

6TL0BJ1GP7
24-01404

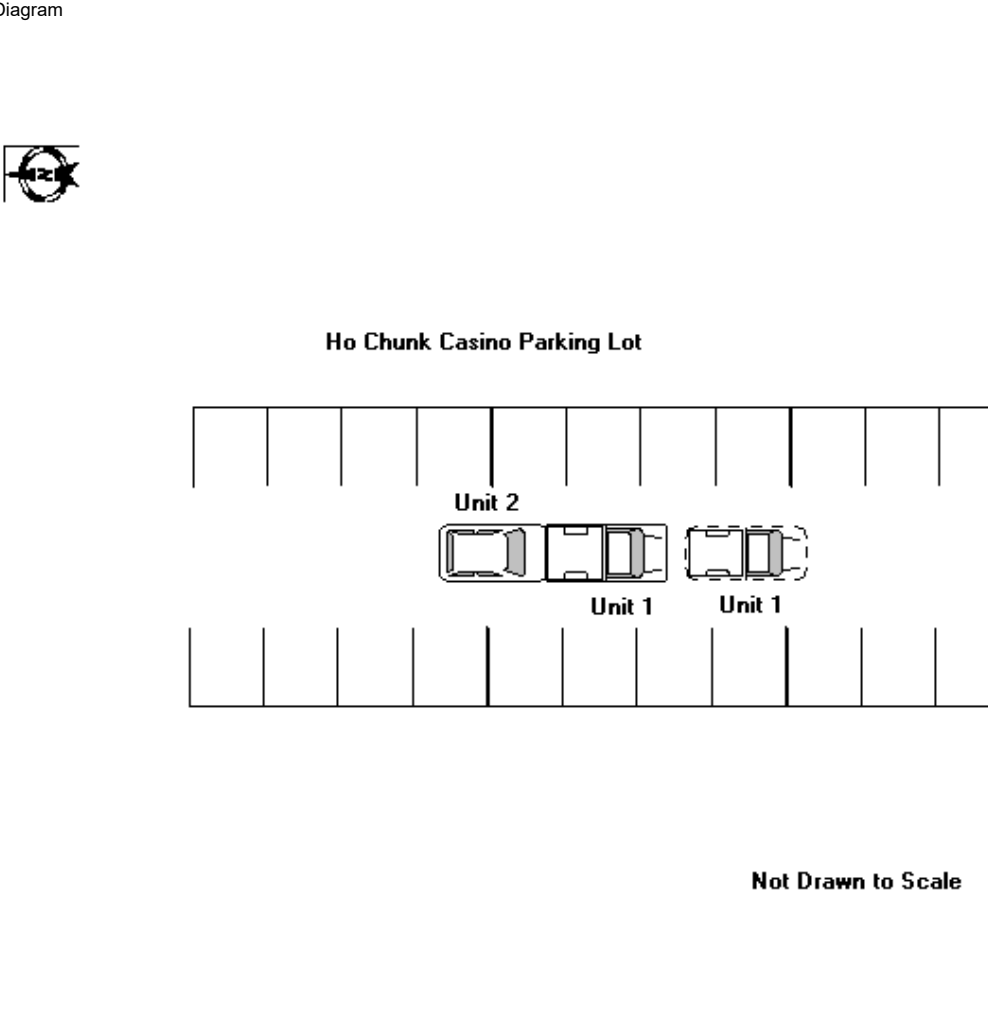
WISCONSIN MOTOR VEHICLE CRASH REPORT

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 24-01404	Investigating Officer/Deputy DEPUTY J. MACASKILL	
Crash Date 02/08/2024		Crash Time 12:30 PM	Date Arrived 02/08/2024	Time Arrived 01:43 PM	
Date Notified 02/08/2024		Time Notified 01:42 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 PRIVATE PROPERTY/PARKING LOT		<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 2/8/24 AT APPROXIMATELY 1230, UNIT 2 WAS STOPPED BEHIND UNIT 1 IN THE PARKING LOT OF HO CHUNK CASINO. UNIT 1 BEGAN TO BACK UP IN THE PARKING LOT AND BAKED INTO UNIT 2. OPERATOR OF UNIT 1 STATED THEY LOOKED BUT DID NOT SEE UNIT 2 BEHIND THEM. THE TRAILER HITCH ON UNIT 1 STRUCK THE FRONT OF UNIT 2 CAUSING DAMAGE TO THE FRONT OF THE VEHICLE. WHILE SPEAKING WITH OPERATOR OF UNIT 1, THEY STATED THE CRASH WAS COMPLETELY THEIR FAULT AS THEY DID NOT SEE UNIT 2 BEHIND THEM.

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Location

PARKING LOT CTHBD NB LOT 3214 (FIRE 3214) IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude 43.528344007	Longitude -89.775165761
	X Coordinate 275743.9375	Y Coordinate 4823231
	Structure Type FIRE	

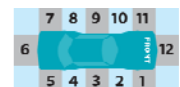
Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location IN PARKING LANE OR ZONE	
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) 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 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 CrashTire Mark	Speed Limit	Total Lanes
	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				

UNIT	VEHICLE	Vehicle			
		License Plate Number EW1519	Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1FT7W2BTXFED25685	Make FORD	Year 2015	Model F250 SUPER
		Color BRZ - BRONZE	Body Style PK - PICKUP		Bus Use
		Initial Contact Point 06 - REAR	Vehicle Damage		
		Extent Of Damage NO DAMAGE	00 - NO DAMAGE		



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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
	What Driver Was Doing BACKING		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions LOOKED BUT DID NOT SEE			
01	Owner Name MICHELLE STABBE (262) 389-5166		Owner Address 8348 FOLEY RD RACINE, WI 53402 , US	
	Sequence Of Events			
01	01	Event MOTOR VEH IN TRANSPORT		
	02	Event		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company OWNERS-INS-CO		Individual MICHELLE STABBE	
UNIT INDIVIDUAL	Individual			
	Driver MICHELLE STABBE (262) 389-5166		Citations Issued 0	Sex FEMALE
	Address 8348 FOLEY RD RACINE, WI 53402 , 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	
001	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				

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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 NOT OBSERVED					

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 NOT ON ROADWAY	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit	Total Lanes
	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				

UNIT	VEHICLE	Vehicle			
		License Plate Number AUH9411	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1G6AX5SSXG0123104	Make CADILLAC	Year 2016	Model CTS LUXURY
		Color WHI - WHITE	Body Style 4D - 4DR	Bus Use	
		Initial Contact Point 12 - FRONT	Vehicle Damage 12 - FRONT		
		Extent Of Damage MINOR DAMAGE	Vehicle Removed By OPERATOR		
		Towed Due To Damage NOT TOWED			

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UNIT VEHICLE	What Driver Was Doing STOP IN TRAFFIC		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions NO CONTRIBUTING ACTION				
	Owner Name JENNIFER CAMBIO (608) 385-6684		Owner Address 2123 KING ST LA CROSSE, WI 54601 , US		
UNIT 02	Sequence Of Events				
	01	Event MOTOR VEH IN TRANSPORT			
	02	Event			
	03	Event			
	04	Event			
UNIT	Policy Holder				
	Insurance Company STATE-FARM-GENERAL-INS-CO		Individual JENNIFER CAMBIO		
	Individual				
UNIT INDIVIDUAL	Driver JENNIFER CAMBIO (608) 385-6684		Citations Issued 0	Sex FEMALE	
	Address 2123 KING ST LA CROSSE, WI 54601 , US		Date of Birth	Race WHITE	
	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES				
UNIT 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		
	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		

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UNIT INDIVIDUAL 02 002	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 NOT OBSERVED		