216020684
99566

State of Nebraska

Investigator's Motor Vehicle Accident Report

Sheet 1 of 2

2 Total Number of Vehicles	Local No./ District: 184	Agency Case No.: B6-044537	HIT & RUN? ( ) YES (X) NO	INVESTIGATION MADE AT SCENE? (X) YES ( ) NO	L 1

A/1 01	DATE OF ACCIDENT: M M / D D / Y Y Y Y: 05/21/2016	S M T W TH F S: [ ] [ ] [ ] [ ] [ ] [ ] [X]	TIME OF ACCIDENT (In Military Time): 1518	STATE USE ONLY
A/2	PLACE OF ACCIDENT: COUNTY: Lancaster		POLICE NOTIFIED: 1518	05/22/2016
B 71	CITY: Lincoln		PRIVATE PROPERTY? YES ( ) NO (X)	LATITUDE
C 1	ROAD ON WHICH ACCIDENT OCCURRED: STREET/ HIGHWAY NO.: NEBRASKA HIGHWAY 2		ONE-WAY STREET? YES ( ) NO (X)	
D 1	DISTANCE FROM MILEPOST: FEET	N S E W	OF MILEPOST	HIGHWAY NO.: 2	LONGITUDE

IF AT INTERSECTION	IF NOT AT INTERSECTION					
NAME OF INTERSECTING ROADWAY	(X) FEET ( ) MILES	N	S	E	W	OF NEAREST STREET, BRIDGE, RAILROAD CROSSING
	75.00				X	APPLE'S WAY

IF ACCIDENT WAS OUTSIDE CITY LIMITS, INDICATE DISTANCE FROM NEAREST TOWN									
MILES	N	S	E	W	AND MILES	N	S	E	W	OF NEAREST CITY OR TOWN

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?
E 2	3	2	1	2										( ) YES (X) NO

VEHICLE NO. 1

F 1	DRIVER LICENSE NO.: G02158770	STATE (Of License): NE	SEX: (X) FEMALE ( ) MALE		
V1/N 1	DRIVER: MARILYN R SCHLAKE	PHONE: 402-520-2762	LOCAL NO.		
V2/N 1	DRIVER ADDRESS: 217 W BIRCH RD, CORTLAND, NE 68331	CITY, STATE, ZIP	DATE OF BIRTH (MM / DD / YYYY): 01/24/1962		V1/1 18
G 4	OWNER: MARILYN R SCHLAKE	PHONE: 402-520-2762	LOCAL NO.		V1/2
H 2	OWNER ADDRESS: 217 W BIRCH RD, CORTLAND, NE 68331	CITY, STATE, ZIP	CITATION: ( ) YES ( ) PENDING (X) NO	CITATION NO.	V1/3
V1/O 1	LICENSE PLATE: PA NO.: 3B7445	YEAR (Plate Expires): 2017	STATE (Of Plate): NE		V1/4
V2/O 1	VEHICLE: YEAR 2010 / MAKE Buick / MODEL LACROSSE / BODY STYLE 4 door Sedan	COLOR: tan	ESTIMATED DAMAGE: ( ) TOTALED $ 500		V1/5 18
	VEHICLE ID NO. (VIN): 1G4GC5GG5AF316252	INSURANCE COMPANY: FARM BUREAU			V1/6 55
	TOWED TO	TOWED BY	POLICY NO.: 7403398		

