

HIT & RUN #2930

Madison Police Department DRIVER INFORMATION EXCHANGE ACCIDENT FORM

CASE #
06-14292

- IMPORTANT INSTRUCTIONS ON REVERSE SIDE -

06-142192

ACCIDENT LOCATION 1434 Northport DR (POA)	ACCIDENT DATE 11/26/06	Month Day Year Sun 2:35	Day of Week Sun	Time 2:35	<input checked="" type="checkbox"/> AM <input type="checkbox"/> PM
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Driver Full Name (Last, First, MI) Carthans Christopher	Address 326 Swenden #2	City & State Madison WI	Zip Code 53704
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Driver License Number	State	Birthdate	Sex M	Phone Number 290-0508	Work Phone
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Owner Full Name (Last, First, MI)	Address	City & State	Zip Code
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License Plate or VIN	Year	State	Vehicle Make/Model Buick Lesabre	Year	Color Maroon	Insurance
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Driver Full Name (Last, First, MI) Legally Parked	Address	City & State	Zip Code
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Driver License Number	State	Birthdate	Sex	Phone Number 446-3927	Work Phone
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Owner Full Name (Last, First, MI) Bingham Jonathan D	Address 1710 Delaware DR	City & State Sun Prairie	Zip Code 53590
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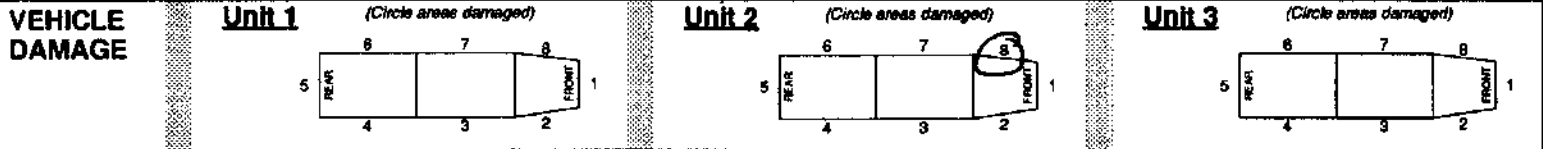
License Plate or VIN THAI BXR	Year 07	State WI	Vehicle Make/Model Kia Sedona	Year 06	Color Blue	Insurance Victorri ins
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Driver Full Name (Last, First, MI)	Address	City & State	Zip Code
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Driver License Number	State	Birthdate	Sex	Phone Number	Work Phone
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Owner Full Name (Last, First, MI)	Address	City & State	Zip Code
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License Plate or VIN	Year	State	Vehicle Make/Model	Year	Color	Insurance
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OTHER PROPERTY DAMAGE

Property Owner Full Name (Last, First, MI)	Address, City, State & Zip Code	Phone Number	HM
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WITNESS Full Name (Last, First, MI)	Address, City, State & Zip Code	Phone Number	HM
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WITNESS Full Name (Last, First, MI)	Address, City, State & Zip Code	Phone Number	HM
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MANNER OF COLLISION	1 Head on	2 Rear End	3 Side Swipe	4 Side Swipe	5 Off Rd Left	WHAT DRIVERS WERE DOING	Unit 1	CITATIONS
							1. Going straight ahead 2. Making left turn 3. Making right turn 4. Slowing or stopping 5. Stopped in traffic 6. Legally parked 7. Illegally parked 8. Parking maneuver	
	6 Off Rd Right	7 Angle	8 Left Turn	9 Other		9. Backing in roadway 10. Changing lanes 11. Overtaking on left 12. Overtaking on right 13. Making U-Turn 14. Turning on red 15. Merging 16. Other	<input type="checkbox"/>	Unit 2 - Statute
							<input type="checkbox"/>	Unit 3 - Statute

NARRATIVE Owner veh 2 observed driver of veh 1, a male Black 20-25, SOB 150-160 lbs. Richard JKT, back his veh a Maroon Buick Lesabre 4DR away from the POA street and while still in the lot he backed into veh 2. Veh 2 sustains a dent to the driver door area. Driver of veh 1 verbally ID'd himself to the owner veh 2 (the store clerk) as Christopher Carthans. Owner veh 2 did not get the plate on veh 1. After driver veh 1 ID'd self & stated he had no insurance but would pay for damage driver veh 1 left.

WHITE - Records Bureau
YELLOW - Driver
PINK - Driver
GOLDENROD - Driver
REVERSE SIDE

OFFICER (Print) PO D. FREI	EMPLOYEE # 2705	DISTRICT North
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MADISON POLICE DEPARTMENT POLICY

The Madison Police Department will investigate and report to the State of Wisconsin Department of Transportation any accident where the officer determines at the scene that there is death, injury to any person, or damage to property, owned by any one person, which exceeds \$1,000 (\$200 of government owned property). You received this form because the officer determined there was no injury and estimated the property damage to any one person at less than \$1,000.

YOUR RESPONSIBILITY:

This report has been completed to provide you with information about the other driver. A copy will be kept in our Department's record section. This form does not fulfill your responsibility to report this accident to the Department of Transportation if you determine that there is:

Injury to a driver, passenger or pedestrian

OR

Damage to property, owned by any one person, which exceeds \$1,000.

If your accident meets either of the above criteria, **YOU** are required to complete a Wisconsin Driver Report of Accident. This report is available at any Department of Transportation office or local police station. The completed Wisconsin Driver Report of Accident should be mailed to:

Department of Transportation
Traffic Accident Section
P.O. Box 7919
Madison, WI 53707-7919