

PK2012

POLICE # 16-15251

ACCIDENT # 16-15251

<input checked="" type="checkbox"/> Reportable Accident		<input type="checkbox"/> On Emergency		<input type="checkbox"/> Amended		DOT Document Number GX74TZQ		Document Override Number			
Agency Accident Number 16-15251				Police Number 16-15251							
4 - Accident Date 12/15/2016			5 - Time of Accident (Military Time) 1100			6 - Total Units 01		7 - Total Injured 00		8 - Total Killed 00	
2 - County SAUK - 56			3 - Municipality LA VALLE - 12, Town				11 - Accident Location Non-Intersection				
14 - On Hwy No. 058		14 - On Street Name				14 - Bus/Frnt/Rmp		15 - Est. Distance 0.25 Mi		15 - Hwy. Dir SOUTH	
16 - Fr/At Hwy No.		16 - From/At Street Name WILKINSON RD				16 - Business/Frontage/Ramp					
17 - Structure Type		17 - Structure Number		12 - Latitude 43.623382607085			13 - Longitude -90.12523386288				
80 - First Harmful Event Ditch				93 - Manner of Collision No Collision with Motor Vehicle in Transport							
112 - Access Control No Control		113 - Road Curvature Straight		113 - Road Terrain Hill		Surface Type Blacktop, Bituminous, or Asphalt - 2					
115 - Traffic Way Not-Physically-Divided-(2-Way Traffic)											
117 - Relation To Roadway Shoulder-(Other than Shoulder within Median or Gore)											
114 - Light Condition Daylight			116 - Road Surface Condition Dry			118 - Weather Clear					
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 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 Ditch		23 - Dir Of Travel SOUTH		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			30 - State WI	31 - Expiration Year 2020		34 - On Duty Accident	
25 - Operator/Pedestrian Last Name SCHWARTZ				25 - First Name MICHAEL		25 - Middle Initial THOMAS	25 - Suffix
32 - Date Of Birth		33 - Sex Male					

26 - Address Street & Number W7352 CHEESE FACTORY RD						26 - PO Box		
27 - City MAUSTON			27 - State WI	27 - Zip Code 53948		28 - Telephone Number (608) 547-0143 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 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 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 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		
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 31880G		57 - Plate Type AUT	58 - State WI	59 - Exp Year 2017	55 - Vehicle Identification Number 2B3CA8CT7AH271876
	50 - Year 2010	51 - Make DODG	52 - Model CHARGER R/	53 - Body Style 4D - 4DR	54 - Color BLK	100 - Skidmarks to Impact (Ft)
	94 - Vehicle Damage Front Passenger Side, Middle Passenger Side, Rear Passenger Side					
	95 - Extent Of Damage Minor		96 <input checked="" type="checkbox"/> Vehicle Towed Due To Damage		97 - Vehicle Removed By ASAP 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 SCHWARTZ		46 - First Name MICHAEL		46 - Middle Initial THOMAS
	46 - Company Name				
	47 - Address Street & Number W7352 CHEESE FACTORY RD			47 - PO Box	
	48 - City MAUSTON		48 - State WI	48 - Zip Code 53948	49 - Telephone Number (608) 547-0143 Ext.

Insurance

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

Trailer

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

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OFFICER INFORMATION

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 12/15/2016	133 - Time Notified (Military Time) 1105	134 - Time Arrived (Military Time) 1135	135 - Date Of Report 12/15/2016
16-15251	16-15251	19 - Special Study	
18 - Agency Space			