WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Override Primary Crash E			Document#	ument# Agency Crash Number Investigating Officer/Deputy 22-11714 DEPUTY H. VOLZ						
<u>ග</u>	Crash Date	Crash Time		Date A		I	Time Arrived			
三	11/22/2022	02:10 PM		11/22/		02:20 PM Total Injured				
7	Date Notified 11/22/2022	Time Notified 02:13 PM		Total ∪ 02	Total Units 02			Total Killed	ed .	
6TL0BFKDH9	On Emergency	Hit and Run	Lane Clos	ure	Work Zone	Trailer	or To	owed	Reporting Threshold	
3 T.L.	Government Property	Active S	Active School Zone School Bus Related NO			t Tags				
_	∨ Reportable	Crash Type PRIVATE PR	DE PROPERTY/PARKING LOT Amend				ded		Secondary Crash	
	Description 🕳									
	Diagram		Privat	e Par	king Lot	Scale	Phot	tos By		
	I, a sworn law enfo	orcement officer and	ee that I have n	ot adde	i any C.IIS data in t	this report				
	\$d									
	UNIT 2 WAS LEGALLY PAR STRUCK THE OPEN DOOR		LL. UNIT 2 OPENED) THEIR D	RIVERS DOOR TO EXI	T THE VEHICLE. U	NIT 1 I	PULLED IN	TO PARKING STALL AND	

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L	Location 									
ſ	PARKING LOT				Latitude			Longit	ude	
	STH136 EB LOT				-89.77	70734883				
	IN THE VILLAGE OF WE IN SAUK COUNTY	X Coordinate 275900.8125			Y Coo 4817	rdinate 180.5				
					Structure NO STR	Type UCTURE		•		
(Crash Scene									
ī	First Harmful Event				Eiret Harr	nful Event Lo	cation			
	MOTOR VEH IN TRANSF	PORT					OR ZONE			
ŀ	Manner of Collision				Light Con-					
	07 - SIDESWIPE/SAME [DIRECTION			DAYLIG					
ŀ	Road Surface Condition(s)				Roadway	Factor(s)				
	DRY									
Ī	Environment Factor(s)				1					
	NONE				NONE					
ſ	Weather Condition(s)]					
	CLEAR									
ļ	AnimalType				1	o Trafficway		LOT		
ŀ	Crash Classification - Location	on			NON TRAFFICWAY - PARKING LOT Crash Classification - Jurisdiction					
ļ	PRIVATE PROPERTY Tribal Land				PRIVATE PROPERTY					
	Inbailand	al Land				Access Control Special Study NO CONTROL				
	Within Interchange Area NO	Junction Location NON-JUNCTION		1	section Type 「AN INTERSECTION					
į	Unit Summary =									
П	Unit Status					Classification Unit Type				
	IN TRANSIT		D CLASS		AUTOMOBILE					
; [Vehicle Type					Operating A	Operating As Endorsements			
ļ	PASSENGER CAR						<u> </u>			
	Total Occs 2	Train/Bus#Recorded	Total#Cita	Citations Issued		Total Trailers		Total HazMat Types 0		
ŀ	Insurance?	Direction Of Travel	Pre	CrashTire		Speed Lin	nit	TotalLa	otalLanes	
-	YES	NOT ON ROADWAY		Mark	•	N/A				
	Most Harmful Event: Collision PARKED MOTOR VEHIC		Special Ful	nction	TION		Emergency Motor Vehicle Use NOT APPLICABLE			
ŀ	Traffic Way	,LE								
	PARKING LOT OR PRIVA	ATE PROPERTY	I	Traffic Control NO CONTROL			Traffic Control Inoperative/Missing NO			
ŀ	Surface Type		Road Curv				Road Grade			
	BLACKTOP (BITUMINO	US)	STRAIGH				LEVEL			
-	Truck Bus or HazMat									
_	Vehicle									
	License Plate Number		Plate Type	<u> </u>	St		Country of Issuance			
2000	792GAP Vehicle Identification Number 2HGFB2F53FH503739 Color RED - RED		1	JTOMOBIL			UNITED STATES			
			Make			Year	Model			
						2015		CIVIC LX Bus Use		
989000000000			1 7 .							
Supplement.	Initial Contact Point		Vehicle Da	amage				I	7 0 0 40 40	
9000000	전 01 - RIGHT FRONT	CORNER	01 - RIG	HT FRON	CORNE	2. 02 - RIG	HT SIDE		7 8 9 10 11 6 12	
	Extent Of Damage FUNCTIONAL DAM	\$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ \$\$			01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 12 - FRONT			5 4 3 2 1		
alalah.	> TORCHONAL DAW	705							and the control of th	

