMERSET</b>		48 - State <b>WI</b>	48 - Zip Code <b>54025</b>		49 - Telephone Number <b>(651) 895-7601 EXT.</b>

**Insurance**

<b>INS 01</b>	63 - Liability Insurance Company <b>AMERICAN-FAMILY</b>				60 <input checked="" type="checkbox"/> <b>Policy Holder Same As Owner</b>	
	61 - Policy Holder Last Name <b>TJARDES</b>			61 - Policy Holder First Name <b>NICHOLAS</b>		
	61 - Policy Holder Company					

**School Bus**

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

**Occupant**

<b>01</b>	<input type="checkbox"/> <b>Address Same As Operator</b>				
	65 - Unit No <b>01</b>	66 - Occupant Last Name <b>KORHONEN</b>		66 - First Name <b>TYLER</b>	66 - Middle Initial <b>G</b>
	68 - Address Street & Number <b>905 218TH ST CTY RD MM</b>			68 - PO Box	

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<b>OCCUPANT</b>	68 - City <b>OSCEOLA</b>	68 - State <b>WI</b>	68 - Zip Code <b>54020</b>	
	67 - Date of Birth <b>08</b> [REDACTED] <b>1993</b>	69 - Sex <b>MALE</b>		
	71 - Seat Position <b>FRONT-SEAT-RIGHT-SIDE-(TRAIN ENGINEER)</b>		72 - Safety Equipment <b>SHOULDER-BELT-AND-LAP-BELT-USED</b>	
	70 - Injury Severity <b>N - NO APPARENT INJURY</b>	73 - Airbag <b>DEPLOYED</b>	75 - Ejected <b>NOT-EJECTED</b>	77 <input type="checkbox"/> <b>Medical Transport</b>
	76 - Trapped/Extricated <b>NOT-TRAPPED</b>	78 - Agency Space		

**Property**

<b>PROPERTY OWNER 01</b>	Organization Type <b>GOVERNMENT</b>	84 - Property Owner Last Name	84 - First Name	84 - Middle Initial	84 - Suffix	
	84 - Company Name <b>OSCEOLA TOWNSHIP</b>			Government Property Type <b>COUNTY/MUNICIPAL</b>		
	85 - Address Street & Number <b>516 EAST AVE N</b>		85 - PO Box			
	86 - City <b>DRESSER</b>	86 - State <b>WI</b>	86 - Zip Code <b>54009</b>	87 - Telephone Number		
	83 - Government Damage Tag Number					

**Fixed Objects Struck**

<b>PROPERTY OWNER 01</b>	82 - Striking Unit <b>1</b>	82 - Object Struck <b>TREE</b>	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**

<b>DIAGRAM AND NARRATIVE</b>	105 - PHOTOS BY
	<p>UNIT 1 WAS TRAVELING EASTBOUND ON 90TH AVE. UNIT 1 LOST CONTROL ON THE ICY ROAD AND ENTERED THE SOUTH DITCH. UNIT WENT DOWN AN EMBANKMENT AND THE RIGHT AND REAR OF UNIT 1 STRUCK TRESS. THE FRONT OF UNIT 1 WAS DAMAGED WHEN IT ENTERED THE DITCH.</p>

**Officer Information**

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<b>OFFICER INFORMATION</b>	125 - Officer Last Name <b>BURROWS</b>		125 - First Name <b>DON</b>	125 - Middle Initial	131 - Officer ID <b>919</b>	
	129 - Law Enforcement Agency No.		130 - Law Enforcement Agency Name <b>POLK COUNTY SHERIFF</b>			
	126 - Law Enforcement Agency Address Street & Number <b>1005 W MAIN ST SUITE 900</b>					
	127 - City <b>BALSAM LAKE</b>		127 - State <b>WI</b>	127 - Zip Code <b>54810</b>	128 - Telephone Number <b>(715) 485-8300 EXT.</b>	
	132 - Date Notified <b>01/11/2012</b>	133 - Time Notified (Military Time) <b>1744</b>	134 - Time Arrived (Military Time) <b>1755</b>		135 - Date Of Report <b>01/11/2012</b>	
	Agency Accident Number	Police Number <b>88-12</b>	19 - Special Study			
	18 - Agency Space					