

6TL0BNZM44
22-09019

WISCONSIN MOTOR VEHICLE
CRASH REPORT

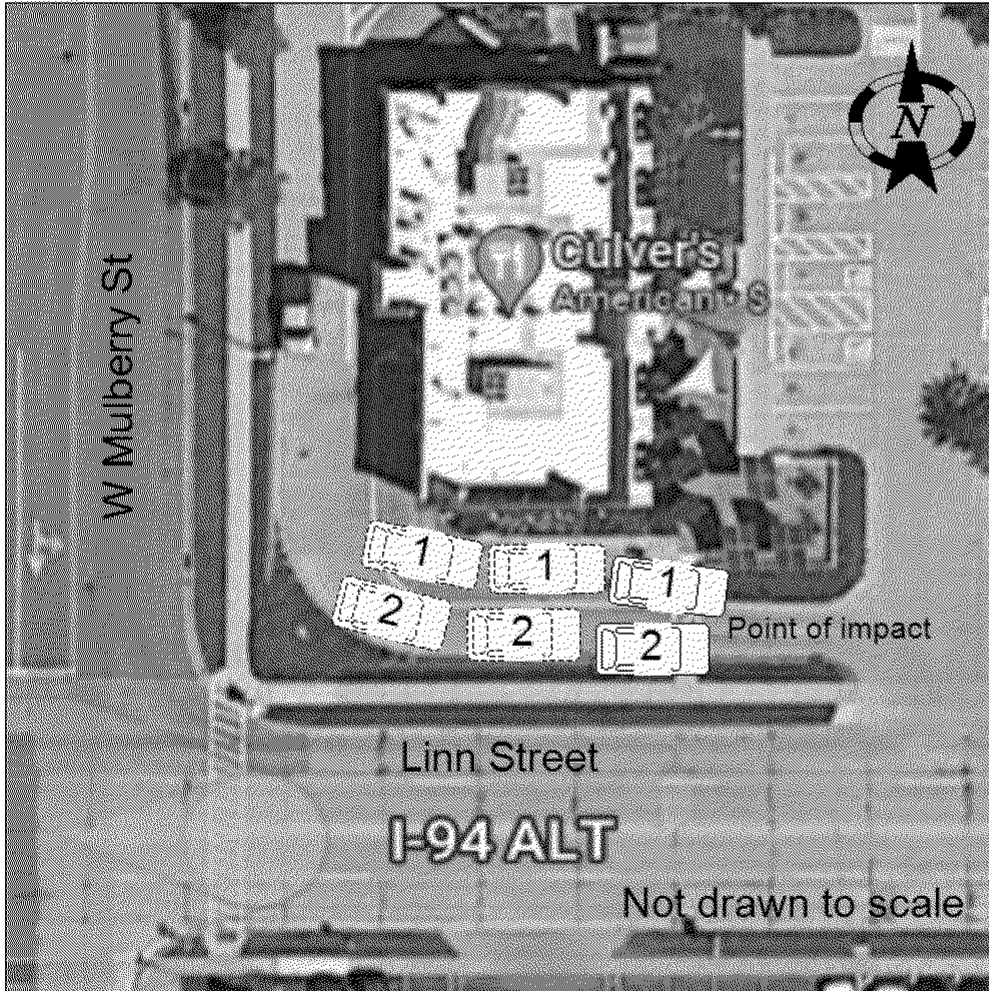
SAUK COUNTY SHERIFFS DEPARTMENT
1300 LANGE COURT
BARABOO, WI 53913
(608) 356-4895

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Document Number Override		Primary Crash Document#		Agency Crash Number 22-09019		Investigating Officer/Deputy DEPUTY K. RENZ	
Crash Date 09/08/2022		Crash Time 08:50 PM		Date Arrived 09/08/2022		Time Arrived 09:07 PM	
Date Notified 09/08/2022		Time Notified 08:52 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 PRIVATE PROPERTY/PARKING LOT		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

Description

Diagram



Reconstruction By

Photos By
RENZ 9148

Additional Information
PHOTOS

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

ON 9/8/2022 AT APPROXIMATELY 8:50 P.M., UNIT 1 AND UNIT 2 WERE IN THE DRIVE-THROUGH AT CULVERS AT 420 LINN STREET, WEST BARABOO. UNIT 1 WAS ON THE INSIDE DRIVE-THROUGH LANE AND UNIT 2 WAS ON THE OUTSIDE DRIVE-THROUGH LANE. BOTH UNITS WENT TO LEAVE THE DRIVE-THROUGH AT THE SAME TIME AND COLLIDED WITH EACH OTHER. UNIT 1 AND UNIT 2 STRUCK EACH OTHER WHERE THE TWO LANES MERGE INTO ONE. THERE WAS MINOR DAMAGE TO THE RIGHT FRONT WHEEL WELL OF UNIT 1 AND DAMAGE TO THE LEFT FRONT BUMPER OF UNIT 2. BOTH UNITS WERE REMOVED FROM THE SCENE BY THE OPERATORS.

