



Wisconsin Department of Public Instruction
SCHOOL BUS ACCIDENT REPORT
s. 121.53(6)
PI-3110 (Rev.12-11)

INSTRUCTIONS: Complete both sides and return to appropriate school board.

Section 121.53(6) of the Wisconsin Statutes reads as follows: "Within 10 days after its occurrence, **every** accident involving a motor vehicle providing transportation under this subchapter shall be reported to the appropriate school board."

GENERAL INFORMATION

School: DC Everest Senior High and Junior High	School District: DC Everest School District	School Code: 4970
Bus Owner: Lamers Bus Lines	Address of Owner, <i>Street, City, State, Zip</i> : 3805 Concord Ave, Weston WI 54776	
Chassis Make: Blue Bird	Model Year: 2017	Body Make: Conventional propane Student Capacity: 77

DRIVER INFORMATION

Name of Driver: Paul Dewitt	Sex X Male Female	Age: 68	Years of Experience as Bus Driver: 1 Year 2 Months
Has your driver had the recommended training in first aid? Yes: X No:	When did driver last attend a state-sponsored bus driver training session? NA		

ACCIDENT DESCRIPTION

Date of Accident: 12/19/2024	Time: 7:10 am	Location of Accident: County Rd J and Hwy 29 near Westbound on ramp in Weston
Weather Conditions: Cloudy/Icy		Type of Road and General Conditions – Straight, Paved, Wet, Snow, ice, slush
Speed of Bus: 0 MPH	Speed of Other Vehicle(s): Exact speed unknown	Was a Citation Issued? No: X Yes <i>If yes, to whom?</i>

If no citation was issued, who, in your opinion, was responsible for the accident and why? Driver of other vehicle was following too close for conditions.

If driver was not legally responsible, could she/he have prevented the accident by driving defensively? Explain – Driver could not have prevented this accident by driving defensively. Driver did everything possible to avoid collision.

Describe the cause and results of the accident in detail. *Itemize injuries and property damage on reverse:* Both vehicles were traveling southbound on County Highway J near State Highway 29 Westbound on-ramp. The school bus stopped for traffic on County Highway J. The other vehicle did not have time to stop due to the icy roads and struck the school bus.

Were there students in the bus at the time of the accident? <input type="checkbox"/> No—If no, skip next two questions <input checked="" type="checkbox"/> Yes—If yes, complete all questions		How did students exit? Check all that apply. Front Door <input checked="" type="checkbox"/> Rear Door <input type="checkbox"/> Windows <input type="checkbox"/> Didn't Exit: <input checked="" type="checkbox"/> <input type="checkbox"/> Other _____	
Had the riders been instructed and drilled in bus evacuation/emergency exits? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Was a fire extinguisher used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Was a first aid kit used? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

INJURIES/FATALITIES

Names of Students Injured	Nature of Injuries
No injuries reported at time of crash	
Later reports of injuries to schools were:	
Student One	Sore back
Student Two	Wrist hurt him
Student Three	Sore neck
Names of Other People Injured	Nature of Injuries
NA	NA

PROPERTY DAMAGE

Describe Damage to School Bus: Scratches on rear at contact point.	Estimated Repair Cost \$0
Describe Damage to Property of Others: the other vehicle had front end damage and hood damage	Estimated Repair Cost \$ Unknown at this

RECOMMENDATIONS

As a result of this accident, what suggestions do you have to offer for the improvement of the following?

Bus Safety Regulations or Laws

School Bus Standards

Bus Driver Training:

CERTIFICATION

If an accident results in injury to or death of any person or total property damage to an apparent extent of \$200 or more, a report must also be filed with the local or state enforcement officer [Wisconsin Statute 346.70(1)] and the Department of Transportation [Wisconsin Statute 346.70(2)].

I CERTIFY that this accident has been reported to the local or state enforcement officer and to the Department of Transportation, if required by law.

Name of Persons Completing Form: Wendi DeMars

Position: Weston Location Manager

Signature

Wendi DeMars

Date Signed Mo./Day/Yr.

12/22/25