

PK2012

POLICE # 16-15229

ACCIDENT # 16-15229

<input checked="" type="checkbox"/> Reportable Accident		<input type="checkbox"/> On Emergency		<input type="checkbox"/> Amended		DOT Document Number GX6T73T		Document Override Number	
Agency Accident Number 16-15229				Police Number 16-15229					
4 - Accident Date 12/14/2016		5 - Time of Accident (Military Time) 1608		6 - Total Units 02		7 - Total Injured 01		8 - Total Killed 00	
2 - County SAUK - 56		3 - Municipality REEDSBURG - 15, Town				11 - Accident Location Non-Intersection			
14 - On Hwy No.	14 - On Street Name SKI HILL RD			14 - Bus/Frnt/Rmp		15 - Est. Distance 139 Ft		15 - Hwy. Dir EAST	
16 - Fr/At Hwy No.	16 - From/At Street Name S DEWEY AVE			16 - Business/Frontage/Ramp					
17 - Structure Type	17 - Structure Number		12 - Latitude 43.510772401146			13 - Longitude -89.99438632671			
80 - First Harmful Event Motor Vehicle In Transport				93 - Manner of Collision Angle					
112 - Access Control No Control		113 - Road Curvature Straight		113 - Road Terrain Level/Flat		Surface Type Blacktop, Bituminous, or Asphalt - 2			
115 - Traffic Way Not-Physically-Divided-(2-Way Traffic)									
117 - Relation To Roadway On-Roadway									
114 - Light Condition Daylight			116 - Road Surface Condition Snow/Slush			118 - Weather Clear			
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 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 checked="" type="checkbox"/> Measurements Taken		79 - E M S Number			

Operator/Pedestrian

Unit Status		81 - Most Harmful Event: Collision With Motor Vehicle In Transport		23 - Dir Of Travel EAST		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		30 - State WI	31 - Expiration Year 2019	34 - On Duty Accident			
25 - Operator/Pedestrian Last Name SCHLIECKAU			25 - First Name JARDON		25 - Middle Initial THOMAS		25 - Suffix
32 - Date Of Birth		33 - Sex Male					

OPERATOR/PEDESTRIAN 01	26 - Address Street & Number S7010 ORCHARD RD						26 - PO Box	
	27 - City NORTH FREEDOM			27 - State WI	27 - Zip Code 53951		28 - Telephone Number	
	39 - Seat Position Front-Seat-Left-Side-(MC/Bike Driver, Train Conductor)				40 - Safety Equipment Restraint-Use-Unknown			
	38 - Injury Severity A - Incapacitating Injury		41 - Airbag Deployed		42 - Ejected Not-Ejected		44 <input checked="" type="checkbox"/> Medical Transport	
	43 - Trapped/Extricated Not-Trapped		92 - Pedestrian Location		92 - Pedestrian Action			
	119 - What Driver Was Doing GOING STRAIGHT			120 - Traffic Control No-Control			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 Speed-Too-Fast-for-Conditions, Left-of-Center, 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	
91 - Drugs Reported								

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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 167ZEE		57 - Plate Type AUT	58 - State WI	59 - Exp Year 2017	55 - Vehicle Identification Number 1B3ES56C15D215869
	50 - Year 2005	51 - Make DODG	52 - Model NEON SXT	53 - Body Style 4D - 4DR	54 - Color SIL	100 - Skidmarks to Impact (Ft)
	94 - Vehicle Damage Front, Front Passenger Side, Middle Passenger Side, Rear Passenger Side					
	95 - Extent Of Damage Very-Severe		96 <input checked="" type="checkbox"/> Vehicle Towed Due To Damage		97 - Vehicle Removed By STEVES AUTO SERVICE	
	123 - Vehicle Factors Not-Applicable					

Vehicle Owner

VEH OWNER 01	45 <input type="checkbox"/> Vehicle Owner Same As Operator					
	46 - Vehicle Owner Last Name SCHLIECKAU		46 - First Name KURT	46 - Middle Initial A	46 - Suffix	Date Of Birth
	46 - Company Name					
	47 - Address Street & Number S7010 ORCHARD RD			47 - PO Box		
	48 - City NORTH FREEDOM		48 - State WI	48 - Zip Code 53951	49 - Telephone Number (608) 522-3332 Ext.	

