

6TL0B655V7
22-09492

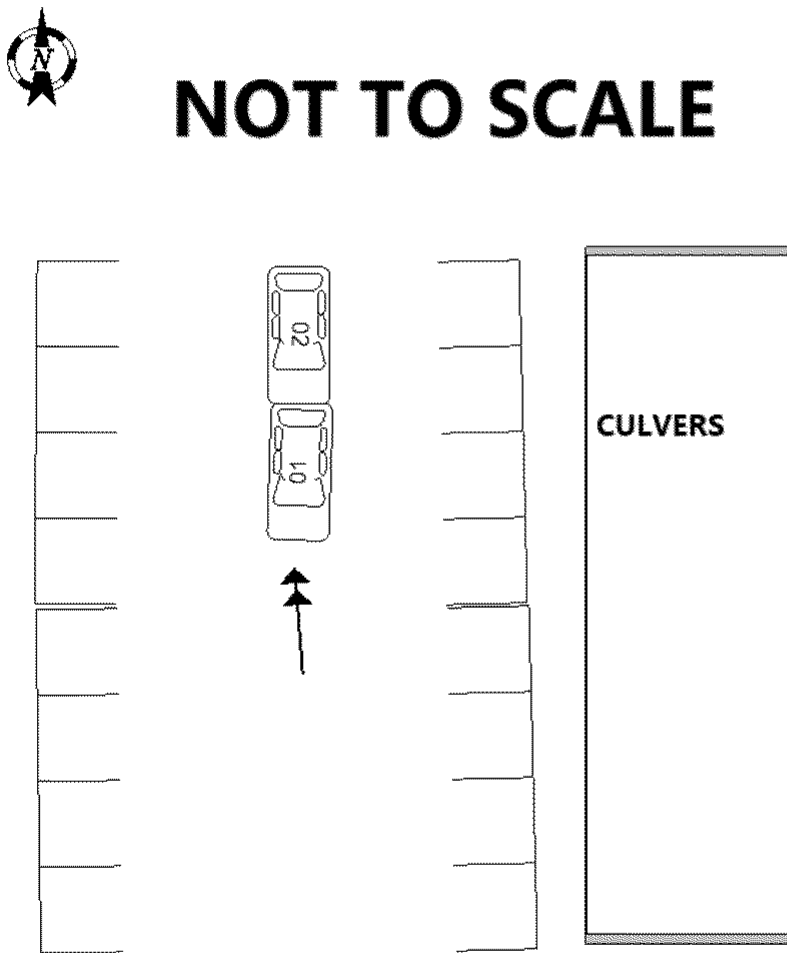
WISCONSIN MOTOR VEHICLE CRASH REPORT

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

6TL0B655V7

| | | | | | |
|--|---|---------------------------------------|------------------------------------|--|--|
| Document Number Override | | Primary Crash Document# | Agency Crash Number 22-09492 | Investigating Officer/Deputy DEPUTY W. NEUBAUER | |
| Crash Date 09/22/2022 | | Crash Time 01:05 PM | Date Arrived 09/22/2022 | Time Arrived 01:43 PM | |
| Date Notified 09/22/2022 | | Time Notified 01:13 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 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 1 AND 2 WERE IN THE CULVERS PARKING LOT IN SPRING GREEN. UNIT 1 ENTERED THE PARKING LOT FIRST FOLLOWED BY UNIT 2. BOTH UNIT 1 AND 2 WERE STOPPED IN THE PARKING LOT. UNIT 1 WENT IN REVERSE AND STRUCK UNIT 2. VIDEO FOOTAGE IN CASE FILE.

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Location

Table with 3 columns: Address (ON USH14 EB, 228 FT E, OF PRAIRIE VIEW RD/ STH23 EB, IN THE TOWN OF SPRING GREEN, IN SAUK COUNTY), Latitude (43.18967765), Longitude (-90.073003769), X Coordinate (250288.640625), Y Coordinate (4786464), Structure Type (NO STRUCTURE)

Crash Scene

Table with 3 columns: Event (MOTOR VEH IN TRANSPORT), Location (IN PARKING LANE OR ZONE), Manner (03 - FRONT TO REAR), Light (DAYLIGHT), Road Surface (DRY), Environment (NONE), Weather (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

Table with 5 columns: 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 (1), 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

