

6TL0BGSFGJ  
21-10581

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMENT  
1300 LANGE COURT  
BARABOO, WI 53913  
(608) 356-4895

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Document Number Override		Primary Crash Document#		Agency Crash Number 21-10581		Investigating Officer/Deputy <b>DEPUTY D. KROLIKOWSKI</b>	
Crash Date 11/03/2021		Crash Time 03:52 PM		Date Arrived 11/03/2021		Time Arrived 03:52 PM	
Date Notified 11/03/2021		Time Notified 03:52 PM		Total Units 02		Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone		<input type="checkbox"/> Trailer or Towed	<input type="checkbox"/> Reporting Threshold	
<input type="checkbox"/> Government Property		<input type="checkbox"/> Active School Zone		School Bus Related NO		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

Description

Diagram		Reconstruction By
		Photos By
		Additional Information NONE
<input checked="" type="checkbox"/> I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.		
UNIT 2 WAS TRAVELING WEST BOUND THROUGH THE INTERSECTION OF HWY136 AND W PINE ST WHILE IT'S TRAFFIC LIGHT WAS GREEN WHEN UNIT 1, WHICH HAD BEEN TRAVELING EAST BOUND, FAILED TO YIELD AND TURNED LEFT IN FRONT OF UNIT 2. UNIT 2 COULD NOT STOP IN TIME AND COLLIDED WITH UNIT 1.		

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Location

ON CTHBD NB 13 FT N OF STH33 WB IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY	Latitude 43.474838301	Longitude -89.768831648
	X Coordinate 276057.96875	Y Coordinate 4817271.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s)  NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLEAR		
Animal Type	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control FULL CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION

Unit Summary

UNIT 01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE		
	Vehicle Type PASSENGER CAR	Operating As Endorsements			
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 25	Total Lanes 4
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT	Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE		
	Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER	Traffic Control TRAFFIC SIGNAL	Traffic Control Inoperative/Missing NO		
	Surface Type CONCRETE	Road Curvature STRAIGHT	Road Grade LEVEL		
	Truck Bus or HazMat NO				

Vehicle

UNIT VEHICLE 01 01	License Plate Number 432UDV	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1FAHP3K23CL353470	Make FORD	Year 2012	Model FOCUS
	Color SIL - SILVER (ALUMINUM)	Body Style HB - HATCHBACK	Bus Use	
	Initial Contact Point 04 - RIGHT SIDE REAR	Vehicle Damage 04 - RIGHT SIDE REAR		
Extent Of Damage DISABLING DAMAGE				



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UNIT VEHICLE	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>MIKES TOWING</b>	
	What Driver Was Doing <b>LEFT TURN</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>FAILED TO YIELD RIGHT-OF-WAY</b>			
01	Owner Name <b>PATRICIA J SEFKAR</b>		Owner Address <b>220 5TH AVE BARABOO, WI 53913 , US</b>	
	<b>Sequence Of Events</b>			
01	01	Event <b>MOTOR VEH IN TRANSPORT</b>		
	02	Event		
	03	Event		
	04	Event		
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>WADENA-INSURANCE-CO</b>		Individual <b>PATRICIA SEFKAR</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>PATRICIA J SEFKAR</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>
	Address <b>220 5TH AVE BARABOO, WI 53913 , US</b>		Date of Birth [REDACTED]	Race <b>WHITE</b>
			Driver License Number [REDACTED]	STATE: WISCONSIN COUNTRY: UNITED STATES
01	<b>Safety Equipment</b>		On Duty Crash	
	Row <b>01 - FRONT ROW</b>		Seat Position <b>07 - LEFT</b>	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
	Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #	
Hospital		Date of Death	Time of Death	
<b>Distracted By</b>		Distracted By Source <b>UNKNOWN</b>		
Distracted By Action <b>UNKNOWN</b>				

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UNIT INDIVIDUAL          01 001	<b>Non Motorist</b>		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other			To/From School	
	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use NO	Suspected Drug Use NO	
	Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type	Alcohol Test Results	
	Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type	Drug Test Results	
	Drug Type				
	Individual Condition <b>APPEARED NORMAL</b>				

**Unit Summary**

UNIT 02	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>	
	Vehicle Type <b>PASSENGER CAR</b>				Operating As Endorsements	
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>YES</b>	Direction Of Travel <b>WESTBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>25</b>	Total Lanes <b>4</b>	
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>DIVIDED HWY W/O TRAFFIC BARRIER</b>		Traffic Control <b>TRAFFIC SIGNAL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>CONCRETE</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>					

UNIT VEHICLE 02 02	<b>Vehicle</b>																		
	License Plate Number <b>476ZPK</b>		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>														
	Vehicle Identification Number <b>4S4BRCLC7E3202910</b>		Make <b>SUBARU</b>	Year <b>2014</b>	Model <b>OUTBACK 2.</b>														
	Color <b>SIL - SILVER (ALUMINUM)</b>		Body Style <b>SW - STATIONWAGON</b>		Bus Use														
	Initial Contact Point <b>01 - RIGHT FRONT CORNER</b>		Vehicle Damage <b>01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT</b>																
	Extent Of Damage <b>DISABLING DAMAGE</b>		<table border="1" style="border-collapse: collapse; text-align: center;"> <tr> <td>7</td><td>8</td><td>9</td><td>10</td><td>11</td> </tr> <tr> <td>6</td><td></td><td></td><td></td><td>12</td> </tr> <tr> <td>5</td><td>4</td><td>3</td><td>2</td><td>1</td> </tr> </table>			7	8	9	10	11	6				12	5	4	3	2
7	8	9	10	11															
6				12															
5	4	3	2	1															
Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>EVERETTS TOWING</b>																	

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UNIT VEHICLE	What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors	
	Driver Prior Action Other	<b>NOT APPLICABLE</b>	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>		
	Owner Name <b>HEATHER MARIE GRABER</b>	Owner Address <b>E13009 STATE ROAD 78 MERRIMAC, WI 53561 , US</b>	
UNIT VEHICLE	<b>Sequence Of Events</b>		
	Event <b>MOTOR VEH IN TRANSPORT</b>		
	Event		
	Event		
UNIT VEHICLE	<b>Policy Holder</b>		
	Insurance Company <b>WISCONSIN-MUTUAL-INS-CO</b>	Individual <b>HEATHER GRABER</b>	
	<b>Individual</b>		
	Driver <b>HEATHER MARIE GRABER</b>	Citations Issued <b>0</b>	Sex <b>FEMALE</b>
UNIT INDIVIDUAL		Date of Birth [REDACTED]	Race <b>WHITE</b>
	Address <b>E13009 STATE ROAD 78 MERRIMAC, WI 53561 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
	<b>Safety Equipment</b>		
	On Duty Crash	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
UNIT INDIVIDUAL	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	UNIT INDIVIDUAL	<b>Injury</b>	
Injury Severity <b>NO APPARENT INJURY</b>		<b>NON DEPLOYED</b>	
Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #
UNIT INDIVIDUAL	Hospital	Date of Death	Time of Death
	<b>Distracted By</b>		
	Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>		
	Distracted By Action <b>NOT DISTRACTED</b>		
UNIT INDIVIDUAL	<b>Non Motorist</b>		
	Striking Unit #	Location	

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UNIT           02           002	Prior Action		
	Action		
	Action Other		To/From School
	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
	Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results
	Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results
	Drug Type		
	Individual Condition  <b>APPEARED NORMAL</b>		