

6TL0CCZ7VJ
23-02502

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 6TL0CX0QBR		Primary Crash Document #	Agency Crash Number 23-02502	Investigating Officer/Deputy DEPUTY K. MCCARTY	
Crash Date 03/13/2023		Crash Time 04:30 PM	Date Arrived 03/13/2023	Time Arrived 05:05 PM	
Date Notified 03/13/2023		Time Notified 05:05 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 checked="" type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash

Description

<p>Diagram</p>	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 WAS TRAVELING NORTHBOUND ON CTH A FROM CITY OF BARABOO. UNIT 1 LEGALLY PASSED UNIT 2 WHILE ON CTH A. UNIT 2 BECAME AGITATED BY UNIT 1 AND DECIDED TO RE PASS UNIT 1. WHEN UNIT 2 PASSED UNIT 1, THE PASSENGER SIDE TIRES MADE CONTACT WITH UNIT 1'S FROM DRIVER QUARTER PANEL. UNIT 1 DRIVER UNABLE TO GET PLATE OF UNIT 2. UNIT 2 DID NOT STOP AND REPORT ACCIDENT, UNABLE TO LOCATE UNIT 2 PLATE OR DRIVER. UNIT 1 DRIVER REMOVED VEHICLE FROM SCENE AND WAS NOT INJURED. ***AMENDED INFORMATION: CONTACT MADE WITH DRIVER OF UNIT 2. UNIT 2 DRIVER DID NOT REPORT INCIDENT AS SHE WAS UNAWARE DAMAGE WAS DONE TO UNIT 1 AS THERE WAS NO DAMAGE DONE TO HER VEH. UNIT 2 DRIVER STATED UNIT 1 PASSED HER ON CTH A AND CUT HER OFF. UNIT 1 THEN REPORTEDLY SLOWED DOWN AND UNIT 2 WENT TO PASS UNIT 1. UNIT 2 DRIVER STATED AFTER SHE REPASSED UNIT 1 SHE DID NOT HEAR ANY NOISE OR ANYTHING TO SUGGEST HER VEHICLE MADE CONTACT WITH THE OTHER VEHICLE. UNIT 1 DRIVER SAW UNIT 2 DRIVING WEEKS LATER AND REPORTED IT TO THE S.O. I ISSUED UNIT 2 DRIVER A WARNING FOR DRIVING BEHAVIOR AND TO AVOID ANY CONTACT THAT WOULD BE CONSIDERED "ROAD RAGE".***

ADDITIONAL INFORMATION LEARNED REGARDING HIT AND RUN.

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Location

ON CTHA NB 48 FT N OF CRAWFORD ST IN THE TOWN OF BARABOO IN SAUK COUNTY	Latitude 43.500288073	Longitude -89.738735875
	X Coordinate 278585.25	Y Coordinate 4820017.5
	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 DAYLIGHT	
Road Surface Condition(s) DRY		Roadway Factor(s) NONE	
Environment Factor(s) NONE			
Weather Condition(s) CLEAR			
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 NON-JUNCTION	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 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	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				

Vehicle

01	License Plate Number ASJ1367	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 2HGFE2F5XNH572952	Make HONDA	Year 2022	Model CIVIC

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UNIT VEHICLE	Color SIL - SILVER (ALUMINUM)	Body Style 4D - 4DR	Bus Use
	Initial Contact Point 11 - LEFT FRONT CORNER	Vehicle Damage 11 - LEFT FRONT CORNER	
	Extent Of Damage MINOR DAMAGE		
	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR	
	What Driver Was Doing GOING STRAIGHT	Vehicle Factors NOT APPLICABLE	
	Driver Prior Action Other		
UNIT VEHICLE	Driver Actions NO CONTRIBUTING ACTION		
	Owner Name MARK KROENING (414) 559-6381	Owner Address 3458 11TH AVE WISCONSIN DELLS, WI 53965 , US	
UNIT 01	Sequence Of Events		
	01	Event MOTOR VEH IN TRANSPORT	
	02	Event	
	03	Event	
	04	Event	
UNIT	Policy Holder		
	Insurance Company PROGRESSIVE-CLASSIC-INS-CO	Individual WENDY KROENING	
UNIT INDIVIDUAL	Individual		
	Driver WENDY KROENING (414) 559-6381	Citations Issued 0	Sex FEMALE
		Date of Birth	Race WHITE
	Address 3458 11TH AVE WISCONSIN DELLS, WI 53965 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
UNIT 01	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
UNIT 001	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #

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UNIT	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	
	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	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 NORTHBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	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					

Vehicle

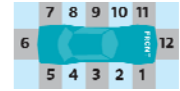
02	License Plate Number AMT8021		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1FMCU9GD9KUC22073		Make FORD	Year 2020	Model ESCAPE
	Color GRN - GREEN		Body Style 4D - 4DR		Bus Use

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UNIT VEHICLE	Initial Contact Point 01 - RIGHT FRONT CORNER		Vehicle Damage 00 - NO DAMAGE	
	Extent Of Damage NO DAMAGE			
	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
	What Driver Was Doing OVERTAKE RIGHT		Vehicle Factors NOT APPLICABLE	
	Driver Prior Action Other			
UNIT VEHICLE	Driver Actions LOOKED BUT DID NOT SEE			
	Owner Name CAROLYN DAHLKE (608) 434-1663		Owner Address E14458A COUNTY ROAD DL MERRIMAC, WI 53561 , US	
UNIT 02	Sequence Of Events			
	01	Event MOTOR VEH IN TRANSPORT		
	02	Event		
	03	Event		
	04	Event		
UNIT 02	Policy Holder			
	Insurance Company LIBERTY-MUTUAL-INS-CO		Individual CAROLYN DAHLKE	
	Individual			
UNIT INDIVIDUAL	Driver CAROLYN DAHLKE (608) 434-1663		Citations Issued 0	Sex FEMALE
	Address E14458A COUNTY ROAD DL MERRIMAC, WI 53561 , US		Date of Birth	Race WHITE
			Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
UNIT 02	Safety Equipment		On Duty Crash	
	Row 01 - FRONT ROW		Seat Position 07 - LEFT	
			Safety Equipment SHOULDER & LAP BELT	
	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

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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, NOT OBSERVED			