

6TL0CR2KV2  
24-05004

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 <b>24-05004</b>	Investigating Officer/Deputy <b>DEPUTY Z. DRILL</b>	
Crash Date <b>05/17/2024</b>		Crash Time <b>04:15 PM</b>	Date Arrived <b>05/17/2024</b>	Time Arrived <b>04:25 PM</b>	
Date Notified <b>05/17/2024</b>		Time Notified <b>04:17 PM</b>	Total Units <b>02</b>	Total Injured <b>00</b>	Total Killed <b>00</b>
<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 <b>YES, SCHOOL BUS DIREC</b>		Tags	
<input checked="" type="checkbox"/> Reportable	Crash Type <b>PRIVATE PROPERTY/PARKING LOT</b>		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

Description

Diagram		Reconstruction By
		Photos By <b>REPORTING PARTY</b>
<p>S10690 Otter Creek Rd</p> <p>Otter Creek Rd</p>		Additional Information <b>PHOTOS</b>

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

UNIT 1 WAS PARKED AT RESIDENCE, UNIT 2 (BUS) DROPPING OFF LAST CHILD FOR THE DAY. DRIVER OF UNIT 2 WAS SPEAKING WITH OWNER OF UNIT 1, AFTER CONVERSATION COMPLETE, DRIVER OF UNIT 2 BACKED UP INTO UNIT 1 WHICH WAS PARKED AND UNOCCUPIED IN THE DRIVEWAY. MINOR FUNCTIONAL DAMAGE AND NO INJURIES AS UNIT 1 WAS UNOCCUPIED. PARTIES EXCHANGED INFORMATION AND OWNER OF UNIT 1 ATTEMPTED SELF REPORT ON DOT WEB SITE BUT RAN INTO ISSUES. NO CITATIONS ISSUED FOR PRIVATE PROPERTY ACCIDENT AS BOTH PARTIES SPOKE AND ISSUE RESOLVED THROUGH INSURANCE.

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Location

Table with location details including Private Property address, Latitude (43.278477755), Longitude (-89.790303898), X Coordinate (273591.21875), Y Coordinate (4795521), and Structure Type (HOUSE/BUILDING).

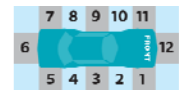
Crash Scene

Table with crash scene details including First Harmful Event (PARKED MOTOR VEHICLE), Manner of Collision (OTHER), Road Surface Condition (DRY), Environment Factor (NONE), Weather Condition (CLEAR), Animal Type, and Crash Classification (PRIVATE PROPERTY).

Unit Summary

Table with unit summary details including Unit Status (LEGALLY PARKED), Vehicle Operating As Classification (D CLASS), Unit Type (AUTOMOBILE), and various other unit attributes.

Table with vehicle details including License Plate Number (408UGR), Vehicle Identification Number (1C4RJFAG2JC252349), Color (BLK - BLACK), and Extent Of Damage (MINOR DAMAGE).



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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OPERATOR</b>
	What Driver Was Doing <b>LEGALLY PARKED</b>	Vehicle Factors <b>NOT APPLICABLE</b>
	Driver Prior Action Other	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>	
01	Owner Name <b>ARAINA BREUNIG (608) 370-3770</b>	Owner Address <b>S10065A GILDING RD PRAIRIE DU SAC, WI 53578 , US</b>
<b>Sequence Of Events</b>		
01	Event <b>PARKED MOTOR VEHICLE</b>	
02	Event <b>MOTOR VEH IN TRANSPORT</b>	
03	Event	
04	Event	
UNIT	<b>Policy Holder</b>	
	Insurance Company <b>STATE-FARM-GENERAL-INS-CO</b>	Individual <b>ARAINA BREUNIG</b>

