

POLICE # 158-12

ACCIDENT #

GENERAL INFORMATION

<input checked="" type="checkbox"/> Reportable Accident		<input type="checkbox"/> On Emergency		<input type="checkbox"/> Amended		DOT Document Number LF7VBGH		Document Override Number		
Agency Accident Number				Police Number 158-12						
4 - Accident Date 01/20/2012		5 - Time of Accident (Military Time) 2121		6 - Total Units 01		7 - Total Injured 01		8 - Total Killed		
2 - County 48		3 - Municipality 4823				11 - Accident Location 1				
14 - On Hwy No.		14 - On Street Name 285TH AVE			14 - Bus/Frnt/Rmp		15 - Est. Dist		Ft/Mi	15 - Hwy. Dir
16 - Fr/At Hwy No.		16 - From/At Street Name 290TH ST				16 - Business/Frontage/Ramp				
17 - Structure Type		17 - Structure Number		12 - Latitude			13 - Longitude			
80 - First Harmful Event 15				93 - Manner of Collision 01						
112 - Access Control 01		113 - Road Curvature 02		113 - Road Terrain 03		Surface Type 5				
115 - Traffic Way 01										
117 - Relation To Roadway 05										
114 - Light Condition 02			116 - Road Surface Condition 03			118 - Weather 01				
9 <input type="checkbox"/> Hit and Run		9 <input checked="" 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 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 15		23 - Dir Of Travel W		24 - Speed Limit 55	
36 - Operating as Classified D		37 - Endorsements			35 <input type="checkbox"/> Operating Commercial Motor Vehicle		
29 - Driver's License Number 8108413807			30 - State WI	31 - Expiration Year 2018	34 - On Duty Accident		
25 - Operator/Pedestrian Last Name NELSON				25 - First Name TRAVIS		25 - Middle Initial JAMES	25 - Suffix
32 - Date Of Birth 04/1984		33 - Sex M					
26 - Address Street & Number 2265 190TH ST						26 - PO Box	
27 - City CENTURIA			27 - State WI	27 - Zip Code 54824		28 - Telephone Number (715) 553-2737 EXT.	
39 - Seat Position 01				40 - Safety Equipment 01			
38 - Injury Severity N		41 - Airbag 02		42 - Ejected 02		44 <input type="checkbox"/> Medical Transport	
43 - Trapped/Extricated 02		92 - Pedestrian Location		92 - Pedestrian Action			
119 - What Driver Was Doing 17			120 - Traffic Control 06			62 - No. of Citations Issued 2	
64 - 1st Statute No. 346.63(1)(A)		64 - 2nd Statute No. 346.57(2)		64 - 3rd Statute No.		64 - 4th Statute No.	64 - 5th Statute No.
122 - Driver Factors 02,04,11,12							
88 - Driver or Pedestrian Cond 02		89 - Substance Presence 06					
90 - Alcohol Test 12			90 - Alcohol Content			91 - Drug Test 14	

OPERATOR/PEDESTRIAN 01

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91 - Drugs Reported
124 - Highway Factors 01

Vehicle

VEHICLE 01	21 - Unit Type 2	Vehicle Type 03				22 - Total Occupants 2
	56 - License Plate Number HW3141	57 - Plate Type LTK	58 - State WI	59 - Exp Year 2012	55 - Vehicle Identification Number 1GCEK19T5YE102637	
	50 - Year 2000	51 - Make CHEV	52 - Model SILVARADO	53 - Body Style TK	54 - Color SIL	100 - Skidmarks to Impact (Ft)
	94 - Vehicle Damage 01,07,08,10					
	95 - Extent Of Damage 3	96 <input checked="" type="checkbox"/> Vehicle Towed Due To Damage		97 - Vehicle Removed By L C AUTOWORKS		
	123 - Vehicle Factors 77					

Vehicle Owner

VEH OWNER 01	45 <input checked="" type="checkbox"/> Vehicle Owner Same As Operator					
	46 - Vehicle Owner Last Name NELSON		46 - First Name TRAVIS		46 - Middle Initial JAMES	46 - Suffix
	46 - Company Name					
	47 - Address Street & Number 2265 190TH ST				47 - PO Box	
	48 - City CENTURIA		48 - State WI	48 - Zip Code 54824		49 - Telephone Number (715) 553-2737 EXT.

Insurance

INS 01	63 - Liability Insurance Company UNKNOWN				60 <input checked="" type="checkbox"/> Policy Holder Same As Owner	
	61 - Policy Holder Last Name NELSON			61 - Policy Holder First Name TRAVIS		
	61 - Policy Holder Company					

School Bus

BUS 01	Bus Travelling to/from To From	School Name	Body Make	Seating Capacity
	School District Contracted With			

Occupant

01	<input type="checkbox"/> Address Same As Operator				
	65 - Unit No 01	66 - Occupant Last Name ERICKSON		66 - First Name JANIS	66 - Middle Initial MARIE
	68 - Address Street & Number 2199 200TH ST			68 - PO Box	

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OCCUPANT	68 - City CENTURIA		68 - State WI	68 - Zip Code 54824		
	67 - Date of Birth 02 [REDACTED] 1986		69 - Sex F			
	71 - Seat Position 03			72 - Safety Equipment 01		
	70 - Injury Severity C	73 - Airbag 02	75 - Ejected 02		77 <input checked="" type="checkbox"/> Medical Transport	
	76 - Trapped/Extricated 02		78 - Agency Space			

Property

PROPERTY OWNER 01	Organization Type G	84 - Property Owner Last Name		84 - First Name		84 - Middle Initial	84 - Suffix	
	84 - Company Name STERLING TOWNSHIP					Government Property Type 2		
	85 - Address Street & Number 2510 241ST ST			85 - PO Box				
	86 - City CUSHING		86 - State WI	86 - Zip Code 54006		87 - Telephone Number		
	83 - Government Damage Tag Number							

Fixed Objects Struck

PROPERTY OWNER 01	82 - Striking Unit 1	82 - Object Struck 15	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 STONE
	<p style="text-align: center;">NOT DRAWN TO SCALE</p>
<p>DRIVER STATED HE WAS W/B ON 28TH AVE AT APPROXIMATLY 55 MPH WHEN HE CAME TO A 90 DEGREE CURVE IN THE ROAD WHICH HE WASNT EXPECTING. VEHICLE LEFT ROADWAY AND STRUCK SEVERAL TREES WHICH WERE LAYING ON THE GROUND AND BECAME STUCK. DAMAGE DONE TO DRIVETRAIN CAUSED TRUCK TO NOT BE ABLE TO DRIVE OUT OF DITCH. DRIVER SUBSEQUENTLY ARRESTED FOR OMVWI. PASSENGER STRUCK HER NOSE CAUSING IT TO BLEED. SHE WAS TRANSPORTED TO SCRMC HOSPITAL WHERE SHE WAS TREATED AND RELEASED.</p>	

Officer Information

OFFICER INFORMATION	125 - Officer Last Name HAHN		125 - First Name JEFF		125 - Middle Initial		131 - Officer ID 931		
	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 01/20/2012		133 - Time Notified (Military Time) 2121		134 - Time Arrived (Military Time) 2215		135 - Date Of Report 01/29/2012		
	Agency Accident Number		Police Number 158-12		19 - Special Study				
	18 - AGENCY SPACE								

Truck and Bus

TRUCK/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				
	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 <input type="checkbox"/> One or more vehicles towed from the scene due to disabling damage				
	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					