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				_						
		Towed Due To Damage NOT TOWED			nicle Removed By					
		What Driver Was Doing		OWNER Vehicle Factors						
		PARK MANEUVER		1 4 6	note i deters					
		Driver Prior Action Other		NO	T APPLICABLE					
		Driver Actions								
 	Щ	NO CONTRIBUTING ACT	ION							
	≌									
>	VEHICLE									
		OwnerName			Owner Address S6472 WILSON RD					
2	Б	JANET WURST PHELPS			ROCK SPRINGS, V					
_										
		Sequence Of Events								
	6	Event MOTOR VEH IN TRANSP								
		Event								
	65									
	83	Event								
	2	Event								
l⊨		Policy Holder Insurance Company								
INN		OWNERS-INS-CO			ndividual JANET PHELPS					
		Individual								
		Driver JANET WURST PHELPS		Citations issued Sex						
	7			0 FEMALE Date of Birth Race						
<u>. </u>	NDIVIDUAL				Date of Birth	WHITE				
EN S	Z	Address			Driver License Number					
	물	S6472 WILSON RD ROCK SPRINGS, WI 53961 , US			STATE: WISCONSIN COUNTRY: UNITED STATES					
		, , , , , , , , , , , , , , , , , , , ,								
		On Duty Crash		Safety Equipment						
	Sai	fety Equipment								
		Row 01 - FRONT ROW	Seat Position 07 - LEFT		SHOULDER & LAP E	BELT				
		HelmetUse	01 - 221 1	+	Heimet Compliance					
		Eye Protection		Tint Compliance						
۶	8	Injury S	everity	Airbag						
	0	200222222222222404242404204204204242442642404	PARENT INJURY Ejection Path	1	NON DEPLOYED		Trapped/Extricated			
		Ejected NOT EJECTED	NOT EJECTED/NOT AP	PLIC	ABLE		NOT TRAPPED			
		Medical Transport		E	EMS Agency Identifier		EMS Run#			
		NOT TRANSPORTED		4						
Hospital Date of Death Time of S						Time of Death				
		Distracted Rivers	ed By Source IPPLICABLE (NOT DISTR	ACT	'ED\					
		Distracted By Action	a : LICABLE (NOT DISTR	AU I	-D)					
	NOT DISTRACTED									

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		Non Motorist	Unit#	Location							
		Prior Action		1							
TINO	INDIVIDUAL	Action									
		Action Other						To/From School			
	I	Suspec Drug & Alcohol NO	Suspected Alcohol 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					
10	100	Drug Type									
		Individual Condition									
	APPEARED NORMAL										
		Individual Passenger			Citations Issued	Sex					
	4	LAURENCE MICHAEL PHELPS		0	MALE						
ı_	Ž				Date of Birth	Race					
TNU	INDIVIDUAL	Address S6472 WILSON RD ROCK SPRINGS, WI 53961, US			Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sai	On Duty Crash On Duty Crash			Safety Equipment						
		Row 01 - FRONT ROW	SeatPo		SHOULDER & LAP BELT						
		HelmetUse		Helmet Compliance							
		Eye Protection			Tint Compliance						
٤	8	Injury Se Injury NO AP	PARENT II		Airbag NON DEPLOYED						
		Ejected NOT EJECTED	Ejection Pa	ith CTED/NOT APPI	LICABLE		Trapped/Extricated NOT TRAPPED				
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run#					
		Hospital			Date of Death		Time of Death				
		Distracted By Distract	ed By Source	÷	ı		I				
		Distracted By Action									
		Non Motorist	Unit#	Location							
l				I							

