

6TL0DWMLVV

Document Number Override		Primary Crash Document #		Agency Crash Number 23-09855		Investigating Officer/Deputy DETECTIVE I. HANSON	
Crash Date 09/08/2023		Crash Time 03:54 PM		Date Arrived 09/08/2023		Time Arrived 04:06 PM	
Date Notified 09/08/2023		Time Notified 03:57 PM		Total Units 02		Total Injured 01	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 PRIVATE PROPERTY/PARKING LOT				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram		Reconstruction By	
<p>NOT TO SCALE</p> <p>PARKING LOT</p> <p>RITEWAY PLAZA MART</p>		<p>Photos By HANSON</p> <p>Additional Information PHOTOS</p>	

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

UNIT 2 WAS PARKED IN THE RITEWAY PLAZA PARKING LOT EATING AN ICE CREAM. UNIT 1 STATED HE WAS BACKING OUT OF THE PARKING STALL AND STRUCK THE REAR OF THE PARKED UNIT 2 WITH THE REAR OF HIS TRUCK. UNIT 2 STATED THAT SHE FELT PAIN IN HER NECK AND HEAD AREA. PARTIES EXCHANGED INFORMATION WITH EACH OTHER ON THEY'RE OWN FREE WILL. 9109

6TL0DWMLVV
23-09855

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

Location

ON E4905 CTHG NB 271 FT S OF USH14 EB (HOUSE/BUILDING E4905) IN THE TOWN OF SPRING GREEN IN SAUK COUNTY	Latitude 43.188955857	Longitude -90.07386744
	X Coordinate 250215.5	Y Coordinate 4786386.5
	Structure Type HOUSE/BUILDING	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location IN PARKING LANE OR ZONE	
Manner of Collision 04 - REAR TO REAR	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 NON TRAFFICWAY - PARKING LOT	
Crash Classification - Location PRIVATE PROPERTY	Crash Classification - Jurisdiction PRIVATE PROPERTY	
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 TRUCK		
	Vehicle Type UTILITY TRUCK/PICKUP TRUCK	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 WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 05	Total Lanes 0
	Most Harmful Event: Collision With PARKED MOTOR VEHICLE	Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way PARKING LOT OR PRIVATE PROPERTY	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

VEHICLE	License Plate Number TA8850	Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1FTSW21P75EB76276	Make FORD	Year 2005	Model F250
	Color TRQ - TURQUOISE	Body Style TK - TRUCK		Bus Use
	Initial Contact Point 06 - REAR	Vehicle Damage		
	Extent Of Damage MINOR DAMAGE	06 - REAR		



WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT	Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER		
	What Driver Was Doing BACKING		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions LOOKED BUT DID NOT SEE				
01	01	Owner Name BRIAN GOEBEL (608) 604-7762		Owner Address 28602 BROWN CHURCH DRIVE LONE ROCK, WI 53556 , US	
		Sequence Of Events			
UNIT	01	Event MOTOR VEH IN TRANSPORT			
	02	Event			
	03	Event			
	04	Event			
UNIT	Policy Holder				
	Insurance Company PROGRESSIVE-ADVANCED-INSURANCE-CO		Individual BRIAN GOEBEL		
UNIT	Individual				
	INDIVIDUAL	Driver BRYRICK GOEBEL (608) 604-7762		Citations Issued 0	Sex MALE
		Date of Birth		Race WHITE	
	Address 28602 BROWN CHURCH DRIVE LONE ROCK, WI 53556 , US		Driver License Number		
Safety Equipment		On Duty Crash			
01	001	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 NOT APPLICABLE (NOT DISTRACTED)			
Distracted By Action NOT DISTRACTED					

WISCONSIN MOTOR VEHICLE
CRASH REPORT

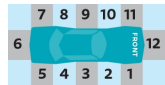
UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
		Action Other				To/From School	
		Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO		
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results		
		Drug Type					
		Individual Condition APPEARED NORMAL					
		UNIT	INDIVIDUAL	Individual			
Passenger VINCENT LESCH (608) 867-0351	Citations Issued 0			Sex MALE			
Date of Birth				Race WHITE			
Address 28165 MUNZ DR LONE ROCK, WI 53556 , US				Driver License Number			
Safety Equipment				On Duty Crash	Safety Equipment		
Row 01 - FRONT ROW	Seat Position 09 - RIGHT			SHOULDER & LAP BELT			
Helmet Use				Helmet Compliance			
Eye Protection				Tint Compliance			
UNIT	INDIVIDUAL			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		

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 LEGALLY PARKED	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 NOT ON ROADWAY	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 05	Total Lanes 0
		Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE	
		Traffic Way PARKING LOT OR PRIVATE PROPERTY		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

UNIT	VEHICLE	02	02	License Plate Number 206XFR	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
				Vehicle Identification Number JF1GJAA63FH004385	Make SUBARU	Year 2020	Model IMPREZA
				Color GRN - GREEN	Body Style 4D - 4DR		Bus Use
				Initial Contact Point 06 - REAR	Vehicle Damage 06 - REAR, 07 - LEFT REAR CORNER		
				Extent Of Damage FUNCTIONAL DAMAGE			
				Towed Due To Damage NOT TOWED			
				What Driver Was Doing LEGALLY PARKED			

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT VEHICLE	Driver Prior Action Other		Vehicle Factors	
			NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
02	Owner Name JACKELINE HILL (608) 604-1450		Owner Address 29598 NEEDLE LANE LONE ROCK, WI 53556 , US	
	Sequence Of Events			
01	Event MOTOR VEH IN TRANSPORT			
02	Event			
03	Event			
04	Event			
UNIT	Policy Holder			
	Insurance Company GEICO-ADVANTAGE-INSURANCE-CO		Individual JACKELINE HILL	
UNIT INDIVIDUAL	Individual			
	Occupant Of Motor Vehicle Not In Transport JACKELINE HILL (608) 604-1450		Citations Issued 0	Sex FEMALE
	Address 29598 NEEDLE LANE LONE ROCK, WI 53556 , US		Date of Birth	Race HISPANIC
			Driver License Number	
02	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	
003	Injury	Injury Severity SUSPECTED MINOR INJURY	Airbag UNKNOWN	
02	Ejected UNKNOWN	Ejection Path UNKNOWN		Trapped/Extricated UNKNOWN
	Medical Transport EMS GROUND		EMS Agency Identifier 6000554	EMS Run # 23B118
	Hospital UPLAND HILLS HEALTH		Date of Death	Time of Death
	Distracted By			
	Distracted By Source			
Distracted By Action				
Non Motorist				
Striking Unit #		Location		

UNIT	INDIVIDUAL		
	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		