

POLICE #
ACCIDENT # 229-12

GENERAL INFORMATION

<input checked="" type="checkbox"/> Reportable Accident	<input type="checkbox"/> On Emergency	<input type="checkbox"/> Amended	DOT Document Number LF5MNFJ	Document Override Number
Agency Accident Number 229-12		Police Number		
4 - Accident Date 01/29/2012	5 - Time of Accident (Military Time) 1643	6 - Total Units 01	7 - Total Injured 00	8 - Total Killed 00
2 - County 48	3 - Municipality 4809	11 - Accident Location 2		
14 - On Hwy No.	14 - On Street Name COUNTY LINE ST	14 - Bus/Frnt/Rmp	15 - Est. Dist 0.50	Ft/Mi M
				15 - Hwy. Dir N
16 - Fr/At Hwy No.	16 - From/At Street Name 10TH AVE	16 - Business/Frontage/Ramp		
17 - Structure Type	17 - Structure Number	12 - Latitude	13 - Longitude -	
80 - First Harmful Event 32		93 - Manner of Collision 01		
112 - Access Control 01	113 - Road Curvature 01	113 - Road Terrain 03	Surface Type 2	
115 - Traffic Way 01				
117 - Relation To Roadway 05				
114 - Light Condition 05	116 - Road Surface Condition 04	118 - Weather 01		
9 <input type="checkbox"/> Hit and Run	9 <input type="checkbox"/> Government Property	9 <input type="checkbox"/> Fire	9 <input 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 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 32	23 - Dir Of Travel N	24 - Speed Limit 55
36 - Operating as Classified D	37 - Endorsements	35 <input type="checkbox"/> Operating Commercial Motor Vehicle	
29 - Driver's License Number 4418829807	30 - State WI	31 - Expiration Year 2019	34 - On Duty Accident
25 - Operator/Pedestrian Last Name MORDEN	25 - First Name JAMES	25 - Middle Initial A	25 - Suffix
32 - Date Of Birth 08/1988	33 - Sex M		
26 - Address Street & Number 901 W CLAYTON AVE #2			26 - PO Box
27 - City CLAYTON	27 - State WI	27 - Zip Code 54004	28 - Telephone Number (715) 768-0109 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 01	120 - Traffic Control 01	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 77			
88 - Driver or Pedestrian Cond 01	89 - Substance Presence 05		
90 - Alcohol Test 10	90 - Alcohol Content	91 - Drug Test 14	

PK2011

91 - Drugs Reported
124 - Highway Factors 01

Vehicle

VEHICLE 01	21 - Unit Type 2	Vehicle Type 03				22 - Total Occupants 1
	56 - License Plate Number	57 - Plate Type	58 - State WI	59 - Exp Year	55 - Vehicle Identification Number 1FTYR10D83PA62985	
	50 - Year 2003	51 - Make FORD	52 - Model RANGER	53 - Body Style 2D	54 - Color BLK	100 - Skidmarks to Impact (Ft)
	94 - Vehicle Damage 11					
	95 - Extent Of Damage 4	96 <input type="checkbox"/> Vehicle Towed Due To Damage			97 - Vehicle Removed By	
	123 - Vehicle Factors 77					

Vehicle Owner

VEH OWNER 01	45 <input type="checkbox"/> Vehicle Owner Same As Operator					
	46 - Vehicle Owner Last Name SIGSWORTH		46 - First Name JOSEPH		46 - Middle Initial V	46 - Suffix
	Date Of Birth 12/1969					
	46 - Company Name					
	47 - Address Street & Number 252 10TH ST				47 - PO Box	
48 - City CLEAR LAKE		48 - State WI	48 - Zip Code 54005		49 - Telephone Number (715) 263-3734 EXT.	

Insurance

INS 01	63 - Liability Insurance Company NONE				60 <input type="checkbox"/> Policy Holder Same As Owner	
	61 - Policy Holder Last Name			61 - Policy Holder First Name		
	61 - Policy Holder Company					

School Bus

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

Diagram and Narrative

105 - PHOTOS BY

DIAGRAM AND NARRATIVE



UNIT 1 WAS TR N/B ON CTY LINE ST. IN THE AREA OF 139 CTY LINE ST. UNIT #1 LOST CONTROL ON GLARE ICE AND TR INTO W DITCH AND OVERTURNED VEHICLE.

Officer Information

OFFICER INFORMATION	125 - Officer Last Name VIERKANDT		125 - First Name JOE		125 - Middle Initial		131 - Officer ID 916	
	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 01/29/2012		133 - Time Notified (Military Time) 1643		134 - Time Arrived (Military Time) 1807		135 - Date Of Report 01/30/2012	
	Agency Accident Number 229-12		Police Number		19 - Special Study			
	18 - AGENCY SPACE CASE 229-12							

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								

PK2011

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		