

6TL0B655SN  
21-11617

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 21-11617		Investigating Officer/Deputy DEPUTY W. NEUBAUER	
Crash Date 12/03/2021		Crash Time 05:16 PM		Date Arrived 12/03/2021		Time Arrived 05:34 PM	
Date Notified 12/03/2021		Time Notified 05:16 PM		Total Units 02		Total Injured 01	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	

I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

UNIT 2 WAS IN THE E/B LANE FACING E/B DUE TO CRASH THAT OCCURRED MINUTES PRIOR. THERE WAS A PEDESTRIAN AT THE DRIVERS SIDE DOOR OF UNIT 2 AT THE TIME OF CRASH. UNIT 1 WAS TRAVELING W/B IN THE W/B LANE AND DID NOT OBSERVE UNIT 2 DUE TO UNIT 2'S HEADLIGHTS BEING NON-FUNCTIONING. UNIT 1 OBSERVED UNINVOLVED TRUCK FROM PRIOR CRASH, STATIONARY IN THE W/B LANE AND ATTEMPTED TO AVOID COLLISION BY ENTERING E/B LANE. UNIT 1 STRUCK UNIT 2 HEAD-ON. THE PEDESTRIAN WAS STRUCK BY UNIT 2'S DOOR CAUSING HIM TO COME TO REST IN THE SOUTHSIDE DITCH. PEDESTRIAN SUSTAINED MINOR INJURIES AND WAS TRANSPORTED BY GROUND AMBULANCE TO SAUK PRAIRIE MEMORIAL HOSPITAL. UNIT 2 DRIVER SUSTAINED MINOR INJURIES TO FACE AND CONCUSSION.



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UNIT VEHICLE	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>GEORGES AUTO BODY</b>	
	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>			
01 01	Owner Name <b>DAWN MARIE REEVE (608) 544-2201</b>		Owner Address <b>S12603 DONALD RD SPRING GREEN, WI 53588 , US</b>	
	<b>Sequence Of Events</b>			
01 02 03 04	Event <b>MOTOR VEH IN TRANSPORT</b>			
	Event <b>PARKED MOTOR VEHICLE</b>			
	Event			
	Event			
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>PROGRESSIVE-CASUALTY-INS-CO</b>		Individual <b>DAWN REEVE</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>DAWN MARIE REEVE (608) 544-2201</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>
	Address <b>S12603 DONALD RD SPRING GREEN, WI 53588 , US</b>		Date of Birth [REDACTED]	Race <b>WHITE</b>
			Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01 001	<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>DEPLOYED-FRONT</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>NOT APPLICABLE (NOT DISTRACTED)</b>		
Distracted By Action <b>NOT DISTRACTED</b>				

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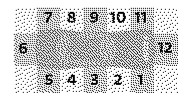
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UNIT INDIVIDUAL          01 001	<b>Non Motorist</b>		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other			To/From School	
	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use NO	Suspected Drug Use NO	
	Alcohol Test Given <b>TEST NOT 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>(SPORT) UTILITY VEHICLE</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>UNKNOWN</b>	Direction Of Travel <b>WESTBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>55</b>	Total Lanes <b>2</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>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</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>AJY2126</b>		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>1C4PJMLX3KD208817</b>		Make <b>JEEP</b>	Year <b>2019</b>	Model <b>CHEROKEE</b>
	Color <b>RED - RED</b>		Body Style <b>UT - SPORT UTILITY VEHICLE</b>		Bus Use
	Initial Contact Point <b>02 - RIGHT SIDE FRONT</b>		Vehicle Damage <b>01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT</b>		
	Extent Of Damage <b>DISABLING DAMAGE</b>		Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		



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UNIT	What Driver Was Doing <b>STOP IN TRAFFIC</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
VEHICLE	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
	Owner Name <b>ANGIE MARIE BOLAND (608) 412-4538</b>		Owner Address <b>17812 STATE HIGHWAY 27 GAYS MILLS, WI 54631 , US</b>	
02	02	<b>Sequence Of Events</b>		
UNIT	01	Event <b>MOTOR VEH IN TRANSPORT</b>		
	02	Event <b>PEDESTRIAN</b>		
	03	Event <b>DITCH</b>		
	04	Event		
INDIVIDUAL	<b>Individual</b>			
	Driver <b>DELANEY MARIE BOLAND (608) 412-4538</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>
INDIVIDUAL	Date of Birth [REDACTED]		Race <b>WHITE</b>	
	Address <b>17812 STATE HIGHWAY 27 GAYS MILLS, WI 54631 , US</b>		Driver License Number [REDACTED] <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
UNIT	<b>Safety Equipment</b>		On Duty Crash	
	Row <b>01 - FRONT ROW</b>		Seat Position <b>07 - LEFT</b>	
	Helmet Use		Safety Equipment <b>NONE USED - VEHICLE OCCUPANT</b>	
	Eye Protection		Helmet Compliance	
02	<b>Injury</b>		Airbag	
	Injury Severity <b>SUSPECTED MINOR INJURY</b>		<b>DEPLOYED-FRONT</b>	
	Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	
	Trapped/Extricated <b>NOT TRAPPED</b>		Medical Transport <b>EMS GROUND</b>	
Hospital <b>UW HEALTH-AMERICAN CENTER</b>		EMS Agency Identifier <b>6001155</b>		
Date of Death		EMS Run #		
Time of Death		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>		
<b>Distracted By</b>		Distracted By Action <b>NOT DISTRACTED</b>		
<b>Non Motorist</b>		Striking Unit #		
Location		Prior Action		

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UNIT INDIVIDUAL          02 002	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>NOT OBSERVED</b>		