

PK2011

POLICE # 96-12

ACCIDENT #

GENERAL INFORMATION

<input checked="" type="checkbox"/> Reportable Accident	<input type="checkbox"/> On Emergency	<input type="checkbox"/> Amended	DOT Document Number LF5KFSH	Document Override Number
Agency Accident Number		Police Number 96-12		
4 - Accident Date 01/12/2012	5 - Time of Accident (Military Time) 1630	6 - Total Units 02	7 - Total Injured	8 - Total Killed 00
2 - County POLK - 48	3 - Municipality LUCK - 18, TOWN		11 - Accident Location INTERSECTION	
14 - On Hwy No. 035	14 - On Street Name		14 - Bus/Frnt/Rmp	15 - Est. Dist 10
16 - Fr/At Hwy No.		16 - From/At Street Name COUNTY RD N		16 - Business/Frontage/Ramp
17 - Structure Type	17 - Structure Number	12 - Latitude	13 - Longitude	
80 - First Harmful Event MOTOR VEHICLE IN TRANSPORT		93 - Manner of Collision REAR-END		
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 DRY		118 - Weather CLEAR
9 <input 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 checked="" 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

OPERATOR/PEDESTRIAN 01

Unit Status		81 - Most Harmful Event: Collision With MOTOR VEHICLE IN TRANSPORT	23 - Dir Of Travel NORTH	24 - Speed Limit 45
36 - Operating as Classified D CLASS		37 - Endorsements	35 <input type="checkbox"/> Operating Commercial Motor Vehicle	
29 - Driver's License Number 8017164208		30 - State WI	31 - Expiration Year 2014	34 - On Duty Accident
25 - Operator/Pedestrian Last Name MASCARENAS		25 - First Name TERRY		25 - Middle Initial A
32 - Date Of Birth 04/1971		33 - Sex FEMALE		
26 - Address Street & Number 2412 145TH ST			26 - PO Box	
27 - City LUCK		27 - State WI	27 - Zip Code 548534140	28 - Telephone Number (714) 554-4013 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 N - NO APPARENT 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 MAKING-LEFT-TURN		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

PK2011

91 - Drugs Reported
124 - Highway Factors NOT-APPLICABLE

Vehicle

VEHICLE 01	21 - Unit Type AUTOMOBILE		Vehicle Type PASSENGER-CAR			22 - Total Occupants 1
	56 - License Plate Number 840CVY		57 - Plate Type AUT	58 - State WI	59 - Exp Year 2013	55 - Vehicle Identification Number 1G1JC124127444847
	50 - Year 2002	51 - Make CHEV	52 - Model CAVALIER	53 - Body Style 2D	54 - Color SIL	100 - Skidmarks to Impact (Ft)
	94 - Vehicle Damage REAR DRIVER SIDE, FRONT DRIVER SIDE					
	95 - Extent Of Damage MINOR		96 <input type="checkbox"/> Vehicle Towed Due To Damage		97 - Vehicle Removed By OWNER	
	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 MASCARENAS		46 - First Name TERRY		46 - Middle Initial A	46 - Suffix
	46 - Company Name					
	47 - Address Street & Number 2412 145TH ST				47 - PO Box	
	48 - City LUCK		48 - State WI	48 - Zip Code 548534140		49 - Telephone Number (714) 554-4013 EXT.
	Date Of Birth 04/1971					

Insurance

INS 01	63 - Liability Insurance Company ACUITY, A MUTUAL INSURANCE CO				60 <input checked="" type="checkbox"/> Policy Holder Same As Owner	
	61 - Policy Holder Last Name MASCARENAS			61 - Policy Holder First Name TERRY		
	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		81 - Most Harmful Event: Collision With MOTOR VEHICLE IN TRANSPORT		23 - Dir Of Travel NORTH	24 - Speed Limit 45
36 - Operating as Classified D CLASS		37 - Endorsements		35 <input type="checkbox"/> Operating Commercial Motor Vehicle	
29 - Driver's License Number 7908076000		30 - State WI	31 - Expiration Year 2019	34 - On Duty Accident	
25 - Operator/Pedestrian Last Name WIGGINS		25 - First Name STEPHANIE		25 - Middle Initial J	25 - Suffix
32 - Date Of Birth 07/1980		33 - Sex FEMALE			

