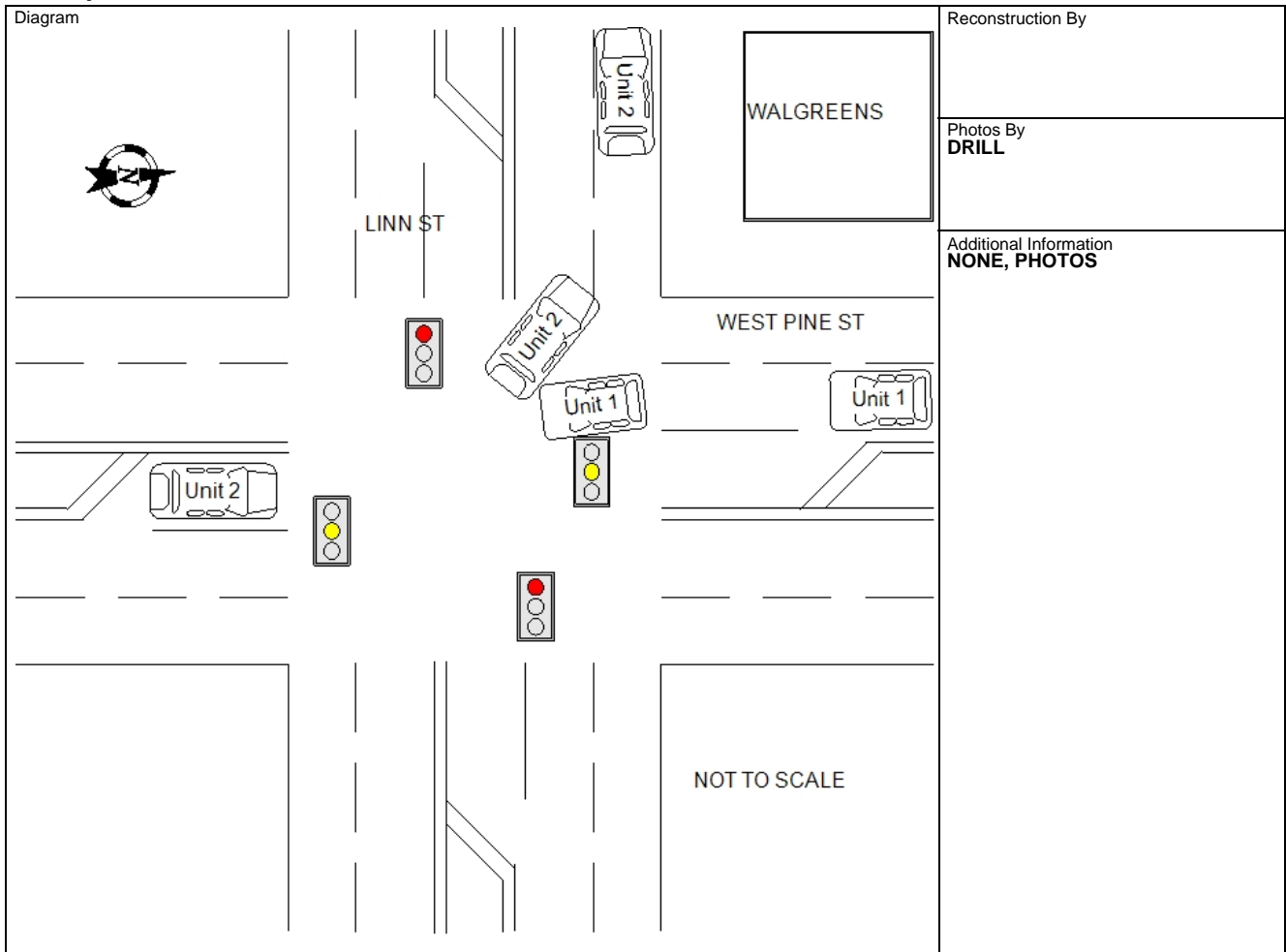


6TL0CR2KTV

Document Number Override		Primary Crash Document #		Agency Crash Number SC24-03861		Investigating Officer/Deputy DEPUTY Z. DRILL		
Crash Date 04/19/2024		Crash Time 12:00 PM		Date Arrived 04/19/2024		Time Arrived 12:10 PM		
Date Notified 04/19/2024		Time Notified 12:03 PM		Total Units 02		Total Injured 00	Total Killed 00	
<input type="checkbox"/> On Emergency	<input checked="" 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



