

PK2012

POLICE # 16-15250

ACCIDENT # 16-15250

<input checked="" type="checkbox"/> Reportable Accident		<input type="checkbox"/> On Emergency		<input type="checkbox"/> Amended		DOT Document Number GX743R8		Document Override Number			
Agency Accident Number 16-15250				Police Number 16-15250							
4 - Accident Date 12/15/2016			5 - Time of Accident (Military Time) 1007			6 - Total Units 01		7 - Total Injured 01		8 - Total Killed 00	
2 - County SAUK - 56			3 - Municipality BARABOO - 01, Town				11 - Accident Location Non-Intersection				
14 - On Hwy No.		14 - On Street Name CTH W			14 - Bus/Frnt/Rmp		15 - Est. Distance 473 Ft		15 - Hwy. Dir WEST		
16 - Fr/At Hwy No.		16 - From/At Street Name PIKES PEAK RD				16 - Business/Frontage/Ramp					
17 - Structure Type		17 - Structure Number		12 - Latitude 43.445697727995			13 - Longitude -89.82285557454				
80 - First Harmful Event Tree				93 - Manner of Collision No Collision with Motor Vehicle in Transport							
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 Shoulder-(Other than Shoulder within Median or Gore)											
114 - Light Condition Daylight			116 - Road Surface Condition Snow/Slush			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 Tree		23 - Dir Of Travel WEST		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 SCHUMACHER				25 - First Name NICHOLAS		25 - Middle Initial J	25 - Suffix
32 - Date Of Birth		33 - Sex Male					

OPERATOR/PEDESTRIAN 01	26 - Address Street & Number 305 E WALNUT ST						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 Non-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 3		
	64 - 1st Statute No. 346.57(3)		64 - 2nd Statute No. 343.44(1)(B)		64 - 3rd Statute No. 344.62(1)		64 - 4th Statute No.		64 - 5th Statute No.
	122 - Driver Factors Failure-to-Have-Control								
	88 - Driver or Pedestrian Cond Reduced Alertness			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 745XUH		57 - Plate Type AUT	58 - State WI	59 - Exp Year 2017	55 - Vehicle Identification Number 1P3ES62Y6TD731129
	50 - Year 1996	51 - Make PLYM	52 - Model NEON SPORT	53 - Body Style 2T - HARDTOP 2 DO	54 - Color RED	100 - Skidmarks to Impact (Ft)
	94 - Vehicle Damage Front Driver Side, Middle Driver Side, Front					
	95 - Extent Of Damage Very-Severe		96 <input checked="" type="checkbox"/> Vehicle Towed Due To Damage		97 - Vehicle Removed By MIKES TOWING	
	123 - Vehicle Factors Not-Applicable					

Vehicle Owner

VEH OWNER 01	45 <input type="checkbox"/> Vehicle Owner Same As Operator					
	46 - Vehicle Owner Last Name YUSTEN		46 - First Name ZELDA	46 - Middle Initial E	46 - Suffix	Date Of Birth
	46 - Company Name					
	47 - Address Street & Number 305 E WALNUT ST			47 - PO Box		
	48 - City NORTH FREEDOM		48 - State WI	48 - Zip Code 53951	49 - Telephone Number (608) 963-6265 Ext.	

Insurance

INS 01	63 - Liability Insurance Company NONE		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			

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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Property

PROPERTY OWNER 01	Organization Type Government	84 - Property Owner Last Name	84 - First Name	84 - Middle Initial	84 - Suffix
	84 - Company Name TOWNSHIP OF BARABOO			Government Property Type County/Municipal	
	85 - Address Street & Number 101 CEDAR ST		85 - PO Box		
	86 - City BARABOO	86 - State WI	86 - Zip Code 53913	87 - Telephone Number (608) 356-5170 Ext.	
	83 - Government Damage Tag Number				

Fixed Objects Struck

82 - Striking Unit 01	82 - Object Struck Tree	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 KNULL
	<p style="text-align: center;">not to scale</p>

OPERATOR WHILE TRAVELING WB ON CTH W WENT OFF THE RIGHT SIDE OF THE ROAD AND STRUCK A TREE. DRIVER SELF EXTRICATED HIMSELF AND WAS TREATED AND TRANSPORTED FROM THE SCENE TO AWAITING MEDICAL HELICOPTER FOR HEAD AND FACIAL INJURIES. DRIVER CITED FOR OAR, TOO FAST FOR CONDITIONS AND OPERATE WITHOUT INSURANCE. VEHICLE SUSTAINED VERY SEVERE DAMAGE AND WAS TOWED FROM SCENE BY MIKES TOWING.

Officer Information

125 - Officer Last Name KNULL	125 - First Name ERIC	125 - Middle Initial D	131 - Officer ID 9141
129 - Law Enforcement Agency No.	130 - Law Enforcement Agency Name SAUK COUNTY SHERIFFS DEPARTMEN		

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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) 1009	134 - Time Arrived (Military Time) 1024	135 - Date Of Report 12/15/2016
16-15250	16-15250	19 - Special Study	
18 - Agency Space			