

PK2011

POLICE # 2718-11

ACCIDENT #

GENERAL INFORMATION

OPERATOR/PEDESTRIAN 01

<input checked="" type="checkbox"/> Reportable Accident		<input type="checkbox"/> On Emergency		<input type="checkbox"/> Amended		DOT Document Number LF5L605		Document Override Number	
Agency Accident Number				Police Number 2718-11					
4 - Accident Date 12/08/2011		5 - Time of Accident (Military Time) 2305		6 - Total Units 01		7 - Total Injured 01		8 - Total Killed 00	
2 - County POLK - 48		3 - Municipality EUREKA - 10, TOWN				11 - Accident Location NON-INTERSECTION			
14 - On Hwy No.	14 - On Street Name COUNTY RD G			14 - Bus/Frnt/Rmp		15 - Est. Dist 200	Ft/Mi F	15 - Hwy. Dir WEST	
16 - Fr/At Hwy No.	16 - From/At Street Name 220TH AVE				16 - Business/Frontage/Ramp				
17 - Structure Type		17 - Structure Number		12 - Latitude			13 - Longitude		
80 - First Harmful Event EMBANKMENT				93 - Manner of Collision NO COLLISION WITH MOTOR VEHICLE IN TRANSPORT					
112 - Access Control NO CONTROL		113 - Road Curvature CURVE		113 - Road Terrain HILL		Surface Type BLACKTOP (BITUMINOUS) - 2			
115 - Traffic Way NOT-PHYSICALLY-DIVIDED-(2-WAY TRAFFIC)									
117 - Relation To Roadway OUTSIDE-SHOULDER-LEFT									
114 - Light Condition DARK-NOT-LIGHTED			116 - Road Surface Condition DRY			118 - Weather CLEAR			
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 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 OVERTURN		23 - Dir Of Travel WEST		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 2846445006		30 - State WI	31 - Expiration Year 2016	34 - On Duty Accident			
25 - Operator/Pedestrian Last Name FLETCHER			25 - First Name GEOFFREY		25 - Middle Initial D	25 - Suffix	
32 - Date Of Birth 12-1964		33 - Sex MALE					
26 - Address Street & Number 2144 SHY 87						26 - PO Box 505	
27 - City ST CROIX FALLS		27 - State WI	27 - Zip Code 54024		28 - Telephone Number (651) 238-9271 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 C - POSSIBLE 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 NEGOTIATING-CURVE			120 - Traffic Control NO-CONTROL			62 - No. of Citations Issued 1	
64 - 1st Statute No. 346.57(2)	64 - 2nd Statute No.		64 - 3rd Statute No.		64 - 4th Statute No.	64 - 5th Statute No.	
122 - Driver Factors FAILURE-TO-HAVE-CONTROL							
88 - Driver or Pedestrian Cond NOT OBSERVED		89 - Substance Presence UNKNOWN					
90 - Alcohol Test TEST NOT GIVEN			90 - Alcohol Content			91 - Drug Test TEST-NOT-GIVEN	

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

**Vehicle**

<b>VEHICLE 01</b>	21 - Unit Type <b>AUTOMOBILE</b>		Vehicle Type <b>PASSENGER-CAR</b>			22 - Total Occupants <b>1</b>
	56 - License Plate Number <b>790SWL</b>		57 - Plate Type <b>AUT</b>	58 - State <b>WI</b>	59 - Exp Year <b>2012</b>	55 - Vehicle Identification Number <b>2G1WH55K5Y9107243</b>
	50 - Year <b>2000</b>	51 - Make <b>CHEV</b>	52 - Model <b>IMPALA</b>	53 - Body Style <b>4D</b>	54 - Color <b>BLU</b>	100 - Skidmarks to Impact (Ft)
	94 - Vehicle Damage <b>TOTAL (DAMAGE TO ALL AREAS)</b>					
	95 - Extent Of Damage <b>VERY-SEVERE</b>		96 <input checked="" type="checkbox"/> <b>Vehicle Towed Due To Damage</b>		97 - Vehicle Removed By <b>R D MILLTOWN TOWING AND RECOVERY LLC</b>	
	123 - Vehicle Factors <b>NOT-APPLICABLE</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>FLETCHER</b>		46 - First Name <b>GEOFFREY</b>		46 - Middle Initial <b>D</b>	46 - Suffix
	46 - Company Name					
	47 - Address Street & Number <b>2144 SHY 87</b>			47 - PO Box <b>505</b>		
	48 - City <b>ST CROIX FALLS</b>		48 - State <b>WI</b>	48 - Zip Code <b>54024</b>		49 - Telephone Number <b>(651) 238-9271 EXT.</b>

**Insurance**

<b>INS 01</b>	63 - Liability Insurance Company <b>ALLIED-PROPERTY-AND-CASUALTY-INS-CO</b>				60 <input checked="" type="checkbox"/> <b>Policy Holder Same As Owner</b>	
	61 - Policy Holder Last Name <b>FLETCHER</b>			61 - Policy Holder First Name <b>GEOFFREY</b>		
	61 - Policy Holder Company					

**School Bus**

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

**Property**

Organization Type <b>GOVERNMENT</b>	84 - Property Owner Last Name	84 - First Name	84 - Middle Initial	84 - Suffix
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<b>PROPERTY OWNER 01</b>	84 - Company Name <b>EUREKA TOWNSHIP</b>		Government Property Type <b>COUNTY/MUNICIPAL</b>	
	85 - Address Street & Number <b>2111 STATE HWY 87</b>		85 - PO Box	
	86 - City <b>ST CROIX FALLS</b>	86 - State <b>WI</b>	86 - Zip Code <b>54024</b>	87 - Telephone Number <b>(715) 483-3954 EXT.</b>
	83 - Government Damage Tag Number			
	<b>Fixed Objects Struck</b>			
82 - Striking Unit <b>1</b>	82 - Object Struck <b>TREE</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>BRYANT</b>
	<p>UNIT 1 WESTBOUND CHY G APPROACHING 90 DEGREE CURVE AT 220TH ST SWERVES RIGHT TO AVOID COLLISION WITH DEER                  UNIT 1 LOSES CONTROL, CROSSES OPPOSING LANE OF TRAFFIC AND EXITS ROADWAY ON SOUTH SIDE OF CHY G                  UNIT 1 TRAVELS DOWN STEEP EMBANKMENT STRIKING SEVERAL TREES, TURNS 180 DEGREES AND OVERTURNS AT LEAST ONCE AND LANDS UPRIGHT.</p>

**Officer Information**

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<b>OFFICER INFORMATION</b>	125 - Officer Last Name <b>BRYANT</b>		125 - First Name <b>NICK</b>	125 - Middle Initial	131 - Officer ID <b>913</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>12/08/2011</b>	133 - Time Notified (Military Time) <b>2344</b>	134 - Time Arrived (Military Time) <b>2348</b>		135 - Date Of Report <b>12/09/2011</b>	
	Agency Accident Number		Police Number <b>2718-11</b>	19 - Special Study		
	18 - Agency Space					