

PK2011

POLICE # 148-12

ACCIDENT #

<input checked="" type="checkbox"/> Reportable Accident		<input type="checkbox"/> On Emergency		<input type="checkbox"/> Amended		DOT Document Number LF5PW6C		Document Override Number	
Agency Accident Number				Police Number 148-12					
4 - Accident Date 01/20/2012		5 - Time of Accident (Military Time) 0730		6 - Total Units 02		7 - Total Injured 00		8 - Total Killed 00	
2 - County POLK - 48		3 - Municipality GEORGETOWN - 13, TOWN				11 - Accident Location NON-INTERSECTION			
14 - On Hwy No.	14 - On Street Name COUNTY RD G			14 - Bus/Frnt/Rmp		15 - Est. Dist 0.50	Ft/Mi M	15 - Hwy. Dir EAST	
16 - Fr/At Hwy No.	16 - From/At Street Name 120TH ST			16 - Business/Frontage/Ramp					
17 - Structure Type		17 - Structure Number		12 - Latitude		13 - Longitude -			
80 - First Harmful Event OTHER OBJECT-- NOT FIXED				93 - Manner of Collision NO COLLISION WITH MOTOR VEHICLE IN TRANSPORT					
112 - Access Control NO CONTROL		113 - Road Curvature STRAIGHT		113 - Road Terrain HILL		Surface Type BLACKTOP (BITUMINOUS) - 2			
115 - Traffic Way NOT-PHYSICALLY-DIVIDED-(2-WAY TRAFFIC)									
117 - Relation To Roadway ON-ROADWAY									
114 - Light Condition DAWN			116 - Road Surface Condition DRY			118 - Weather CLOUDY			
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 checked="" 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 OTHER NON-COLLISION		23 - Dir Of Travel WEST		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 7305134606		30 - State WI	31 - Expiration Year 2012	34 - On Duty Accident			
25 - Operator/Pedestrian Last Name FREER			25 - First Name RANDY		25 - Middle Initial J	25 - Suffix	
32 - Date Of Birth 09/1951		33 - Sex MALE					
26 - Address Street & Number 1144 200TH AVE						26 - PO Box	
27 - City BALSAM LAKE		27 - State WI	27 - Zip Code 54810		28 - Telephone Number (715) 825-2353 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	

OPERATOR/PEDESTRIAN 01

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91 - Drugs Reported
124 - Highway Factors <b>NOT-APPLICABLE</b>

**Vehicle**

<b>VEHICLE 01</b>	21 - Unit Type <b>TRUCK</b>	Vehicle Type <b>PICKUP/UTILITY-TRUCK</b>				22 - Total Occupants <b>1</b>
	56 - License Plate Number <b>205429F</b>	57 - Plate Type <b>FRM</b>	58 - State <b>WI</b>	59 - Exp Year <b>2014</b>	55 - Vehicle Identification Number <b>2GCEK19V7Y1173695</b>	
	50 - Year <b>2000</b>	51 - Make <b>CHEV</b>	52 - Model <b>SILVERADO</b>	53 - Body Style <b>TK</b>	54 - Color <b>GRY</b>	100 - Skidmarks to Impact (Ft)
	94 - Vehicle Damage <b>NONE</b>					
	95 - Extent Of Damage <b>NONE</b>	96 <input type="checkbox"/> <b>Vehicle Towed Due To Damage</b>	97 - Vehicle Removed By <b>OPERATOR</b>			
	123 - Vehicle Factors <b>OTHER</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>FREER</b>	46 - First Name <b>RANDY</b>	46 - Middle Initial <b>J</b>	46 - Suffix	Date Of Birth <b>09/1951</b>
	46 - Company Name				
	47 - Address Street & Number <b>1144 200TH AVE</b>			47 - PO Box	
	48 - City <b>BALSAM LAKE</b>	48 - State <b>WI</b>	48 - Zip Code <b>54810</b>	49 - Telephone Number <b>(715) 825-2353 EXT.</b>	

