

PK2012

POLICE # 16-15344

ACCIDENT # 16-15344

<input type="checkbox"/> Reportable Accident		<input type="checkbox"/> On Emergency		<input type="checkbox"/> Amended		DOT Document Number GX6Q866		Document Override Number			
Agency Accident Number 16-15344				Police Number 16-15344							
4 - Accident Date 12/17/2016			5 - Time of Accident (Military Time) 1315			6 - Total Units 01		7 - Total Injured		8 - Total Killed	
2 - County SAUK - 56			3 - Municipality GREENFIELD - 09, Town					11 - Accident Location Non-Intersection			
14 - On Hwy No.		14 - On Street Name TOWER RD				14 - Bus/Frnt/Rmp		15 - Est. Distance 0.44 Mi		15 - Hwy. Dir EAST	
16 - Fr/At Hwy No. 113		16 - From/At Street Name				16 - Business/Frontage/Ramp					
17 - Structure Type		17 - Structure Number		12 - Latitude 43.433000799742			13 - Longitude -89.68801142497				
80 - First Harmful Event Other Non-collision					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 Snow					
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 Other Non-collision			23 - Dir Of Travel NORTH		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 2018		34 - On Duty Accident			
25 - Operator/Pedestrian Last Name TENAMORE				25 - First Name MICHAEL			25 - Middle Initial LAWRENCE		25 - Suffix
32 - Date Of Birth		33 - Sex Male							

OPERATOR/PEDESTRIAN 01	26 - Address Street & Number 503 10TH AVE						26 - PO Box			
	27 - City BARABOO			27 - State WI	27 - Zip Code 53913		28 - Telephone Number (608) 408-7933 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			
	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									
	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 528YY5		57 - Plate Type AUT	58 - State WI	59 - Exp Year 2017	55 - Vehicle Identification Number 2G1WL52J8Y1108105
	50 - Year 2000	51 - Make CHEV	52 - Model LUMINA	53 - Body Style 4D - 4DR	54 - Color MAR	100 - Skidmarks to Impact (Ft)
	94 - Vehicle Damage None					
	95 - Extent Of Damage None		96 <input type="checkbox"/> Vehicle Towed Due To Damage		97 - Vehicle Removed By OPERATOR	
	123 - Vehicle Factors Not-Applicable					

Vehicle Owner

VEH OWNER 01	45 <input type="checkbox"/> Vehicle Owner Same As Operator				
	46 - Vehicle Owner Last Name TENAMORE		46 - First Name MARY		46 - Middle Initial R
	46 - Company Name				
	47- Address Street & Number 503 10TH AVE			47 - PO Box	
	48 - City BARABOO		48 - State WI	48 - Zip Code 53913	49 - Telephone Number (608) 408-3141 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 TENAMORE		61 - Policy Holder First Name MARY
	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	

Diagram and Narrative

DIAGRAM AND NARRATIVE	105 - Photos By
	SLIDE OFF NO DAMAGE
UNIT 1 WAS NORTHBOUND TOWER RD AND LOST CONTROL ON SNOW COVERED ROADWAY. UNIT 1 SLID INTO SNOW FILLED DITCH AND WAS STUCK. UNIT PULLED OUT OF DITCH BY CRAIGS TOWNING. NO DAMAGE.	

Officer Information

OFFICER INFORMATION	125 - Officer Last Name HODGES		125 - First Name JAMES		125 - Middle Initial E		131 - Officer ID 8		
	129 - Law Enforcement Agency No.			130 - Law Enforcement Agency Name SAUK COUNTY SHERIFFS DEPTMEN					
	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 12/17/2016			133 - Time Notified (Military Time) 1323		134 - Time Arrived (Military Time) 1329		135 - Date Of Report 12/17/2016	
	16-15344			16-15344		19 - Special Study			
	18 - Agency Space								