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

UNIT ONE WAS TRAVELING SOUTH BOUND ON WEST PINE ST AT LINN ST. UNIT ONE WAS TRAVELING THROUGH A YELLOW LIGHT WHEN UNIT TWO TRAVELING NORTH BOUND ON WEST PINE ST ATTEMPTED A TURN WEST ONTO LINN ST AT A FLASHING YELLOW TURN LIGHT. UNIT TWO CUT OFF UNIT ONE AT THE INTERSECTION AND DID NOT YIELD THE RIGHT OF WAY. UNIT ONE ATTEMPTED BRAKING BUT STRUCK THE PASSENGER SIDE REAR OF UNIT TWO. UNIT ONE SUSTAINED MINOR DAMAGE TO THE FRONT PASSENGER SIDE OF THE VEHICLE. DRIVER OF UNIT ONE IMMEDIATELY REPORTED THE INCIDENT AND COULD ONLY IDENTIFY UNIT TWO AS A GREEN SEDAN. UNIT TWO NEVER STOPPED FOR THE COLLISION AND CONTINUED WEST ON LINN ST/HWY 136 WITHOUT REPORTING THE INCIDENT. DRIVER OF UNIT ONE PROVIDED CRASH REPORT INFORMATION FOR INSURANCE PURPOSES. THIS ENDED MY INVOLVEMENT IN THIS INCIDENT.

Location

ON CTHBD SB 25 FT N OF STH33 WB IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY	Latitude 43.474871332	Longitude -89.768831807
	X Coordinate 276058.0625	Y Coordinate 4817275
	Structure Type NO STRUCTURE	

Crash Scene

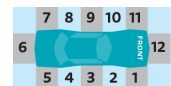
First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 01 - ANGLE		Light Condition DAYLIGHT	
Road Surface Condition(s) DRY		Roadway Factor(s) NONE	
Environment Factor(s) NONE			
Weather Condition(s) CLEAR			
Animal Type		Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY		Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land		Access Control NO CONTROL	Special Study
Within Interchange Area YES	Junction Location INTERSECTION	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 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel SOUTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 30	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 TRAFFIC SIGNAL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

Vehicle

UNIT	01	Vehicle			
		License Plate Number ASY7473	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 19XFL2H52PE008938	Make HONDA	Year 2023	Model CIVIC
		Color BLK - BLACK	Body Style HB - HATCHBACK		Bus Use
		Initial Contact Point 01 - RIGHT FRONT CORNER	Vehicle Damage 01 - RIGHT FRONT CORNER		



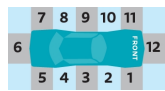
UNIT	Towed Due To Damage NOT TOWED		Vehicle Removed By		
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions NO CONTRIBUTING ACTION				
01	01	Owner Name SUSAN BLODGETT (608) 963-1164		Owner Address 1541 21ST ST BARABOO, WI 53913 , US	
		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 SUSAN BLODGETT		
UNIT	01	Individual			
		Driver GABRIELLA HART-BLODGETT (608) 963-1164		Citations Issued 0	Sex FEMALE
		Address 1541 21ST ST BARABOO, WI 53913 , US		Date of Birth Race	
		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	

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				

Unit Summary

UNIT	02	Unit Status HIT AND RUN		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? UNKNOWN	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 30	Total Lanes 4		
		Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT			Special Function UNKNOWN		Emergency Motor Vehicle Use NOT APPLICABLE	
		Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control TRAFFIC SIGNAL		Traffic Control Inoperative/Missing NO		
		Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL		
		Truck Bus or HazMat NO						

UNIT	VEHICLE	02	Vehicle				
			License Plate Number	Plate Type	St	Country of Issuance	
			Vehicle Identification Number	Make	Year	Model	
			Color	Body Style	Bus Use		
			Initial Contact Point 05 - RIGHT REAR CORNER	Vehicle Damage			
			Extent Of Damage FUNCTIONAL DAMAGE	05 - RIGHT REAR CORNER			
			Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR			

UNIT VEHICLE	What Driver Was Doing	Vehicle Factors	
	Driver Prior Action Other	UNKNOWN	
	Driver Actions UNKNOWN		
	Owner Name	Owner Address	
02	Sequence Of Events		
01	Event	MOTOR VEH IN TRANSPORT	
02	Event		
03	Event		
04	Event		
UNIT INDIVIDUAL	Individual		
	Driver	Citations Issued 0	Sex
		Date of Birth	Race
	Address	Driver License Number	
UNIT 002	Safety Equipment		On Duty Crash
			Safety Equipment
	Row 99 - UNKNOWN	Seat Position	NONE USED - VEHICLE OCCUPANT
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	Injury		Airbag
	NO APPARENT INJURY		NOT APPLICABLE
	Ejected	Ejection Path	Trapped/Extricated
	NOT APPLICABLE	NOT EJECTED/NOT APPLICABLE	NOT APPLICABLE
	Medical Transport	EMS Agency Identifier	EMS Run #
NOT TRANSPORTED			
Hospital	Date of Death	Time of Death	
Distracted By		Distracted By Source	
Distracted By Action			
Non Motorist		Striking Unit #	
		Location	
Prior Action			

UNIT	INDIVIDUAL	Action				
		Action Other		To/From School		
	02	002	Drug & Alcohol			
			Suspected Alcohol Use		Suspected Drug Use	
			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			