PK2011

OPERATOR/PEDESTRIAN 02	26 - Address Street & Number 415 7TH ST				26 - PO Box	
	27 - City LUCK		27 - State WI	27 - Zip Code 54853	28 - Telephone Number (715) 472-8942 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 N - NO APPARENT 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 2	
	64 - 1st Statute No. 346.63(1)(A)	64 - 2nd Statute No. 346.63(1)(B)	64 - 3rd Statute No.	64 - 4th Statute No.	64 - 5th Statute No.	
	122 - Driver Factors INATTENTIVE-DRIVING, DRIVER-CONDITION					
	88 - Driver or Pedestrian Cond ABILITY IMPAIRED		89 - Substance Presence ALCOHOL-PRESENT			
	90 - Alcohol Test TEST GIVEN		90 - Alcohol Content .17	91 - Drug Test TEST-NOT-GIVEN		
91 - Drugs Reported						
124 - Highway Factors NOT-APPLICABLE						

Vehicle

VEHICLE 02	21 - Unit Type TRUCK		Vehicle Type PICKUP/UTILITY-TRUCK			22 - Total Occupants 1
	56 - License Plate Number DY2629		57 - Plate Type LTK	58 - State WI	59 - Exp Year 2012	55 - Vehicle Identification Number 1FTRX18LX2NA18356
	50 - Year 2002	51 - Make FORD	52 - Model F150	53 - Body Style PK	54 - Color BLK	100 - Skidmarks to Impact (Ft)
	94 - Vehicle Damage FRONT PASSENGER SIDE					
	95 - Extent Of Damage VERY-MINOR		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 checked="" type="checkbox"/> Vehicle Owner Same As Operator					
	46 - Vehicle Owner Last Name WIGGINS		46 - First Name STEPHANIE		46 - Middle Initial J	46 - Suffix
	46 - Company Name					
	47 - Address Street & Number 415 7TH ST				47 - PO Box	
	48 - City LUCK		48 - State WI	48 - Zip Code 54853	49 - Telephone Number (715) 472-8942 EXT.	