VEHICLE NO. 2

I 1	DRIVER LICENSE NO.: H13598124	STATE (Of License): NE	SEX: ( ) FEMALE (X) MALE		
V1/P 1	DRIVER: FISCHER G HART	PHONE: 402-209-7015	LOCAL NO.		
V2/P 1	DRIVER ADDRESS: 9009 TRUCHARD RD, LINCOLN, NE 68526	CITY, STATE, ZIP	DATE OF BIRTH (MM / DD / YYYY): 11/06/1996		V2/1 18
J 01	OWNER: TIMOTHY J HART (05-04-1961)	PHONE: 402-484-7363	LOCAL NO.		V2/2
V1/Q 4	OWNER ADDRESS: 5521 SHERMAN ST, LINCOLN, NE 68506	CITY, STATE, ZIP	CITATION: (X) YES ( ) PENDING ( ) NO	CITATION NO.: LB503869	V2/3
V2/Q 4	LICENSE PLATE: PA NO.: TSB541	YEAR (Plate Expires): 2015	STATE (Of Plate): NE		V2/4
K 01	VEHICLE: YEAR 2002 / MAKE Mazda / MODEL TRIBUTE / BODY STYLE Compact Utility	COLOR: black	ESTIMATED DAMAGE: ( ) TOTALED $ 200		V2/5 18
	VEHICLE ID NO. (VIN): 4F2YU09192KM61546	INSURANCE COMPANY: OWNERS INS CO			V2/6 55
	TOWED TO	TOWED BY	POLICY NO.: 4425271800		

Complete this section for all injured persons

(Complete a continuation report, if more than three were injured)

VEH. #	NAME	ADDRESS	DATE OF BIRTH (MM / DD / YYYY)	1 Seat Position	2 Eject	3 Body Region	4 Injury Sev.	5 Trans.	SEX M F
	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.					
VEH. #	NAME	ADDRESS							
	LOCAL NO.	MEDICAL FACILITY NAME	EMS SERVICE NAME	EMS RUN REPORT NO.					

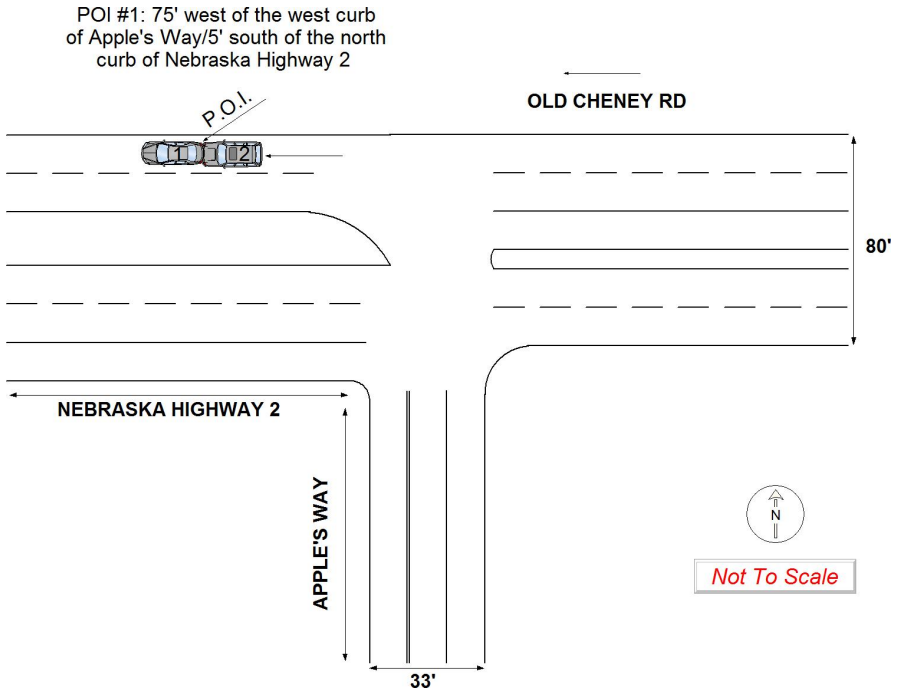
THIS FORM REPLACES DR FORM 40, JAN 02
PREVIOUS EDITIONS WILL BE DESTROYED.