Table with 4 columns: License Plate Number (AGL1084), Plate Type (AUT - AUTOMOBILE), St (WI), Country of Issuance (UNITED STATES), Vehicle Identification Number (1G1BE5SM4H7186256), Make (CHEVROLET), Year (2017), Model (CRUZE), Color (BLU - BLUE), Body Style (SD - SEDAN), Bus Use, Initial Contact Point (06 - REAR), Vehicle Damage (06 - REAR), 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 BACKING | Vehicle Factors | |
| | Driver Prior Action Other | NOT APPLICABLE | |
| | Driver Actions LOOKED BUT DID NOT SEE | | |
| 01 01 | Owner Name KAYLA JEAN MANHART (608) 445-0751 | Owner Address 907 LONE TREE LN PRAIRIE DU SAC, WI 53578 , US | |
| | Sequence Of Events | | |
| 01 02 03 04 | Event MOTOR VEH IN TRANSPORT | | |
| | Event | | |
| | Event | | |
| | Event | | |
| UNIT | Policy Holder | | |
| | Insurance Company PROGRESSIVE-CASUALTY-INS-CO | Individual KAYLA MANHART | |
| UNIT INDIVIDUAL | Individual | | |
| | Driver KAYLA JEAN MANHART (608) 445-0751 | Citations Issued 0 | Sex FEMALE |
| | | Date of Birth [REDACTED] | Race WHITE |
| | Address 907 LONE TREE LN PRAIRIE DU SAC, WI 53578 , US | Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES | |
| 01 001 | Safety Equipment | | On Duty Crash |
| | | | Safety Equipment |
| | Row 01 - FRONT ROW | Seat Position 07 - LEFT | SHOULDER & LAP BELT |
| | Helmet Use | | Helmet Compliance |
| | Eye Protection | | Tint Compliance |
| | Injury | | Airbag |
| 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 | EMS Run # |
| Hospital | | Date of Death | Time of Death |
| Distracted By | | Distracted By Source UNKNOWN | |
| Distracted By Action | | UNKNOWN | |

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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 2
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 1
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 782NRX
Plate Type AUT - AUTOMOBILE
St WI
Country of Issuance UNITED STATES
Vehicle Identification Number 1G4HD5EM7AU108458
Make BUICK
Year 2010
Model LUCERNE CX
Color RED - RED
Body Style 4D - 4DR
Bus Use
Initial Contact Point 12 - FRONT
Vehicle Damage
Extent Of Damage MINOR DAMAGE
12 - FRONT
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 GERALD MICHAEL BINDL (608) 588-5556 | Owner Address S12157 BIG HOLLOW RD SPRING GREEN, WI 53588 , 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 GERALD BINDL | |
| INDIVIDUAL | Individual | | |
| | Driver GERALD MICHAEL BINDL (608) 588-5556 | Citations Issued 0 | Sex MALE |
| | | Date of Birth [REDACTED] | Race WHITE |
| | Address S12157 BIG HOLLOW RD SPRING GREEN, WI 53588 , US | Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES | |
| 02 | 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 | EMS Run # |
| Hospital | | Date of Death | Time of Death |
| Distracted By | | Distracted By Source UNKNOWN | |
| Distracted By Action UNKNOWN | | | |
| Non Motorist | | Striking Unit # | Location |

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| | | | |
|--|----------------------|--|--|
| UNIT | INDIVIDUAL | Prior Action | |
| | | Action | |
| | | Action Other | To/From School |
| 02 | 002 | 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 | INDIVIDUAL | Individual | |
| | | Passenger CAROL ANN GENEVIEVE BINDL (608) 588-5556 | Citations Issued 0 |
| | | | Sex FEMALE |
| | | | Date of Birth [REDACTED] |
| | Race WHITE | | |
| Address S12157 BIG HOLLOW RD SPRING GREEN, WI 53588 , US | | Driver License Number [REDACTED] | |
| | | STATE: WISCONSIN COUNTRY: UNITED STATES | |
| 02 | 003 | Safety Equipment On Duty Crash | |
| | | Safety Equipment SHOULDER & LAP BELT | |
| | | Row 01 - FRONT ROW | Seat Position 09 - RIGHT |
| | | Helmet Use | |
| | | Helmet Compliance | |
| Eye Protection | | Tint Compliance | |
| 02 | 003 | 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 | |
| Hospital | | EMS Run# | |
| | | Date of Death | |
| | | Time of Death | |
| Distracted By Distracted By Source | | | |
| Distracted By Action | | | |
| Non Motorist Striking Unit# | | Location | |
| Prior Action | | | |

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|--------------------|--|-----------------------------|--------------------------|--|
| UNIT INDIVIDUAL | 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 | | | |
| | 02 003 | | | |
| | | | | |