Insurance

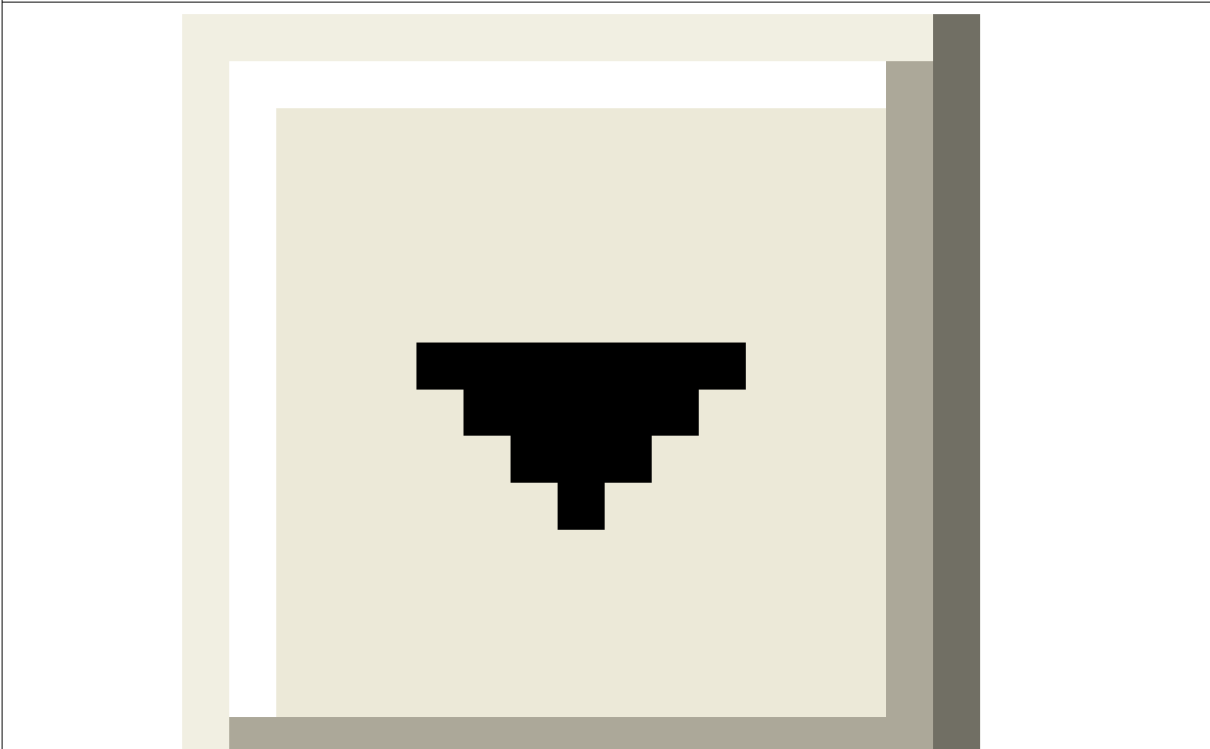
PK2011

INS 02	63 - Liability Insurance Company PROGRESSIVE-ADVANCED-INSURANCE-CO		60 <input checked="" type="checkbox"/> Policy Holder Same As Owner
	61 - Policy Holder Last Name WIGGINS	61 - Policy Holder First Name STEPHANIE	
	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 KRAUTKRAMER
	
<p>I OBSERVED TWO VEHICLES NORTH BOUND ON HWY 35. UNIT ONE SLOWED TO MAKE A TURN ONTO CT RD N. WHEN IT STARTED TO MAKE THE TURN IT WAS STRUCK FROM BEHIND BY UNIT TWO. DRIVER OF UNIT TWO STATED THAT SHE DIDN'T REALIZE UNIT ONE WAS TURNING.</p>	

Officer Information

OFFICER INFORMATION	125 - Officer Last Name KRAUTKRAMER	125 - First Name CORY	125 - Middle Initial	131 - Officer ID 924	
	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 01/12/2012	133 - Time Notified (Military Time) 1630	134 - Time Arrived (Military Time) 1630	135 - Date Of Report 01/12/2012	
	Agency Accident Number	Police Number 96-12	19 - Special Study		
	18 - Agency Space				

Truck and Bus

136 <input type="checkbox"/> A truck or truck combination > 10,000 lbs GVWR/GCWR	136 <input type="checkbox"/> Any vehicle displaying a hazardous materials placard
--	--

PK2011

TRUCK/BUS

136 <input type="checkbox"/> A vehicle designed to carry 9 or more people, including the driver						
136 <input type="checkbox"/> Fatal Injury		136 <input type="checkbox"/> Medical Transport		136 One or more vehicles towed from the scene due to disabling damage <input type="checkbox"/>		
Unit Number						
137 - Hazardous Materials Class Numbers						
137 - Hazardous Materials "UN" Nos.			Hazardous Material Placard Displayed <input type="checkbox"/>		Hazardous Cargo Was Released <input type="checkbox"/>	
137 - Name Of Hazardous Materials in this Load				137 - Name Of Hazardous Materials Released		
138 Interstate Carrier <input type="checkbox"/>		140 - US DOT No.	140 - ICC MC No.	LC No.	IC No.	141 - Source
139 - Carrier Name						
142 - Carrier Address				City		State
						Zip Code
143 - GVWR (Lbs)		144 - Total No. of Axles		145 - Vehicle Configuration		147 - Cargo Body Type
146 - First Event				146 - Second Event		
146 - Third Event				146 - Fourth Event		