

216020603
99409

State of Nebraska Investigator's Motor Vehicle Accident Report

Sheet 1 of 3

1	Total Number of Vehicles	Local No./ District 180	Agency Case No. B6-043838	HIT & RUN? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	INVESTIGATION MADE AT SCENE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	L 1
A/1 01	DATE OF ACCIDENT	M M / D D / Y Y Y Y 05/19/2016		(In Military Time) TIME OF ACCIDENT 1500		STATE USE ONLY Amended 06/10/2016
A/2	PLACE OF ACCIDENT	COUNTY Lancaster	CITY Lincoln	POLICE NOTIFIED 1701	PRIVATE PROPERTY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
B 65	ROAD ON WHICH ACCIDENT OCCURRED	STREET/ HIGHWAY NO. S 56th / Elkcrest Dr		ONE-WAY STREET? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	LATITUDE	
C 1	DISTANCE FROM MILEPOST	FEET	N S E W OF MILEPOST	HIGHWAY NO.	LONGITUDE	
D 1	IF AT INTERSECTION			IF NOT AT INTERSECTION		
	NAME OF INTERSECTING ROADWAY S 56th / Elkcrest Dr			OF NEAREST STREET, BRIDGE, RAILROAD CROSSING		
V1/M 14	IF ACCIDENT WAS OUTSIDE CITY LIMITS, INDICATE DISTANCE FROM NEAREST TOWN					
V2/M	MILES	N S E W	AND MILES	N S E W	OF NEAREST CITY OR TOWN	
E 1	R. WORK ZONE CODES	R1 R2 R3 R4	S. PEDESTRIAN CLASSIFICATION CODES	S1 S2 S3 S4 S5-a S5-b S6-a S6-b	DOES ACCIDENT INVOLVE DAMAGE TO STATE DEPT. OF ROADS' PROPERTY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
	1		01 2 1 1 10			
VEHICLE NO. 1						
F 1	DRIVER LICENSE NO.	K02-66-2407		STATE (Of License)	KS	SEX <input type="checkbox"/> FEMALE <input checked="" type="checkbox"/> MALE
V1/N 2	DRIVER	Charles R Elder		PHONE	7855561196	
V2/N	DRIVER ADDRESS	1300 14th St, Wamego, KS 66547		DATE OF BIRTH (MM / DD / YYYY)	04/11/1943	
G 6	OWNER	MICHAEL BILLINGS / Sara K Billinas		PHONE	7853072546	
V1/O 1	OWNER ADDRESS	6820 Bernese Blvd, Lincoln, NE 68516		CITATION <input checked="" type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO	CITATION NO. LB507574	
H 4	LICENSE PLATE NO.	TJZ763		YEAR (Plate Expires)	2017	STATE (Of Plate) NE
V1/O 1	VEHICLE	2013	Chevrolet	3500	Full size van	white
V2/O	VEHICLE ID NO. (VIN)	1GAZG1FA7D1146221		INSURANCE COMPANY	USAA	
I 6	TOWED TO			TOWED BY		
V1/O 1	POLICY NO.	015676182U 7103 7				
VEHICLE NO. 2						
J 01	DRIVER LICENSE NO.			STATE (Of License)		SEX <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE
V1/P 1	DRIVER			PHONE		
V2/P	DRIVER ADDRESS			DATE OF BIRTH (MM / DD / YYYY)		
K 02	OWNER			PHONE		
V1/Q 4	OWNER ADDRESS			CITATION <input type="checkbox"/> YES <input type="checkbox"/> PENDING <input type="checkbox"/> NO	CITATION NO.	
V2/Q	LICENSE PLATE NO.			YEAR (Plate Expires)		STATE (Of Plate)
V1/O 1	VEHICLE					ESTIMATED DAMAGE <input type="checkbox"/> TOTALED \$
V2/O	VEHICLE ID NO. (VIN)			INSURANCE COMPANY		
L 0	TOWED TO			TOWED BY		
M 0	POLICY NO.					

Complete this section for all injured persons (Complete a continuation report, if more than three were injured)						DATE OF BIRTH (MM / DD / YYYY)		1	2	3	4	5	SEX	
VEH. #	NAME	ADDRESS						Seat Position	Eject	Body Region	Injury Sev.	Trans.	M	F
0	Joey Klutz	6840 La Salle, Lincoln, NE 68516			05/22/2006	19		10	3	1			M	
		LOCAL NO.	MEDICAL FACILITY NAME	EMS SERVICE NAME	EMS RUN REPORT NO.									
		4023288676												
VEH. #	NAME	ADDRESS												
		LOCAL NO.	MEDICAL FACILITY NAME	EMS SERVICE NAME	EMS RUN REPORT NO.									
VEH. #	NAME	ADDRESS												
		LOCAL NO.	MEDICAL FACILITY NAME	EMS SERVICE NAME	EMS RUN REPORT NO.									

