

PK2011

POLICE # 2714-11
 ACCIDENT #

GENERAL INFORMATION

<input checked="" type="checkbox"/> Reportable Accident	<input type="checkbox"/> On Emergency	<input type="checkbox"/> Amended	DOT Document Number LF5B1K6	Document Override Number
Agency Accident Number		Police Number 2714-11		
4 - Accident Date 12/08/2011	5 - Time of Accident (Military Time) 0710	6 - Total Units 01	7 - Total Injured 00	8 - Total Killed 00
2 - County 48	3 - Municipality 4811		11 - Accident Location 2	
14 - On Hwy No.	14 - On Street Name 240TH ST	14 - Bus/Frnt/Rmp	15 - Est. Dist 0.25	Ft/Mi M
				15 - Hwy. Dir N
16 - Fr/At Hwy No.	16 - From/At Street Name CHERRY DR		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 2	
115 - Traffic Way 01				
117 - Relation To Roadway 06				
114 - Light Condition 04		116 - Road Surface Condition 03	118 - Weather 01	
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 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 N	24 - Speed Limit 45
36 - Operating as Classified D	37 - Endorsements	35 <input type="checkbox"/> Operating Commercial Motor Vehicle	
29 - Driver's License Number 4249340908	30 - State WI	31 - Expiration Year 2012	34 - On Duty Accident
25 - Operator/Pedestrian Last Name OLSON		25 - First Name JOHNATHAN	25 - Middle Initial D
25 - Suffix			
32 - Date Of Birth 11/1993	33 - Sex M		
26 - Address Street & Number 2407 40TH AVE			26 - PO Box
27 - City OSCEOLA	27 - State WI	27 - Zip Code 54020	28 - Telephone Number (715) 294-2427 EXT.
39 - Seat Position 01		40 - Safety Equipment 01	
38 - Injury Severity N	41 - Airbag 01	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 01	62 - No. of Citations Issued 1
64 - 1st Statute No. 346.57(3)	64 - 2nd Statute No.	64 - 3rd Statute No.	64 - 4th Statute No.
64 - 5th Statute No.			
122 - Driver Factors 02,11			
88 - Driver or Pedestrian Cond 04	89 - Substance Presence 05		
90 - Alcohol Test 10	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 1	Vehicle Type 01				22 - Total Occupants 1
	56 - License Plate Number 875SXC	57 - Plate Type AUT	58 - State WI	59 - Exp Year 2012	55 - Vehicle Identification Number 2C3HC56F1VH535896	
	50 - Year 1997	51 - Make CHRY	52 - Model LHS	53 - Body Style 4D	54 - Color MAR	100 - Skidmarks to Impact (Ft)
	94 - Vehicle Damage 01,02,05,06,07,08,09					
	95 - Extent Of Damage 5	96 <input checked="" type="checkbox"/> Vehicle Towed Due To Damage		97 - Vehicle Removed By OSCEOLA TOWING AND RECOVERY		
	123 - Vehicle Factors 77					

Vehicle Owner

VEH OWNER 01	45 <input checked="" type="checkbox"/> Vehicle Owner Same As Operator				
	46 - Vehicle Owner Last Name OLSON	46 - First Name JOHNATHAN	46 - Middle Initial D	46 - Suffix	Date Of Birth 11/1993
	46 - Company Name				
	47 - Address Street & Number 2407 40TH AVE			47 - PO Box	
	48 - City OSCEOLA	48 - State WI	48 - Zip Code 54020	49 - Telephone Number (715) 294-2427 EXT.	

Insurance

INS 01	63 - Liability Insurance Company PROGRESSIVE CASUALTY INS CO		60 <input type="checkbox"/> Policy Holder Same As Owner
	61 - Policy Holder Last Name OLSON	61 - Policy Holder First Name DANIEL	
	61 - Policy Holder Company		

School Bus

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

Property

Organization Type U	84 - Property Owner Last Name	84 - First Name	84 - Middle Initial	84 - Suffix
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PROPERTY OWNER	84 - Company Name		Government Property Type	
	85 - Address Street & Number		85 - PO Box	
	86 - City	86 - State	86 - Zip Code	87 - Telephone Number
	83 - Government Damage Tag Number			
	Fixed Objects Struck			
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 DEPUTY TROY OLSON
	<p>ON 12-08-11 OLSON WAS N/B ON 240TH ST WHEN HE APPEARED TO HAVE GONE OFF THE ROAD SLIGHTLY CAUSING THE VEHICLE TO START TO SKID. OLSON ATTEMPTED TO CORRECT THE SKID HOWEVER DUE TO THE PACKED SNOW ON THE ROADWAY, LOST CONTROL ENTERING THE EAST DITCH SIDEWAYS. AFTER ENTERING THE DITCH, OLSON'S VEHICLE STRUCK NUMEROUS TREES CAUSING SEVERE DAMAGE.</p>

Officer Information

OFFICER INFORMATION	125 - Officer Last Name OLSON		125 - First Name TROY	125 - Middle Initial	131 - Officer ID 928	
	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 12/08/2011	133 - Time Notified (Military Time) 0728	134 - Time Arrived (Military Time) 0815	135 - Date Of Report 12/08/2011		
	Agency Accident Number		Police Number 2714-11		19 - Special Study	
	18 - AGENCY SPACE					