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Location

PARKING LOT MULBERRY ST LOT IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY	Latitude 43.475158381	Longitude -89.76652116
	X Coordinate 276246.03125	Y Coordinate 4817301
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 01 - ANGLE	Light Condition DARK/LIGHTED	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLEAR		
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

UNIT 01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE		
	Vehicle Type PASSENGER VAN	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 NOT ON ROADWAY	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit N/A	Total Lanes 2
	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 VEHICLE 01	License Plate Number 45047DS	Plate Type DIS - DISABLED	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1D4GP45R56B502138	Make DODGE	Year 2006	Model CARAVAN
	Color SIL - SILVER (ALUMINUM)	Body Style 4D - 4DR	Bus Use	
	Initial Contact Point 02 - RIGHT SIDE FRONT	Vehicle Damage 02 - RIGHT SIDE FRONT		
	Extent Of Damage MINOR DAMAGE			



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UNIT VEHICLE	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR	
	What Driver Was Doing GOING STRAIGHT	Vehicle Factors	
	Driver Prior Action Other	NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION		
01 01	Owner Name EDUVIGEN MENDOZA JIMENEZ (608) 581-0387	Owner Address S7415 WESTERN AVE NORTH FREEDOM, WI 53951 , US	
	Sequence Of Events		
01 02 03 04	Event MOTOR VEH IN TRANSPORT		
	Event		
	Event		
	Event		
UNIT	Policy Holder		
	Insurance Company ERIE-INS-CO	Individual EDUVIGEN JIMENEZ	
UNIT INDIVIDUAL	Individual		
	Driver EDUVIGEN MENDOZA JIMENEZ (608) 581-0387	Citations Issued 0	Sex MALE
		Date of Birth [REDACTED]	Race HISPANIC
	Address S7415 WESTERN AVE NORTH FREEDOM, WI 53951 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
01 001	Safety Equipment		On Duty Crash
			Safety Equipment SHOULDER & LAP BELT
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #
Hospital		Date of Death	Time of Death
Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)	
Distracted By Action NOT DISTRACTED			

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UNIT INDIVIDUAL 01 001
Non Motorist
Striking Unit #
Location
Prior Action
Action
Action Other
To/From School
Drug & Alcohol
Suspected Alcohol Use NO
Suspected Drug Use NO
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
APPEARED NORMAL

Unit Summary

UNIT 02
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 NOT ON ROADWAY
Pre Crash Tire Mark
Speed Limit N/A
Total Lanes 2
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

UNIT 02 VEHICLE 02
Vehicle
License Plate Number 474LUX
Plate Type AUT - AUTOMOBILE
St WI
Country of Issuance UNITED STATES
Vehicle Identification Number JTDKDTB39F1109081
Make TOYOTA
Year 2015
Model PRIUS C
Color BLU - BLUE
Body Style HB - HATCHBACK
Bus Use
Initial Contact Point 11 - LEFT FRONT CORNER
Vehicle Damage 01 - RIGHT FRONT CORNER, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT
Extent Of Damage MINOR DAMAGE
Towed Due To Damage NOT TOWED
Vehicle Removed By OPERATOR



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UNIT	What Driver Was Doing GOING STRAIGHT	Vehicle Factors	
	Driver Prior Action Other	NOT APPLICABLE	
VEHICLE	Driver Actions NO CONTRIBUTING ACTION		
	Owner Name CAROL JOAN FLEISHAUER (608) 356-3005	Owner Address 302 REMINGTON ST BARABOO, WI 53913 , US	
02	Sequence Of Events		
01	Event	MOTOR VEH IN TRANSPORT	
	Event		
	Event		
	Event		
02	Policy Holder		
	Insurance Company STATE-FARM-GENERAL-INS-CO	Individual CAROL FLEISHAUER	
03	Individual		
	Driver CAROL JOAN FLEISHAUER (608) 356-3005	Citations Issued 0	Sex FEMALE
	Address 302 REMINGTON ST BARABOO, WI 53913 , US	Date of Birth [REDACTED]	Race WHITE
		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
04	Safety Equipment		Safety Equipment
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
002	Injury		Airbag
	Injury Severity NO APPARENT INJURY		NON DEPLOYED
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier
Hospital		Date of Death	Time of Death
Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)	
Distracted By Action		NOT DISTRACTED	
Non Motorist		Striking Unit #	Location

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UNIT	Prior Action			
	Action			
	Action Other		To/From School	
	Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use NO	
		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 APPEARED NORMAL			
	02	002		