

6TL0DBC3G1
23-03255

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 23-03255	Investigating Officer/Deputy DEPUTY B. TRAGER	
Crash Date 04/05/2023		Crash Time 11:51 AM	Date Arrived 04/05/2023	Time Arrived 12:24 PM	
Date Notified 04/05/2023		Time Notified 11:52 AM	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
	Additional Information NONE

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

ON APRIL 5TH 2023 AT APPROXIMATELY 11:51AM ON NORTH REEDSBURG RD. AT CTY HWY A UNIT 1 WAS PARKED AT THE STOP SIGN WHEN UNIT 2 REAR ENDED UNIT 1. NO INJURIES WERE REPORTED AND BOTH VEHICLES WERE REMOVED BY THE OPERATORS.

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Location

ON REEDSBURG RD 49 FT W OF CTHA EB IN THE TOWN OF FAIRFIELD IN SAUK COUNTY	Latitude 43.532268163	Longitude -89.739045156
	X Coordinate 278677.25	Y Coordinate 4823570
	Structure Type	

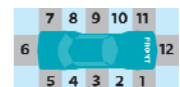
Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 03 - FRONT TO REAR	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	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 INTERSECTION-RELATED	Intersection Type FOUR-WAY 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 2	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 45	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 STOP SIGN		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)	Road Curvature STRAIGHT		Road Grade SAG(BOTTOM)	
	Truck Bus or HazMat NO				

UNIT	VEHICLE	Vehicle			
		License Plate Number ALY3923	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1G1PC5SH0G7203082	Make CHEVROLET	Year 2016	Model CRUZE LIM
		Color BLU - BLUE	Body Style SD - SEDAN		Bus Use
		Initial Contact Point 12 - FRONT	Vehicle Damage		
		Extent Of Damage MINOR DAMAGE	12 - FRONT		



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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions FOLLOWING TOO CLOSE			
01	Owner Name RYLEE JO STROHMEYER (608) 377-0658		Owner Address 400 CLARK ST TOMAH, WI 54660 , US	
	Sequence Of Events			
01	01	Event MOTOR VEH IN TRANSPORT		
	02	Event		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company PROGRESSIVE-CLASSIC-INS-CO		Individual RYLEE STROHMEYER	
UNIT INDIVIDUAL	Individual			
	Driver RYLEE STROHMEYER (608) 377-0658		Citations Issued 0	Sex FEMALE
	Address 400 CLARK ST TOMAH, WI 54660 , US		Date of Birth	Race WHITE
	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
01	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	
Distracted By		Distracted By Source PASSENGER/OTHER NON-MOTORIST		
Distracted By Action TALKING/LISTENING				

WISCONSIN MOTOR VEHICLE CRASH REPORT

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					
		Individual					
		Passenger ASPEN LEACH (608) 462-7531			Citations Issued 0	Sex FEMALE	
		Date of Birth			Race WHITE		
		Address W4521 27TH ST NECEDAH, WI 54646 , US			Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
		Safety Equipment		On Duty Crash	Safety Equipment SHOULDER & LAP BELT		
Row 01 - FRONT ROW	Seat Position 09 - RIGHT		Helmet Compliance				
Helmet Use		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					
Distracted By Action							
Non Motorist		Striking Unit #	Location				

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT	INDIVIDUAL	Prior Action			
		Action			
		Action Other	To/From School		
	01	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 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 EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 45	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 STOP SIGN	Traffic Control Inoperative/Missing NO	
		Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT	Road Grade SAG(BOTTOM)	
		Truck Bus or HazMat NO				

Vehicle

UNIT	VEHICLE	02	02	License Plate Number AJH2013	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES			
				Vehicle Identification Number 3FAHP0JA0BR276144	Make FORD	Year 2011	Model FUSION			
				Color SIL - SILVER (ALUMINUM)	Body Style SD - SEDAN	Bus Use				
				Initial Contact Point 06 - REAR	Vehicle Damage					
				Extent Of Damage MINOR DAMAGE	06 - REAR					
				Towed Due To Damage NOT TOWED	Vehicle Removed By OWNER					
				What Driver Was Doing SLOW/STOPPING						

WISCONSIN MOTOR VEHICLE CRASH REPORT

UNIT VEHICLE	Vehicle Factors		
	Driver Prior Action Other	NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION		
02	Owner Name ANTHONY KALDENBERG (608) 697-4280	Owner Address 616 13TH ST BARABOO, WI 53913 , US	
	Sequence Of Events		
01 02 03 04	Event	MOTOR VEH IN TRANSPORT	
	Event		
	Event		
	Event		
UNIT	Policy Holder		
	Insurance Company USAA-GENERAL-INDEMNITY-CO	Individual ANTHONY KALDENBERG	
UNIT INDIVIDUAL	Individual		
	Driver ANTHONY KALDENBERG (608) 697-4280	Citations Issued 0	
		Sex MALE	
		Date of Birth Race WHITE	
	Address 616 13TH ST BARABOO, WI 53913 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
02 003	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
	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		
Non Motorist	Striking Unit #	Location	

WISCONSIN MOTOR VEHICLE CRASH REPORT

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	003		