Insurance

INS 01	63 - Liability Insurance Company UNKNOWN		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 <input type="radio"/> To <input type="radio"/> From	School Name	Body Make	Seating Capacity
	School District Contracted With			

Operator/Pedestrian

02	Unit Status		81 - Most Harmful Event: Collision With Motor Vehicle In Transport		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		30 - State WI	31 - Expiration Year 2017	34 - On Duty Accident		
	25 - Operator/Pedestrian Last Name STEVENS		25 - First Name JOAN		25 - Middle Initial C	25 - Suffix	
	32 - Date Of Birth		33 - Sex Female				
	26 - Address Street & Number 102 W BROADWAY				26 - PO Box		
	27 - City ROCK SPRINGS		27 - State WI	27 - Zip Code 53961	28 - Telephone Number (608) 524-3883 Ext.		

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OPERATOR/PEDESTRIAN	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 GOING STRAIGHT		120 - Traffic Control No-Control		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 Not-Applicable					
	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	
	91 - Drugs Reported					
	124 - Highway Factors Snow,-Ice,-or-Wet					

Vehicle

VEHICLE 02	21 - Unit Type Truck			Vehicle Type Pickup/Utility-Truck			22 - Total Occupants 1	
	56 - License Plate Number KV7625		57 - Plate Type LTK	58 - State WI	59 - Exp Year 2017	55 - Vehicle Identification Number 2FTRX18W34CA82886		
	50 - Year 2004	51 - Make FORD	52 - Model F150	53 - Body Style PK - PICKUP		54 - Color WHI	100 - Skidmarks to Impact (Ft)	
	94 - Vehicle Damage Front Passenger Side, Front							
	95 - Extent Of Damage Severe		96 <input checked="" type="checkbox"/> Vehicle Towed Due To Damage		97 - Vehicle Removed By STEVES AUTO SERVICE			
	123 - Vehicle Factors Not-Applicable							

Vehicle Owner

VEH OWNER 02	45 <input checked="" type="checkbox"/> Vehicle Owner Same As Operator						
	46 - Vehicle Owner Last Name STEVENS		46 - First Name JOAN		46 - Middle Initial C	46 - Suffix	Date Of Birth
	46 - Company Name						
	47 - Address Street & Number 102 W BROADWAY				47 - PO Box		
	48 - City ROCK SPRINGS			48 - State WI	48 - Zip Code 53961		49 - Telephone Number (608) 524-3883 Ext.

Insurance

02	63 - Liability Insurance Company GEICO-ADVANTAGE-INSURANCE-CO			60 <input checked="" type="checkbox"/> Policy Holder Same As Owner	
	61 - Policy Holder Last Name STEVENS			61 - Policy Holder First Name JOAN	

