

PK2009

POLICE # 10-04138

ACCIDENT #

GENERAL INFORMATION

OPERATOR/PEDESTRIAN 01

<input checked="" type="checkbox"/> Reportable Accident	<input type="checkbox"/> On Emergency	<input type="checkbox"/> Amended	DOT Document Number <b>GX1B1N3</b>	Document Override Number
Agency Accident Number		Police Number <b>10-04138</b>		
4 - Accident Date <b>04/17/2010</b>	5 - Time of Accident (Military Time) <b>2000</b>	6 - Total Units <b>01</b>	7 - Total Injured <b>01</b>	8 - Total Killed <b>00</b>
2 - County <b>SAUK - 56</b>	3 - Municipality <b>FAIRFIELD - 06, TOWN</b>		11 - Accident Location <b>NON-INTERSECTION</b>	
14 - On Hwy No. <b>U</b>	14 - On Street Name	14 - Bus/Frnt/Rmp	15 - Est. Dist <b>0.20</b>	Ft/Mi <b>M</b> 15 - Hwy. Dir <b>EAST</b>
16 - Fr/At Hwy No.	16 - From/At Street Name <b>CTH T</b>	16 - Business/Frontage/Ramp		
17 - Structure Type	17 - Structure Number	12 - Latitude	13 - Longitude <b>-</b>	
80 - First Harmful Event <b>DEER</b>		93 - Manner of Collision <b>NO COLLISION WITH MOTOR VEHICLE IN TRANSPORT</b>		
112 - Access Control <b>NO CONTROL</b>	113 - Road Curvature <b>STRAIGHT</b>	113 - Road Terrain <b>LEVEL/FLAT</b>	Surface Type <b>BLACKTOP (BITUMINOUS) - 2</b>	
115 - Traffic Way <b>NOT-PHYSICALLY-DIVIDED-(2-WAY TRAFFIC)</b>				
117 - Relation To Roadway <b>ON-ROADWAY</b>				
114 - Light Condition <b>DARK-NOT-LIGHTED</b>		116 - Road Surface Condition <b>DRY</b>		118 - Weather <b>CLEAR</b>
<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 <b>DEER</b>	23 - Dir Of Travel <b>EAST</b>	24 - Speed Limit <b>55</b>
36 - Operating as Classified <b>D CLASS</b>	37 - Endorsements	35 <input type="checkbox"/> Operating Commercial Motor Vehicle	
29 - Driver's License Number <b>B4201675327007</b>	30 - State <b>WI</b>	31 - Expiration Year <b>2012</b>	34 - On Duty Accident
25 - Operator/Pedestrian Last Name <b>BALLWEG</b>		25 - First Name <b>DENNIS</b>	25 - Middle Initial <b>G</b> 25 - Suffix
32 - Date Of Birth <b>07/30/1953</b>	33 - Sex <b>MALE</b>		
26 - Address Street & Number <b>328 N WATER</b>			26 - PO Box
27 - City <b>COLUMBUS</b>	27 - State <b>WI</b>	27 - Zip Code <b>53925</b>	28 - Telephone Number <b>(000) 000-0000 EXT.</b>
39 - Seat Position <b>FRONT-SEAT-LEFT-SIDE-(MC/BIKE DRIVER, TRAIN CONDUCTOR)</b>		40 - Safety Equipment <b>SHOULDER-BELT-AND-LAP-BELT-USED</b>	
38 - Injury Severity <b>C - POSSIBLE INJURY</b>	41 - Airbag <b>NON-DEPLOYED</b>	42 - Ejected <b>NOT-EJECTED</b>	44 <input type="checkbox"/> Medical Transport
43 - Trapped/Extricated <b>NOT-TRAPPED</b>	92 - Pedestrian Location	92 - Pedestrian Action	
119 - What Driver Was Doing <b>GOING-STRAIGHT</b>		120 - Traffic Control <b>NO-CONTROL</b>	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 <b>NOT-APPLICABLE</b>			
88 - Driver or Pedestrian Cond <b>APPEARED NORMAL</b>	89 - Substance Presence <b>NEITHER-ALCOHOL-NOR-DRUGS-PRESENT</b>		
90 - Alcohol Test <b>TEST NOT GIVEN</b>	90 - Alcohol Content	91 - Drug Test <b>TEST-NOT-GIVEN</b>	

