

6TL0D0GSKH
SC22-12557

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

6TL0D0GSKH

| | | | | | | | |
|--|--------------------------------------|--|------------------------------------|--|---|--|--|
| Document Number Override | | Primary Crash Document # | | Agency Crash Number SC22-12557 | | Investigating Officer/Deputy DEPUTY G. AKERS | |
| Crash Date 12/15/2022 | | Crash Time 07:43 PM | | Date Arrived 12/15/2022 | | Time Arrived 08:14 PM | |
| Date Notified 12/15/2022 | | Time Notified 07:45 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 DT4000 (STANDARD CRASH) | | | | <input type="checkbox"/> Amended | <input type="checkbox"/> Secondary Crash |

Description

| | |
|---------|---|
| Diagram | Reconstruction By |
| | Photos By GA |
| | Additional Information PHOTOS |

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

V1 & V2 PASSED A MAIL TRUCK WHILE TRAVELING SOUTH ON MILLS ST. AFTER PASSING THE MAIL TRUCK V2 SIGNALLED WITH TURN SIGNALS AND THEN BEGAN TO PTULL INTO THEIR DRIVEWAY. V1 THEN REAR ENDED V2 AS IT BEGAN TO TURN INTO DRIVEWAY. D1 CITED FOR FOLLOWING TO CLOSE. BOTH VEHICLES REMOVED BY OPERATOR.

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Location

| | | |
|--|---|-----------------------------------|
| ON 200 MILL ST/ STH58 SB 103 FT N OF 5TH ST (HOUSE/BUILDING 200) IN THE VILLAGE OF IRONTON IN SAUK COUNTY | Latitude 43.542285743 | Longitude -90.141233154 |
| | X Coordinate 246219.765625 | Y Coordinate 4825832.5 |
| | Structure Type HOUSE/BUILDING | |

Crash Scene

| | | |
|---|---|---|
| First Harmful Event MOTOR VEH IN TRANSPORT | First Harmful Event Location ON ROADWAY | |
| Manner of Collision 03 - FRONT TO REAR | Light Condition DARK/LIGHTED | |
| Road Surface Condition(s) WET | Roadway Factor(s) NONE | |
| Environment Factor(s) NONE | | |
| Weather Condition(s) CLOUDY | | |
| Animal Type | Relation To Trafficway TRAFFICWAY - ON ROAD | |
| Crash Classification - Location PUBLIC PROPERTY | Crash Classification - Jurisdiction NO SPECIAL JURISDICTION | |
| Tribal Land | Access Control NO CONTROL | Special Study |
| Within Interchange Area NO | Junction Location DRIVEWAY ACCESS | Intersection Type NOT AN INTERSECTION |

Unit Summary

| | | | | | |
|-------------|---|---|--|----------------------------|--------------------------------|
| UNIT | 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 1 | Total Trailers 0 | Total HazMat Types 0 |
| | Insurance? YES | Direction Of Travel SOUTHBOUND | <input type="checkbox"/> Pre CrashTire Mark | Speed Limit 30 | 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 TWO-WAY, NOT DIVIDED | 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 | Vehicle | | | | |
| | 01 | License Plate Number ASJ4466 | Plate Type AUT - AUTOMOBILE | St WI | Country of Issuance UNITED STATES |
| | | Vehicle Identification Number 5XXGM4A77DG154196 | Make KIA MOTORS CORPORAT | Year 2013 | Model OPTIMA |
| | VEHICLE | Color BLK - BLACK | | Body Style SD - SEDAN | Bus Use |
| | | Initial Contact Point 01 - RIGHT FRONT CORNER | Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 12 - FRONT | | |
| Extent Of Damage FUNCTIONAL 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 FOLLOWING TOO CLOSE | | | |
| 01 01 | Owner Name TRENNA BRANDT (608) 462-7662 | | Owner Address 228 NORTH ST CAZENOVIA, WI 53924 , 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 TRENNA BRANDT | |
| UNIT INDIVIDUAL | Individual | | | |
| | Driver TRENNA BRANDT (608) 462-7662 | | Citations Issued 1 | Sex FEMALE |
| | Address 228 NORTH ST CAZENOVIA, WI 53924 , US | | Date of Birth | Race WHITE |
| | Driver License Number | | STATE: WISCONSIN COUNTRY: UNITED STATES | |
| 01 001 | Safety Equipment | | On Duty Crash | |
| | Row 01 - FRONT ROW | | Seat Position 07 - LEFT | |
| | Helmet Use | | Safety Equipment SHOULDER & LAP BELT | |
| | Eye Protection | | Helmet Compliance | |
| | Injury NO APPARENT INJURY | | Airbag NON DEPLOYED | |
| | Ejected NOT EJECTED | | Ejection Path NOT EJECTED/NOT APPLICABLE | |
| Medical Transport NOT TRANSPORTED | | Trapped/Extricated NOT TRAPPED | | |
| Hospital | | EMS Agency Identifier | EMS Run # | |
| Date of Death | | Time of Death | | |
| Distracted By | | Distracted By Source | | |
| Distracted By Action OTHER ACTION (LOOKING AWAY FROM TASK ETC) | | | | |