61 - Policy Holder Company

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INS			

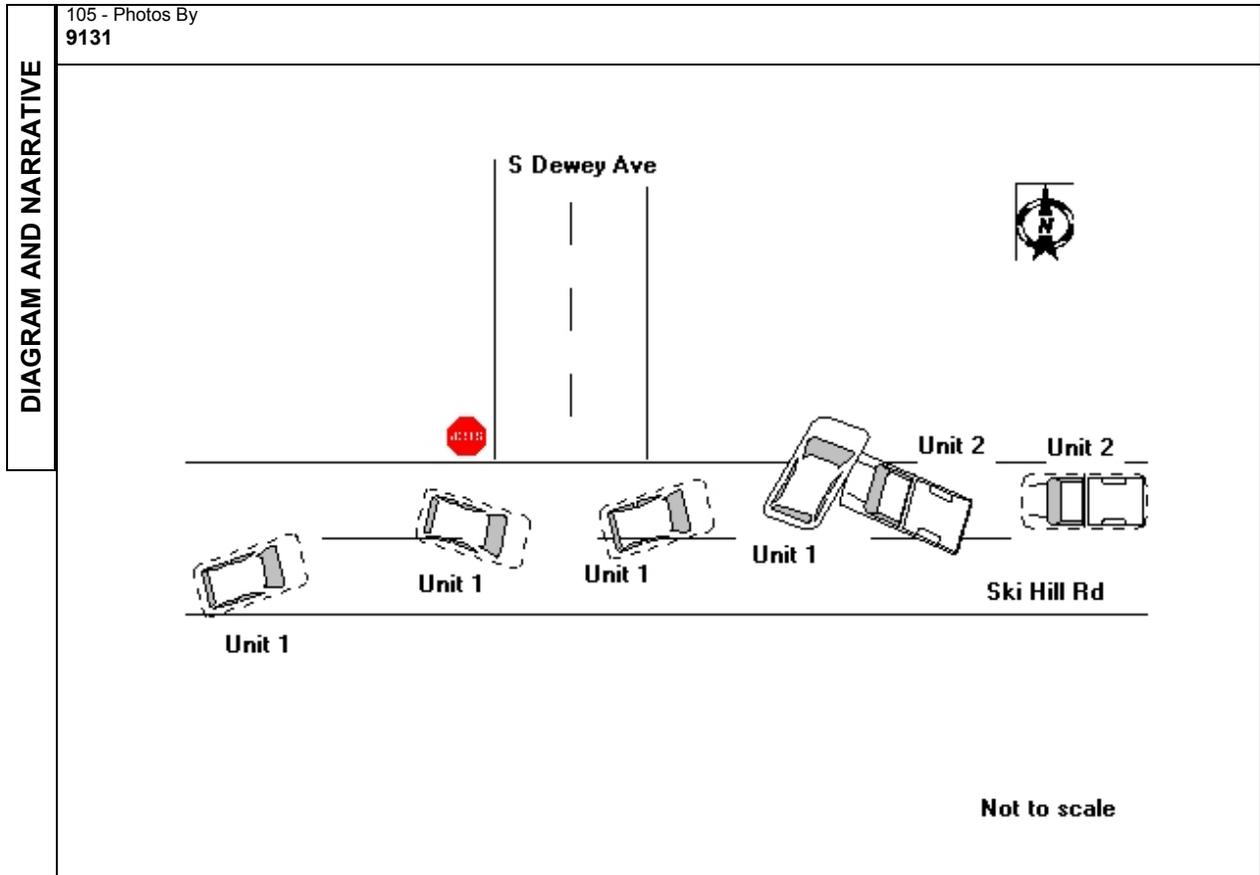
School Bus

BUS 02	Bus Travelling to/from <input type="radio"/> To <input type="radio"/> From	School Name	Body Make	Seating Capacity
	School District Contracted With			

Trailer

TRL 01	106 - Power Unit Number	License Plate Number	Plate Type	State	Expiration Year
	Trailer Make		Unit Type	Vehicle Identification Number	

Diagram and Narrative



ON THE ABOVE DATE AND TIME UNIT 1 WAS EASTBOUND ON SKI HILL RD AT S DEWEY AVE AND UNIT 2 WAS WESTBOUND ON SKI HILL RD AT S DEWEY AVE. UNIT 1 CROSSED THE CENTER OF THE ROADWAY INTO THE WESTBOUND LANE. UNIT 1 STRUCK UNIT 2. UNIT 2 OPERATOR STATED SEEING UNIT ONE APPEAR TO LOSE CONTROL ON THE ICY ROADWAY AND START "FISHTAILING." UNIT 2 OPERATOR STATED SHE WAS UNABLE TO AVOID UNIT 1 WHEN IT CROSSED INTO HER LANE AND STRUCK HER UNIT.

Witness

WITNESS 01	107 - Witness Last Name WALKER	107 - First Name GALE	107 - Middle Initial G	
	108 - Address Street & Number 403 N GROVE ST		108 - PO Box	109 - Date of Birth 6/19/1963 12:00:00 A
	110 - City REEDSBURG	State WI	110 - Zip Code 53959	111 - Telephone Number (608) 415-2553 Ext.

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Witness

WITNESS 02	107 - Witness Last Name DRIESE	107 - First Name MORGAN	107 - Middle Initial L
	108 - Address Street & Number 407 N GROVE ST	108 - PO Box	109 - Date of Birth 4/14/1992 12:00:00 A
	110 - City REEDSBURG	State WI	110 - Zip Code 53959
			111 - Telephone Number (608) 415-3048 Ext.

Officer Information

OFFICER INFORMATION	125 - Officer Last Name FRANK	125 - First Name C	125 - Middle Initial M	131 - Officer ID 9198
	129 - Law Enforcement Agency No.	130 - Law Enforcement Agency Name SAUK COUNTY SHERIFFS DEPARTMEN		
	126 - Law Enforcement Agency Address Street & Number 1300 LANGE COURT			
	127 - City BARABOO	127 - State WI	127 - Zip Code 53913	128 - Telephone Number (608) 356-4895 Ext.
	132 - Date Notified 12/14/2016	133 - Time Notified (Military Time) 1614	134 - Time Arrived (Military Time) 1616	135 - Date Of Report 12/14/2016
	16-15229	16-15229	19 - Special Study	
	18 - Agency Space 16-15229			