

6TL0CCZ7V4
22-08762

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 22-08762		Investigating Officer/Deputy DEPUTY R. BARNES	
Crash Date 09/02/2022		Crash Time 03:00 PM		Date Arrived 09/02/2022		Time Arrived 04:51 PM	
Date Notified 09/02/2022		Time Notified 03:43 PM		Total Units 02		Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input checked="" 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 PRIVATE PROPERTY/PARKING LOT		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

Description

Diagram		Reconstruction By	
		Photos By R. BARNES	
		Additional Information PHOTOS	

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

ON 09/02/22 UNIT 2 WAS PARKED BY THE WITNESS AT 3 PM. AT APPROXIMATELY 3:20 PM THE WITNESS HEARD WHAT HE THOUGH WAS A CRASH AND CAME OUTSIDE TO SEE UNIT 2 DAMAGED. THE WITNESS DID NOT SEE ANYONE ELSE AROUND. NO CAMERAS IN THE AREA OR OTHER WITNESSES. REPORTABLE DAMAGE TO UNIT 2. NO FURTHER LEADS TO INVESTIGATE.

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Location

Table with 3 columns: Location details (PARKING LOT, CHRISTMAS MOUNTAIN RD LOT, IN THE TOWN OF DELLONA, IN SAUK COUNTY), Latitude (43.61484481), Longitude (-89.86677615), X Coordinate (268672.34375), Y Coordinate (4833089.5), Structure Type.

Crash Scene

Table with 3 columns: First Harmful Event (PARKED MOTOR VEHICLE), First Harmful Event Location (OFF ROADWAY, LOCATION UNKNOWN), Manner of Collision (UNKNOWN), Light Condition (DAYLIGHT), Road Surface Condition(s) (DRY), Roadway Factor(s) (NONE), Environment Factor(s) (NONE), Weather Condition(s) (CLOUDY), Animal Type, Relation To Trafficway (NON TRAFFICWAY - PARKING LOT), Crash Classification - Location (PRIVATE PROPERTY), Crash Classification - Jurisdiction (PRIVATE PROPERTY), Tribal Land, Access Control (NO CONTROL), Special Study, Within Interchange Area (NO), Junction Location (NON-JUNCTION), Intersection Type (NOT AN INTERSECTION).

Unit Summary

Table with 3 columns: Unit Status (HIT AND RUN), 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? (UNKNOWN), Direction Of Travel (UNKNOWN), Pre Crash Tire Mark, Speed Limit, Total Lanes, Most Harmful Event: Collision With (PARKED MOTOR VEHICLE), Special Function (UNKNOWN), Emergency Motor Vehicle Use (UNKNOWN), Traffic Way (UNKNOWN), Traffic Control (UNKNOWN), Traffic Control Inoperative/Missing (UNKNOWN), Surface Type (UNKNOWN), Road Curvature (UNKNOWN), Road Grade (UNKNOWN), Truck Bus or HazMat (NO).

Vehicle

Table with 4 columns: License Plate Number, Plate Type, St, Country of Issuance; Vehicle Identification Number, Make, Year, Model; Color, Body Style, Bus Use; Initial Contact Point (99 - UNKNOWN), Vehicle Damage (16 - VEHICLE NOT AT SCENE), Extent Of Damage (VEHICLE NOT AT SCENE). Includes a small grid with numbers 1-12.

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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR		
	What Driver Was Doing		Vehicle Factors		
	Driver Prior Action Other		UNKNOWN		
	Driver Actions UNKNOWN				
01 01	Owner Name		Owner Address		
Sequence Of Events					
01 02 03 04	Event MOTOR VEH IN TRANSPORT				
	Event PARKED MOTOR VEHICLE				
	Event				
	Event				
Individual					
UNIT INDIVIDUAL	Driver		Citations Issued 0	Sex	
			Date of Birth	Race	
	Address		Driver License Number		
01 001	Safety Equipment		On Duty Crash		
			Safety Equipment		
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	RESTRAINT USE UNKNOWN		
	Helmet Use		Helmet Compliance		
	Eye Protection		Tint Compliance		
Injury		Injury Severity NO APPARENT INJURY	Airbag NOT APPLICABLE		
Ejected NOT APPLICABLE		Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT APPLICABLE	
Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #	
Hospital		Date of Death		Time of Death	
Distracted By		Distracted By Source			
		Distracted By Action			
Non Motorist		Striking Unit #	Location		

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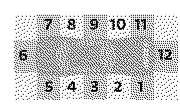
UNIT INDIVIDUAL 01 001
Prior Action
Action
Action Other To/From School
Drug & Alcohol Suspected Alcohol Use Suspected Drug Use
Alcohol Test Given TEST NOT GIVEN Alcohol Test Type Alcohol Test Results
Drug Test Given TEST NOT GIVEN Drug Test Type Drug Test Results
Drug Type
Individual Condition
NOT OBSERVED

Unit Summary

UNIT 02
Unit Status LEGALLY PARKED Vehicle Operating As Classification D CLASS Unit Type TRUCK
Vehicle Type UTILITY TRUCK/PICKUP TRUCK Operating As Endorsements
Total Occs 0 Train/Bus # Recorded Total # Citations Issued 0 Total Trailers 0 Total HazMat Types 0
Insurance? YES Direction Of Travel NOT ON ROADWAY Pre Crash Tire Mark Speed Limit Total Lanes
Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT Special Function NO SPECIAL FUNCTION Emergency Motor Vehicle Use NOT APPLICABLE
Traffic Way PARKING LOT OR PRIVATE PROPERTY Traffic Control NO CONTROL Traffic Control Inoperative/Missing NO
Surface Type BLACKTOP (BITUMINOUS) Road Curvature STRAIGHT Road Grade LEVEL
Truck Bus or HazMat NO

Vehicle

UNIT 02 02 VEHICLE
License Plate Number CP43770 Plate Type LTK - LIGHT TRUCK St TN Country of Issuance UNITED STATES
Vehicle Identification Number P8102171X785CT20 Make GENERAL MOTORS COR Year 2015 Model SIERRA
Color WHI - WHITE Body Style PK - PICKUP Bus Use
Initial Contact Point 02 - RIGHT SIDE FRONT Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 12 - FRONT
Extent Of Damage FUNCTIONAL DAMAGE
Towed Due To Damage NOT TOWED Vehicle Removed By OPERATOR
What Driver Was Doing LEGALLY PARKED



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		Vehicle Factors	
Driver Prior Action Other		NOT APPLICABLE	
UNIT VEHICLE	Driver Actions	NO CONTRIBUTING ACTION	
	Owner Name	Owner Address	
02	02	MASTER CORP INC (931) 484-1752	PO BOX 4027 CROSSVILLE, TN 38557 , US
Sequence Of Events			
UNIT	01	Event MOTOR VEH IN TRANSPORT	
	02	Event PARKED MOTOR VEHICLE	
	03	Event	
	04	Event	
Policy Holder			
UNIT	Insurance Company		Organization/Company
	TRAVELERS-COMMERCIAL-INS-CO		MASTER CORP INC
Witness			
WITN ESS	01	Individual	Date of Birth
		ANTHONY M CORIANO (608) 844-0821	S944 CHRISTMAS MOUNTAIN RD WISCONSIN DELLS, WI 53965 , US 