**Insurance**

<b>INS 01</b>	63 - Liability Insurance Company <b>RURAL-MUTUAL-INS-CO-(ATTN:-CLAIMS-DEPT)</b>	60 <input checked="" type="checkbox"/> <b>Policy Holder Same As Owner</b>
	61 - Policy Holder Last Name <b>FREER</b>	61 - Policy Holder First Name <b>RANDY</b>
	61 - Policy Holder Company	

**School Bus**

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

**Operator/Pedestrian**

Unit Status	81 - Most Harmful Event: Collision With <b>OTHER OBJECT-- NOT FIXED</b>	23 - Dir Of Travel <b>EAST</b>	24 - Speed Limit <b>55</b>
36 - Operating as Classified <b>D CLASS</b>	37 - Endorsements	35 <input type="checkbox"/> <b>Operating Commercial Motor Vehicle</b>	
29 - Driver's License Number <b>1736772705</b>	30 - State <b>WI</b>	31 - Expiration Year <b>2015</b>	34 - On Duty Accident
25 - Operator/Pedestrian Last Name <b>LANSER MOIOFFER</b>	25 - First Name <b>DEBRA</b>	25 - Middle Initial <b>M</b>	25 - Suffix
32 - Date Of Birth <b>06/1967</b>	33 - Sex <b>FEMALE</b>		

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<b>OPERATOR/PEDESTRIAN 02</b>	26 - Address Street & Number <b>1857 120TH ST</b>				26 - PO Box	
	27 - City <b>BALSAM LAKE</b>		27 - State <b>WI</b>	27 - Zip Code <b>54810</b>	28 - Telephone Number <b>(715) 825-3208 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"/> <b>Medical Transport</b>
	43 - Trapped/Extricated <b>NOT-TRAPPED</b>		92 - Pedestrian Location	92 - Pedestrian Action		
	119 - What Driver Was Doing <b>GOING-STRAIGHT</b>		120 - Traffic Control <b>NO-CONTROL</b>		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 <b>NOT-APPLICABLE</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>	
	91 - Drugs Reported					
	124 - Highway Factors <b>OTHER-DEBRIS</b>					

**Vehicle**

<b>VEHICLE 02</b>	21 - Unit Type <b>AUTOMOBILE</b>			Vehicle Type <b>PASSENGER-CAR</b>		22 - Total Occupants <b>3</b>
	56 - License Plate Number <b>824RYH</b>		57 - Plate Type <b>AUT</b>	58 - State <b>WI</b>	59 - Exp Year <b>2012</b>	55 - Vehicle Identification Number <b>3VWTL8AJ3AM641102</b>
	50 - Year <b>2010</b>	51 - Make <b>VOLK</b>	52 - Model <b>JETTA</b>	53 - Body Style <b>SW</b>	54 - Color <b>GRY</b>	100 - Skidmarks to Impact (Ft)
	94 - Vehicle Damage <b>FRONT, UNDERCARRIAGE</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>LAKES</b>	
	123 - Vehicle Factors <b>NOT-APPLICABLE</b>					

**Vehicle Owner**

<b>VEH OWNER 02</b>	45 <input type="checkbox"/> <b>Vehicle Owner Same As Operator</b>					
	46 - Vehicle Owner Last Name <b>MOIOFFER</b>		46 - First Name <b>MARK</b>		46 - Middle Initial <b>T</b>	46 - Suffix
	46 - Company Name					
	47 - Address Street & Number <b>1857 120TH ST</b>				47 - PO Box	
	48 - City <b>BALSAM LAKE</b>		48 - State <b>WI</b>	48 - Zip Code <b>54810</b>	49 - Telephone Number <b>(715) 825-3208 EXT.</b>	

**Insurance**

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<b>INS 02</b>	63 - Liability Insurance Company <b>PHARMACISTS-MUTUAL-INS-CO</b>		60 <input checked="" type="checkbox"/> <b>Policy Holder Same As Owner</b>	
	61 - Policy Holder Last Name <b>MOIOFFER</b>		61 - Policy Holder First Name <b>MARK</b>	
	61 - Policy Holder Company			