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		Prior Action								
TINO	INDIVIDUAL	Action								
		Action Other	To/From School							
	1	Drug & Alcohol NO			Suspected Drug Use NO					1
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Ty	pe		Alcohol Tes	t Results		
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug 7	Test Results	l		
10	002	Drug Type								
		Individual Condition APPEARED NORMAL								
	Uni	t Summary								
	Unit	Status			Vehicle Operating As Class	ification	ļ	UnitType		
		SALLY PARKED	D CLASS			AUTOMO				
02		Vehicle Type PASSENGER CAR						Operating A	.s Endorser	ments
					, - 12 112		Total Traile			Mat Types
	1 Insu	rance?	Direction Of Tra	ıvel	0 Pre CrashTire	0 Speed Lim		iit	0 Total Lane	es
LINO	YES	YES NOT ON ROADWAY		Mark N/A Special Function		1 '				
Ś		MostHarmful Event: Collision With MOTOR VEH IN TRANSPORT			NO SPECIAL FUNCTION			Emergency Motor Vehicle Use NOT APPLICABLE		
		fic Way RKING LOT OR PRIVATE	PROPERTY		Traffic Control NO CONTROL			Traffic Control Inoperative/Missing		
		ace Type			Road Curvature			Road Grade		
		CKTOP (BITUMINOUS)	ı		STRAIGHT			LEVEL		
	Truc NO	k Bus or HazMat								
		Vehicle				coecee				
		License Plate Number AER4058			Plate Type AUT - AUTOMOBILE		St WI	Country of Is UNITED S		
02	8	Vehicle Identification Numb			Make GENERAL MOTORS C	OR	Year 2012	Model TERRAIN		
		Color BLK - BLACK		Body Style UT - SPORT UT!L!TY \	/EHICI	LE	Bus Use			
	Щ	Initial Contact Point			Vehicle Damage					7 8 9 10 11
TIND	VEHICLE	09 - LEFT SIDE MIDDL Extent Of Damage FUNCTIONAL DAMAG			09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT 6 12 5 4 3 2 1					6 12
	7	Towed Due To Damage NOT TOWED			Vehicle Removed By OWNER					
•		What Driver Was Doing LEGALLY PARKED								
					=					

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				_					
				Ve	hicle Factors				
		Driver Prior Action Other		- NC	OT APPLICABLE				
LINO	VEHICLE	Driver Actions NO CONTRIBUTING ACT	TON	·					
05	02	Owner Name KEVIN RICHARD FELT			Owner Address S3086 N REEDSB BARABOO, WI 539				
		l Sequence Of Events							
		Event							
	8	MOTOR VEH IN TRANSF	ORT						
	8	Event							
	8	Event							
	8	Event							
—		Policy Holder							
IN N		Insurance Company PROGRESSIVE-MUTUAL-INS-CO-(ATTN:-AUTO-U			Individual KEVIN FELT				
		Individual							
	7	Occupent Of Motor Vehicle Not in Transport KEVIN RICHARD FELT Address S3086 N REEDSBURG RD BARABOO, WI 53913 , US			Citations Issued	Sex			
					0	MALE	TALE Tace		
⊨	Ď				Date of Birth	WHITE			
TIND	INDIVIDUAL				Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES				
	Sai	On Duty Crash Fety Equipment			Safety Equipment				
		Row Seat Position 01 - FRONT ROW 07 - LEFT			NONE USED - VEHICLE OCCUPANT				
		HelmetUse		1	Helmet Compliance				
		Eye Protection			Tint Compliance				
05	899	Injury S	Severity		Airbag				
0	6	INJURY NO AF Ejected	PPARENT INJURY Ejection Path	- 1	UNKNOWN		Trapped/Extricated		
		UNKNOWN	UNKNOWN				UNKNOWN		
		Medical Transport NOT TRANSPORTED		1	EMS Agency Identifier		EMS Run#		
		Hospital		1	Date of Death		Time of Death		
		Distracted By	ted By Source				<u>I</u>		
		Distracted By Action							
		Striking Non Motorist	Unit# Location						
			ı						

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		Prior Action					
UNIT	INDIVIDUAL	Action					
		Action Other					To/From School
	1	Drug & Alcohol NO	lse	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		
02	8	Drug Type					
		Individual Condition					
		APPEARED NORMAL					