THE FOLLOWING INFORMATION IS REQUIRED FOR ALL ACCIDENTS

INDICATE BY DIAGRAM WHAT HAPPENED

AGENCY CASE NO.
B6-043838

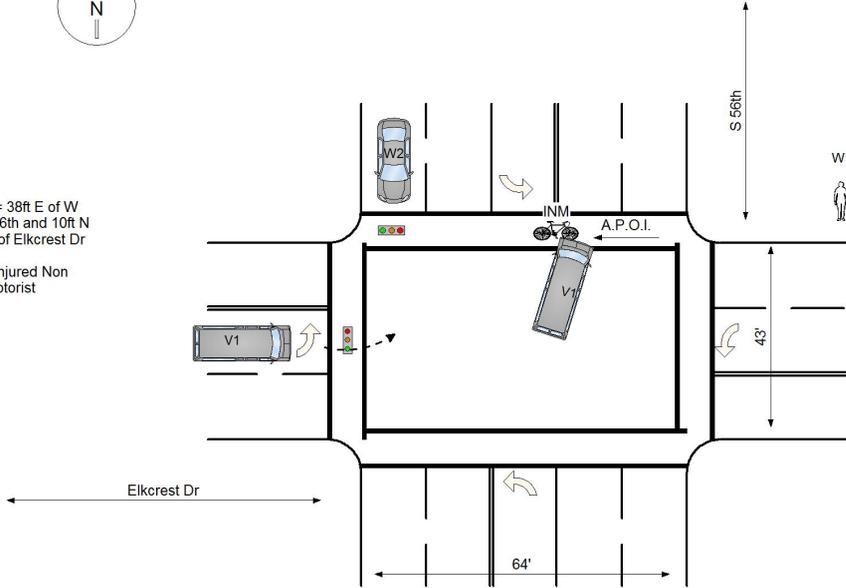


Indicate North by Arrow



A.P.O.I. = 38ft E of W curb of S 56th and 10ft N of N curb of Elkcrest Dr

INM = Injured Non Motorist



Not To Scale

DESCRIPTION OF ACCIDENT BASED ON OFFICER'S INVESTIGATION

D1 stated he was traveling EB on Elkcrest Dr and was waiting at the light at the intersection of S 56th and Elkcrest Dr. D1 stated he was preparing to turn NB onto S 56th and began to do so when his light turned green. D1 stated he checked the crosswalk signal which had a red hand up, so he proceeded to turn. D1 said INM ran into the side of his front left tire. D1 stated he saw INM fall to the ground, but that he got up and finished walking across the street. D1 stated he thought INM was fine so he left the area as he had grandkids he needed to pick up from school. INM stated he was riding his bicycle EB in the crosswalk at the intersection of S 56th and Elkcrest Dr, when about halfway through he was struck by the front of V1. INM stated D1 yelled something at him and then drove off. W1 stated she was standing in her driveway at the NE corner of the intersection at S 56th and Elkcrest Dr. W1 stated she always waits outside and watches ...

PROPERTY	OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE
	Dark Gray TREK 82	Joey Klutz	6840 La Salle, Lincoln, NE 68516	4023288676	\$ 5
WITNESSES	NAME	ADDRESS	PHONE		
	Nicole Fruh	4940 S 56th, Lincoln, NE 68516	4028050100		
	NAME	ADDRESS	PHONE		
	Katherine Rathe	5326 S 78th, Lincoln, NE 68516	4023104520		

VEHICLE MOVEMENT BEFORE COLLISION		POINT OF IMPACT AND MOST DAMAGED AREA <i>(Enter numbers for each vehicle)</i>		AIRBAG DEPLOYED VEHICLE 1	RESTRAINT USE VEHICLE 1	TOTAL OCCUPANTS	VEH 1	4	VEH 2
VEH NO.	N S E W	ROAD OR HIGHWAY NAME	VEHICLE 1	VEHICLE 2					
1		X Elkcrest Dr	POINT OF IMPACT	01					
2			MOST DAMAGED AREA	01					
1	06	06 Turning left							
2		07 Making U-turn							
		08 Entering traffic lane							
		09 Leaving traffic lane							
		10 Parked							
		11 Slowing or stopped in traffic							
		12 Other							
		13 Unknown							
01		Essentially straight ahead	00 None						
02		Backing	09 Top & windows						
03		Changing lanes	10 Undercarriage						
04		Overtaking/ Passing	11 Total (all areas)						
05		Turning right	12 Other						
			02	03	04				
			01		05				
			08	07	06				
OFFICER NO.	TROOP/TEAM/BEAT	DEPARTMENT							
1770	NE	Lincoln Police Department							Photographs <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
INVESTIGATOR NAME (Print or Type)			INVESTIGATOR SIGNATURE			DATE OF REPORT			
Alex Stahl			Approved by Officer Alex Stahl			06/10/2016			

216020603
99409

State of Nebraska
Investigator's Motor Vehicle Accident Description Continuation Report Sheet 3 of 3

Local No./ District 180	Agency Case No. B6-043838	STATE USE ONLY
----------------------------	------------------------------	----------------

DATE OF ACCIDENT (MM / DD / YYYY) 05/19/2016	PLACE OF ACCIDENT CITY Lincoln	COUNTY Lancaster	Amended
---	--------------------------------------	---------------------	---------

ROAD ON WHICH ACCIDENT OCCURRED	STREET/HIGHWAY NO.
---------------------------------	--------------------

S 56th / Elkcrest Dr

the crosswalk where her kids cross the street. W1 stated she sees accidents occur there frequently. W1 stated she saw V1 strike the front tire of INMs bicycle with the front of his vehicle. W1 stated this 'Sent the kid flying, and he limped the rest of the way across the street.' W1 stated V1 then left the scene, heading NB on S 56th. W2 stated she was waiting in the outside lane of S 56th heading SB, and was waiting at the red light. W2 stated she saw INM start crossing the street and V1 turning NB at the same time. W2 stated she honked her horn multiple times as she realized neither INM or V1 were paying attention. W2 stated that this had no effect and she witnessed V1 hit the front of INMs bike. W2 stated she heard D1 yell, 'I have the right of way, you should have stopped!' W2 then saw V1 leave the scene. INM had a minor scrape on his right knee from the collision.

OFFICER NO. 1770	TROOP/ TEAM/ BEAT NE	DEPARTMENT Lincoln Police Department
---------------------	-------------------------	---

INVESTIGATOR NAME (Print or Type) Alex Stahl	INVESTIGATOR SIGNATURE Approved by Officer Alex Stahl	DATE OF ACCIDENT 06/10/2016
---	--	--------------------------------