

6TL0F1BQ6P
23-07614

WISCONSIN MOTOR VEHICLE
CRASH REPORT

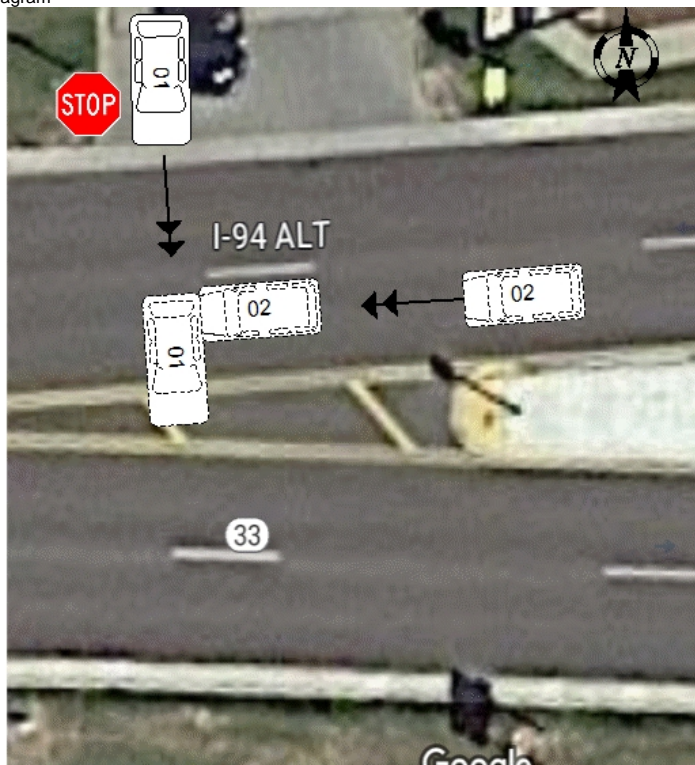
SAUK COUNTY SHERIFFS DEPARTMENT
1300 LANGE COURT
BARABOO, WI 53913
(608) 356-4895

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Document Number Override		Primary Crash Document #		Agency Crash Number 23-07614		Investigating Officer/Deputy DEPUTY D. KROLIKOWSKI	
Crash Date 07/17/2023		Crash Time 03:33 PM		Date Arrived 07/17/2023		Time Arrived 03:50 PM	
Date Notified 07/17/2023		Time Notified 03:33 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

Additional Information
NONE

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

UNIT 2 WAS WEST BOUND ON LINN ST/HWY136. UNIT 1 DEPARTED A DRIVEWAY FROM THE NORTH ONTO LINN ST & ENTERED THE PATH OF UNIT 2, NOT LEAVING ENOUGH TIME FOR UNIT 2 TO STOP IN TIME, RESULTING IN A COLLISION.

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Location

ON STH33 WB 262 FT W OF STH136 WB IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY	Latitude 43.474825427	Longitude -89.769889803
	X Coordinate 275972.3125	Y Coordinate 4817273
	Structure Type NO STRUCTURE	

Crash Scene

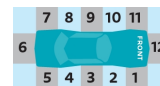
First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT		Light Condition DAYLIGHT	
Road Surface Condition(s) DRY		Roadway Factor(s) NONE	
Environment Factor(s) NONE			
Weather Condition(s) CLEAR			
Animal Type		Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY		Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land		Access Control PARTIAL 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 1	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel SOUTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 25	Total Lanes 4	
	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 CONCRETE		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

Vehicle

UNIT	VEHICLE	License Plate Number AEZ8692				Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1HGCG165X1A060799				Make HONDA	Year 2001	Model ACCORD
		Color DGR - GREEN, DARK				Body Style SD - SEDAN		Bus Use
		Initial Contact Point 08 - LEFT SIDE REAR				Vehicle Damage 08 - LEFT SIDE REAR		
		Extent Of Damage FUNCTIONAL DAMAGE						



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UNIT	Towed Due To Damage NOT TOWED		Vehicle Removed By		
	What Driver Was Doing LEAVING TRAVEL LANE		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions FAILED TO YIELD RIGHT-OF-WAY				
01	01	Owner Name AMANDA SEEFELDT (608) 393-0295		Owner Address 305 LYNN AVE # C106 BARABOO, WI 53913 , US	
		Sequence Of Events			
UNIT	01	Event MOTOR VEH IN TRANSPORT			
		Event			
		Event			
		Event			
UNIT	01	Policy Holder			
		Insurance Company STATE-FARM-GENERAL-INS-CO	Individual AMANDA SEEFELDT		
UNIT	01	Individual			
		Driver AMANDA SEEFELDT (608) 393-0295		Citations Issued 1	Sex FEMALE
		Address 305 LYNN AVE # C106 BARABOO, WI 53913 , US		Date of Birth	Race WHITE
		Driver License Number			
UNIT	01	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	001	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			

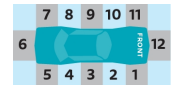
UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
		Action Other					
		To/From School					
		Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO		
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type		Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	
		Drug Type					
		Individual Condition APPEARED NORMAL					
01	001	Violations					
		UTC Number BK260403	Issue To? 001	Statute Number 346.18(3)	Description FAIL/YIELD RIGHT/WAY FROM STOP SIGN		

Unit Summary

UNIT	02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE		
		Vehicle Type (SPORT) UTILITY VEHICLE					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 WESTBOUND		<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 25	Total Lanes 4	
		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 CONCRETE			Road Curvature STRAIGHT		Road Grade LEVEL	
		Truck Bus or HazMat NO						

Vehicle

02	02	License Plate Number 270WGL		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES		
		Vehicle Identification Number 2T3JF4DV7CW227119		Make TOYOTA	Year 2012	Model RAV4		
		Color SIL - SILVER (ALUMINUM)		Body Style LL - CARRYALL			Bus Use	
		Initial Contact Point 12 - FRONT						



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UNIT VEHICLE	Extent Of Damage FUNCTIONAL DAMAGE		Vehicle Damage 01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT		
	Towed Due To Damage NOT TOWED		Vehicle Removed By		
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
UNIT VEHICLE	Driver Actions NO CONTRIBUTING ACTION				
	Owner Name STEPHEN ABBOTT (502) 436-2966		Owner Address 9 BACKBAY CIR MADISON, WI 53717 , US		
UNIT VEHICLE	Sequence Of Events				
	01	Event MOTOR VEH IN TRANSPORT			
	02	Event			
	03	Event			
	04	Event			
UNIT VEHICLE	Policy Holder				
	Insurance Company STATE-FARM-GENERAL-INS-CO		Individual ASHLEY ABBOTT		
UNIT INDIVIDUAL	Individual				
	Driver ASHLEY ABBOTT (502) 436-2966		Citations Issued 0	Sex FEMALE	
	Address 9 BACKBAY CIR MADISON, WI 53717 , US		Date of Birth	Race WHITE	
			Driver License Number		
UNIT INDIVIDUAL	Safety Equipment		On Duty Crash		
	Row 01 - FRONT ROW		Seat Position 07 - LEFT		
			SHOULDER & LAP BELT		
	Helmet Use		Helmet Compliance		
	Eye Protection		Tint Compliance		
	02 002	Injury		Airbag	
		NO APPARENT INJURY		NON DEPLOYED	
02 002	Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		
			NOT TRAPPED		
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier		
	Hospital		Date of Death		
		Time of Death			

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UNIT	INDIVIDUAL	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	
		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								