

PK2011

POLICE # 12-0015

ACCIDENT #

GENERAL INFORMATION

OPERATOR/PEDESTRIAN 01

<input checked="" type="checkbox"/> Reportable Accident	<input type="checkbox"/> On Emergency	<input type="checkbox"/> Amended	DOT Document Number D8FF0S3	Document Override Number
Agency Accident Number		Police Number 12-0015		
4 - Accident Date 01/01/2012	5 - Time of Accident (Military Time) 1740	6 - Total Units 01	7 - Total Injured 00	8 - Total Killed 00
2 - County KEWAUNEE - 31	3 - Municipality CASCO - 03, TOWN		11 - Accident Location NON-INTERSECTION	
14 - On Hwy No. 054	14 - On Street Name	14 - Bus/Frnt/Rmp	15 - Est. Dist 50	Ft/Mi F 15 - Hwy. Dir WEST
16 - Fr/At Hwy No.	16 - From/At Street Name BRAEBURN ST		16 - Business/Frontage/Ramp	
17 - Structure Type	17 - Structure Number	12 - Latitude 44.55769	13 - Longitude - 87.6305	
80 - First Harmful Event DITCH		93 - Manner of Collision NO COLLISION WITH MOTOR VEHICLE IN TRANSPORT		
112 - Access Control NO CONTROL	113 - Road Curvature CURVE	113 - Road Terrain LEVEL/FLAT	Surface Type BLACKTOP (BITUMINOUS) - 2	
115 - Traffic Way NOT-PHYSICALLY-DIVIDED-(2-WAY TRAFFIC)				
117 - Relation To Roadway OUTSIDE-SHOULDER-RIGHT				
114 - Light Condition DARK-NOT-LIGHTED		116 - Road Surface Condition SNOW/SLUSH		118 - Weather CLOUDY
<input type="checkbox"/> Hit and Run	<input type="checkbox"/> Government Property	<input type="checkbox"/> Fire	<input type="checkbox"/> Photos Taken	<input type="checkbox"/> Trailer or Towed
<input type="checkbox"/> Truck, Bus, or Hazardous Materials	<input type="checkbox"/> Load Spillage	<input type="checkbox"/> Construction Zone	<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 DITCH	23 - Dir Of Travel EAST	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 S3307938652304	30 - State WI	31 - Expiration Year 2013	34 - On Duty Accident
25 - Operator/Pedestrian Last Name STUTH	25 - First Name SUSAN		25 - Middle Initial M 25 - Suffix
32 - Date Of Birth 01/23/1986	33 - Sex FEMALE		
26 - Address Street & Number N9188 CHERRY TREE RD			26 - PO Box
27 - City ALGOMA	27 - State WI	27 - Zip Code 542010000	28 - Telephone Number (920) 492-9179 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 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. 343.44(1)(B)	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 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

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91 - Drugs Reported
124 - Highway Factors SNOW,-ICE,-OR-WET

Vehicle

VEHICLE 01	21 - Unit Type AUTOMOBILE		Vehicle Type PASSENGER-CAR			22 - Total Occupants 1
	56 - License Plate Number F2866S		57 - Plate Type TMP	58 - State WI	59 - Exp Year 2012	55 - Vehicle Identification Number 1G3HY53L2N1827269
	50 - Year 1992	51 - Make OLDS	52 - Model DELTA 88	53 - Body Style 4D	54 - Color SIL	100 - Skidmarks to Impact (Ft) 0
	94 - Vehicle Damage FRONT, FRONT PASSENGER SIDE, FRONT DRIVER SIDE, UNDERCARRIAGE					
	95 - Extent Of Damage MODERATE		96 <input checked="" type="checkbox"/> Vehicle Towed Due To Damage		97 - Vehicle Removed By GROSBEIER TOWING	
	123 - Vehicle Factors NOT-APPLICABLE					

Vehicle Owner

VEH OWNER 01	45 <input checked="" type="checkbox"/> Vehicle Owner Same As Operator				
	46 - Vehicle Owner Last Name STUTH		46 - First Name SUSAN		46 - Middle Initial M
	46 - Company Name		Date Of Birth 01/23/1986		
	47 - Address Street & Number N9188 CHERRY TREE RD			47 - PO Box	
	48 - City ALGOMA		48 - State WI	48 - Zip Code 542010000	49 - Telephone Number (920) 492-9179 EXT.

Insurance

INS 01	63 - Liability Insurance Company DAIRYLAND-INS-CO		60 <input checked="" type="checkbox"/> Policy Holder Same As Owner
	61 - Policy Holder Last Name STUTH		61 - Policy Holder First Name SUSAN
	61 - Policy Holder Company		

School Bus

BUS 01	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 UNKNOWN	84 - Property Owner Last Name	84 - First Name	84 - Middle Initial	84 - Suffix
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PROPERTY OWNER 01	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 DITCH	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
	UNIT 1 WAS TRAVELING EASTBOUND ON STH 54. UNIT 1 WAS NEGOTIATING A CURVE. UNIT 1 DROVE OVER ICE ON THE ROADWAY AND LOST CONTROL AND WENT INTO THE DITCH, DROVE OVER A FIELD DRIVEWAY AND WENT FURTHER IN THE DITCH

Officer Information

OFFICER INFORMATION	125 - Officer Last Name SCHMIDT	125 - First Name KEVIN	125 - Middle Initial J	131 - Officer ID 72	
	129 - Law Enforcement Agency No. 3100	130 - Law Enforcement Agency Name KEWAUNEE COUNTY SHERIFF			
	126 - Law Enforcement Agency Address Street & Number 620 JUNEAU STREET				
	127 - City KEWAUNEE	127 - State WI	127 - Zip Code 54216	128 - Telephone Number (920) 388-3100 EXT.	
	132 - Date Notified 01/01/2012	133 - Time Notified (Military Time) 1746	134 - Time Arrived (Military Time) 1757	135 - Date Of Report 01/01/2012	
	Agency Accident Number	Police Number 12-0015	19 - Special Study		
	18 - Agency Space				