**School Bus**

<b>BUS 02</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>OCCUPANT 01</b>	<input checked="" type="checkbox"/> <b>Address Same As Operator</b>				
	65 - Unit No <b>02</b>	66 - Occupant Last Name <b>MOIOFFER</b>	66 - First Name <b>MARTIN</b>	66 - Middle Initial <b>ARIE</b>	66 - Suffix
	68 - Address Street & Number <b>1857 120TH ST</b>		68 - PO Box		
	68 - City <b>BALSAM LAKE</b>		68 - State <b>WI</b>	68 - Zip Code <b>54810</b>	
	67 - Date of Birth <b>12/2000</b>		69 - Sex <b>MALE</b>		
	71 - Seat Position <b>SECOND-SEAT-RIGHT</b>		72 - Safety Equipment <b>SHOULDER-BELT-AND-LAP-BELT-USED</b>		
	70 - Injury Severity <b>N - NO APPARENT INJURY</b>	73 - Airbag <b>NOT APPLICABLE</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			

**Occupant**

<b>OCCUPANT 02</b>	<input checked="" type="checkbox"/> <b>Address Same As Operator</b>				
	65 - Unit No <b>02</b>	66 - Occupant Last Name <b>MOIOFFER</b>	66 - First Name <b>CALVIN</b>	66 - Middle Initial <b>DEAN</b>	66 - Suffix
	68 - Address Street & Number <b>1857 120TH ST</b>		68 - PO Box		
	68 - City <b>BALSAM LAKE</b>		68 - State <b>WI</b>	68 - Zip Code <b>54810</b>	
	67 - Date of Birth <b>07/1903</b>		69 - Sex <b>MALE</b>		
	71 - Seat Position <b>SECOND-SEAT-LEFT-SIDE-(MC/BIKE PASSENGER, TRAIN BREAKMA</b>		72 - Safety Equipment <b>SHOULDER-BELT-AND-LAP-BELT-USED</b>		
	70 - Injury Severity <b>N - NO APPARENT INJURY</b>	73 - Airbag <b>NON-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**

Organization Type <b>INDIVIDUAL</b>	84 - Property Owner Last Name <b>FREER</b>	84 - First Name <b>RANDY</b>	84 - Middle Initial <b>JOHN</b>	84 - Suffix
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<b>PROPERTY OWNER 01</b>	84 - Company Name		Government Property Type	
	85 - Address Street & Number <b>1144 200TH AVE</b>		85 - PO Box	
	86 - City <b>BALSAM LAKE</b>	86 - State <b>WI</b>	86 - Zip Code <b>54810</b>	87 - Telephone Number <b>(715) 825-2353 EXT.</b>
	83 - Government Damage Tag Number			
	<b>Fixed Objects Struck</b>			
82 - Striking Unit <b>2</b>	82 - Object Struck <b>OTHER-OBJECT-NOT-FIXED</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 <b>915 HALL</b>
	<p>UNIT#1 WAS PULLING OUT OF HIS DRIVEWAY AT 1144 200TH AVE / CTR G. AS UNIT#1 MADE A LEFT TURN TO GO WEST ON 200TH AVE, THE TAIL GATE ON THE TRUCK FELL. WHEN THE TAILGATE FELL OPEN, A MINERAL BLOCK FELL OUT OF THE VEHICLE AND LANDED IN THE EAST BOUND TRAVEL LANE. SHORTLY AFTER THE MINERAL BLOCK FELL OUT OF UNIT#1, UNIT#2 WAS TRAVELLING EAST BOUND ON 200TH AVE, TOWARDS THE MINERAL BLOCK. UNIT#2 STRUCK THE MINERAL BLOCK BEFORE THE DRIVER OF UNIT#1 COULD TURN AROUND AND REMOVE IT FROM THE ROAD WAY. UNIT#2 SUSTAINED FRONT END DAMAGE AS WELL AS UNDER CARRIAGE DAMAGE.</p>

**Officer Information**

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<b>OFFICER INFORMATION</b>	125 - Officer Last Name <b>HALL</b>		125 - First Name <b>DALE</b>	125 - Middle Initial	131 - Officer ID <b>915</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>01/20/2012</b>	133 - Time Notified (Military Time) <b>0816</b>	134 - Time Arrived (Military Time) <b>0826</b>		135 - Date Of Report <b>01/20/2012</b>	
	Agency Accident Number	Police Number <b>148-12</b>	19 - Special Study			
	18 - Agency Space					