WISCONSIN MOTOR VEHICLE
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| | | | | | | | |
|-------------------------------|--------------|-------------------------|--|--|------------------------------------|---------------------------------|--|
| UNIT | INDIVIDUAL | Non Motorist | | Striking Unit # | Location | | |
| | | Prior Action | | | | | |
| | | Action | | | | | |
| | Action Other | | | | | To/From School | |
| | 01 | 001 | 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 | | | | |
| | 01 | Violations | | | | | |
| UTC Number BG023981 | | Issue To? 001 | Statute Number 346.14(1m) | Description AUTOMOBILE FOLLOWING TOO CLOSELY | | | |

Unit Summary

| | | | | | | | | | |
|------|----|---|--|---|--|---|---------------------------|--|--------------------------------|
| UNIT | 02 | Unit Status IN TRANSIT | | Vehicle Operating As Classification D CLASS | | Unit Type TRUCK | | | |
| | | Vehicle Type UTILITY TRUCK/PICKUP TRUCK | | | | | 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 SOUTHBOUND | | <input type="checkbox"/> Pre Crash Tire Mark | | Speed Limit 30 | 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 TWO-WAY, NOT DIVIDED | | | Traffic Control NO CONTROL | | | Traffic Control Inoperative/Missing NO | |
| | | Surface Type BLACKTOP (BITUMINOUS) | | | Road Curvature STRAIGHT | | | Road Grade LEVEL | |
| | | Truck Bus or HazMat NO | | | | | | | |

| | | | | | | | |
|----|----|---|--|--|--|---------------------|---|
| 02 | 02 | Vehicle | | | | | |
| | | License Plate Number SV5660 | | Plate Type LTK - LIGHT TRUCK | | St WI | Country of Issuance UNITED STATES |
| | | Vehicle Identification Number 1GCVKREC3HZ259340 | | Make CHEVROLET | | Year 2017 | Model SILVERADO |
| | | Color SIL - SILVER (ALUMINUM) | | Body Style PK - PICKUP | | | Bus Use |
| | | Initial Contact Point 05 - RIGHT REAR CORNER | | | | | |



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|--------------------|--|--|
| UNIT VEHICLE | Vehicle Damage | |
| | 05 - RIGHT REAR CORNER, 06 - REAR, 07 - LEFT REAR CORNER | |
| | Extent Of Damage MINOR DAMAGE | |
| | Towed Due To Damage NOT TOWED | Vehicle Removed By OPERATOR |
| UNIT VEHICLE | Vehicle Factors | |
| | NOT APPLICABLE | |
| | What Driver Was Doing RIGHT TURN | |
| | Driver Prior Action Other | |
| UNIT VEHICLE | Driver Actions NO CONTRIBUTING ACTION | |
| | Owner Name CHRISTOPHER CORDERO (608) 304-7509 | Owner Address 200 MILL ST LA VALLE, WI 53941 , US |
| UNIT VEHICLE | Sequence Of Events | |
| | Event MOTOR VEH IN TRANSPORT | |
| | Event | |
| | Event | |
| | Event | |
| UNIT VEHICLE | Policy Holder | |
| | Insurance Company PROGRESSIVE-CASUALTY-INS-CO | Individual CHRISTOPHER CORDERO |
| UNIT INDIVIDUAL | Individual | |
| | Driver CHRISTOPHER CORDERO | Citations Issued 0 |
| | | Sex MALE |
| | | Race WHITE |
| | Address 200 MILL ST LA VALLE, WI 53941 , US | Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES |
| UNIT INDIVIDUAL | 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 | Injury Severity NO APPARENT INJURY |
| | Airbag NON DEPLOYED | |
| UNIT INDIVIDUAL | 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 |

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| | | | | | |
|------|---|--|--|----------|---------------------------------|
| UNIT | Distracted By | | Distracted By Source NOT APPLICABLE (NOT DISTRACTED) | | |
| | Distracted By Action NOT DISTRACTED | | | | |
| | 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 | | | | |
| 02 | 002 | Individual Condition APPEARED NORMAL | | | |