THE FOLLOWING INFORMATION IS REQUIRED FOR ALL ACCIDENTS

INDICATE BY DIAGRAM WHAT HAPPENED

AGENCY CASE NO. B6-044537

Indicate North by Arrow



DESCRIPTION OF ACCIDENT BASED ON OFFICER'S INVESTIGATION

Vehicle #1 was traveling westbound on Nebraska Highway 2, Apple's Way - Old Cheney Road, in the outside lane of traffic, and was stopped for traffic, when it was struck from behind by vehicle #2. Driver #1 stated, "I was stopped and he hit me from behind." Vehicle #2 was traveling westbound on Nebraska Highway 2, Apple's Way - Old Cheney Road, in the outside lane of traffic, and was stopping for traffic when it failed to stop and struck vehicle #1 from behind. Driver #2 stated, "I looked down for a second and didn't stop in time."

PROPERTY

OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE
				$
OBJECT DAMAGED	OWNER NAME	ADDRESS	PHONE	APPROX. COST OF DAMAGE
				$

WITNESSES

NAME	ADDRESS	PHONE
NAME	ADDRESS	PHONE

VEHICLE MOVEMENT BEFORE COLLISION

VEH NO.	N	S	E	W	ROAD OR HIGHWAY NAME
1				X	NEBRASKA HI
2				X	NEBRASKA H

1	11
2	11

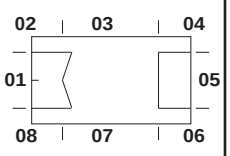
01 Essentially straight ahead
02 Backing
03 Changing lanes
04 Overtaking/ Passing
05 Turning right
06 Turning left
07 Making U-turn
08 Entering traffic lane
09 Leaving traffic lane
10 Parked
11 Slowing or stopped in traffic
12 Other
13 Unknown

POINT OF IMPACT AND MOST DAMAGED AREA

(Enter numbers for each vehicle)

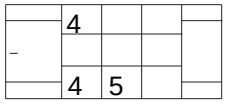
	VEHICLE 1	VEHICLE 2
POINT OF IMPACT	05	01
MOST DAMAGED AREA	05	01

00 None
09 Top & windows
10 Undercarriage
11 Total (all areas)
12 Other



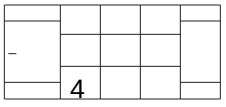
AIRBAG DEPLOYED

VEHICLE 1



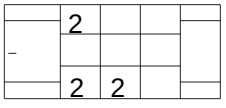
1 Deployed - front
2 Deployed - side
3 Deployed - both front/side
4 Not deployed
5 Not applicable/ No airbag available
6 Unknown

VEHICLE 2



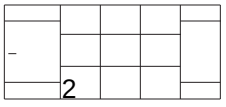
RESTRAINT USE

VEHICLE 1



1 None used - vehicle occupant
2 Lap & shoulder belt used
3 Shoulder belt only used
4 Lap belt only used
5 Child safety seat used
6 Child booster seat used
7 DOT approved helmet used
8 Costume helmet used
9 Restraint use unknown

VEHICLE 2



TOTAL OCCUPANTS	VEH 1	3	VEH 2	1

ALCOHOL TESTING	Driver No. 1		Driver No. 2		Pedes-trian	
ALCOHOL LEVEL TESTED	Y		Y		Y	
	N	X	N	X	N	
BAC LEVEL						

ALCOHOL/ DRUGS SUSPECTED	Driver No. 1	Driver No. 2
	1	1

1 Neither alcohol nor drugs suspected
2 Yes - alcohol suspected
3 Yes - drugs suspected
4 Yes - alcohol & drugs suspected
5 Unknown

OFFICER NO.	TROOP/ TEAM/ BEAT	DEPARTMENT	Photographs taken?
1513	5	Lincoln Police Department	YES / X NO

INVESTIGATOR NAME *(Print or Type)*	INVESTIGATOR SIGNATURE	DATE OF REPORT
Curtis Wolbert	Approved by Officer Curtis Wolbert	05/22/2016