PK2009

91 - Drugs Reported
124 - Highway Factors NOT-APPLICABLE

**Vehicle**

<b>VEHICLE 01</b>	21 - Unit Type <b>AUTOMOBILE</b>		Vehicle Type <b>PASSENGER-CAR</b>			22 - Total Occupants <b>2</b>
	56 - License Plate Number <b>140942</b>		57 - Plate Type <b>COL</b>	58 - State <b>WI</b>	59 - Exp Year	55 - Vehicle Identification Number <b>1G1AY878XC5115566</b>
	50 - Year <b>1982</b>	51 - Make <b>CHEV</b>	52 - Model <b>CORVETTE</b>	53 - Body Style <b>2D</b>	54 - Color <b>RED</b>	100 - Skidmarks to Impact (Ft)
	94 - Vehicle Damage <b>FRONT, FRONT DRIVER SIDE</b>					
	95 - Extent Of Damage <b>MODERATE</b>		96 <input type="checkbox"/> Vehicle Towed Due To Damage		97 - Vehicle Removed By <b>OPERATOR</b>	
	123 - Vehicle Factors <b>NOT-APPLICABLE</b>					

**Vehicle Owner**

<b>VEH OWNER 01</b>	45 <input checked="" type="checkbox"/> Vehicle Owner Same As Operator				
	46 - Vehicle Owner Last Name <b>BALLWEG</b>		46 - First Name <b>DENNIS</b>		46 - Middle Initial <b>G</b>
	46 - Company Name		46 - Suffix		Date Of Birth <b>07/30/1953</b>
	47 - Address Street & Number <b>328 N WATER</b>			47 - PO Box	
	48 - City <b>COLUMBUS</b>		48 - State <b>WI</b>	48 - Zip Code <b>53925</b>	49 - Telephone Number <b>(000) 000-0000 EXT.</b>

**Insurance**

<b>INS 01</b>	63 - Liability Insurance Company <b>AMERICAN-FAMILY</b>		60 <input checked="" type="checkbox"/> Policy Holder Same As Owner		
	61 - Policy Holder Last Name <b>BALLWEG</b>		61 - Policy Holder First Name <b>DENNIS</b>		
	61 - Policy Holder Company				

**School Bus**

<b>BUS 01</b>	Bus Travelling to/from <input type="radio"/> To <input type="radio"/> From	School Name	Body Make	Seating Capacity
	School District Contracted With			

**Occupant**

<b>01</b>	<input type="checkbox"/> Address Same As Operator				
	65 - Unit No <b>01</b>	66 - Occupant Last Name <b>BALLWEG</b>		66 - First Name <b>CATHY</b>	66 - Middle Initial <b>A</b>
	68 - Address Street & Number <b>328 N WATER</b>			68 - PO Box	

PK2009

<b>OCCUPANT</b>	68 - City <b>COLUMBUS</b>	68 - State <b>WI</b>	68 - Zip Code <b>53925</b>	
	67 - Date of Birth <b>04/16/1956</b>	69 - Sex <b>FEMALE</b>		
	71 - Seat Position <b>FRONT-SEAT-RIGHT-SIDE-(TRAIN ENGINEER)</b>		72 - Safety Equipment <b>SHOULDER-BELT-AND-LAP-BELT-USED</b>	
	70 - Injury Severity <b>N - NO APPARENT INJURY</b>	73 - Airbag <b>NON-DEPLOYED</b>	75 - Ejected <b>NOT-EJECTED</b>	77 <input type="checkbox"/> <b>Medical Transport</b>
	76 - Trapped/Extricated <b>NOT-TRAPPED</b>	78 - Agency Space		

**Diagram and Narrative**

<b>DIAGRAM AND NARRATIVE</b>	105 - PHOTOS BY
	<p style="text-align: center;">not to scale</p>
<p>UNIT 1 TRAVELING EAST ON CTY U, DEER RAN FROM THE DITCH LINE UNIT 1 UNABLE TO AVOID A COLLISION WITH DEER, DEER MADE CONTACT WITH FRONT BUMPER, HOOD, AND DRIVERS SIDE FENDER OF UNIT 1, DEER THEN SLIDE OVER WINDSHIELD, ROOF, AND REAR DECK LID, OPERATOR OF UNIT 1 COMPLAINED OF NECK PAIN, HOWEVER DENIED MEDICAL TREATMENT</p>	

**Officer Information**

<b>OFFICER INFORMATION</b>	125 - Officer Last Name <b>MATTHEWS</b>	125 - First Name <b>GARRETT</b>	125 - Middle Initial <b>C</b>	131 - Officer ID <b>9103</b>	
	129 - Law Enforcement Agency No. <b>5600</b>	130 - Law Enforcement Agency Name <b>SAUK COUNTY SHERIFF</b>			
	126 - Law Enforcement Agency Address Street & Number <b>1300 LANGE COURT</b>				
	127 - City <b>BARABOO</b>	127 - State <b>WI</b>	127 - Zip Code <b>53913</b>	128 - Telephone Number <b>(608) 356-4895 EXT.</b>	
	132 - Date Notified <b>04/17/2010</b>	133 - Time Notified (Military Time) <b>2045</b>	134 - Time Arrived (Military Time) <b>2055</b>	135 - Date Of Report <b>04/17/2010</b>	
	Agency Accident Number	Police Number <b>10-04138</b>	19 - Special Study		
	18 - Agency Space <b>10-04138</b>				