### Unit Summary

UNIT	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>B CLASS</b>	Unit Type <b>BUS</b>
	Vehicle Type <b>SCHOOL BUS</b>	Operating As Endorsements <b>S - SCHOOL BUS</b>	
UNIT	Total Occs <b>1</b>	Train/Bus # Recorded <b>1</b>	Total # Citations Issued <b>0</b>
	Insurance? <b>YES</b>	Direction Of Travel <b>NOT ON ROADWAY</b>	Total Trailers <b>0</b>
UNIT	Most Harmful Event: Collision With <b>PARKED MOTOR VEHICLE</b>	Special Function <b>VEHICLE USED AS SCHOOL BUS</b>	Total HazMat Types <b>0</b>
	Traffic Way <b>PARKING LOT OR PRIVATE PROPERTY</b>	Speed Limit <b>N/A</b>	Total Lanes <b>1</b>
UNIT	Surface Type <b>BLACKTOP (BITUMINOUS)</b>	Pre CrashTire Mark <input type="checkbox"/>	Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>
	Truck Bus or HazMat <b>VEHICLE DESIGNED TO CARRY 9 OR MORE PPL, INCLUDING DRIVER</b>	Traffic Control <b>NO CONTROL</b>	Traffic Control Inoperative/Missing <b>NO</b>
UNIT	Vehicle	Road Curvature <b>STRAIGHT</b>	Road Grade <b>LEVEL</b>
	License Plate Number <b>ALJ3214</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>
UNIT	Vehicle Identification Number <b>1HA6GUBG4LN012677</b>	Make <b>FRRV</b>	Year <b>2021</b>
	Color <b>WHI - WHITE</b>	Body Style <b>BU - BUS</b>	Model <b>BUS TRUCK</b>
UNIT	Initial Contact Point <b>06 - REAR</b>	Bus Use <b>SCHOOL</b>	
	Extent Of Damage <b>NO DAMAGE</b>	Vehicle Damage <b>00 - NO DAMAGE</b>	



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	What Driver Was Doing <b>BACKING</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>LOOKED BUT DID NOT SEE, UNKNOWN</b>			
02	Owner Name <b>LAMERS BUS LINE INC</b>		Owner Address <b>2407 S POINT RD GREEN BAY, WI 54313 , US</b>	
	<b>Sequence Of Events</b>			
01 02 03 04	Event <b>MOTOR VEH IN TRANSPORT</b>			
	Event <b>PARKED MOTOR VEHICLE</b>			
	Event			
	Event			
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>NEW-YORK-MARINE-AND-GENERAL-INSURANC</b>		Organization/Company <b>LAMERS BUS LINES INC</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>ROZANNE ROBSON (608) 370-9010</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>
	Address <b>1614 KENT CT SAUK CITY, WI 53583 , US</b>		Date of Birth	Race <b>WHITE</b>
Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>				
02	<b>Safety Equipment</b>		On Duty Crash	
	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>			
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>		
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
001	<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	
	Airbag <b>NON DEPLOYED</b>			
	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</b>
	Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #
	Hospital		Date of Death	Time of Death
<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>		
Distracted By Action <b>NOT DISTRACTED</b>				

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<b>UNIT</b>	<b>INDIVIDUAL</b>	<b>Non Motorist</b>		Striking Unit #	Location				
		Prior Action							
		Action							
		Action Other				To/From School			
<b>02</b>	<b>001</b>	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>				
		Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type	Alcohol Test Results				
		Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type	Drug Test Results				
		Drug Type							
		Individual Condition <b>APPEARED NORMAL</b>							
		<b>Carrier</b>							
		<b>02</b>	<b>01</b>	<input checked="" type="checkbox"/> <b>Use Vehicle Owner Same as Carrier</b>			Source <b>VEHICLE-SIDE</b>		
				Name <b>LAMERS BUS LINE INC USDOT# 100115</b>			Address <b>2407 S POINT RD GREEN BAY, WI 54313 , US</b>		
				GVWR <b>10,000 LBS OR LESS</b>		Vehicle Configuration <b>BUS/LARGE VAN (SEATS FOR 9-15 OCCUPANTS, INC</b>		Cargo Body Type <b>BUS/LARGE VAN (SEATS FOR 9-15 OCCUPA</b>	
				US DOT # <b>100115</b>		Carrier Type <b>OTHER OPERATION/NOT SPECIFIED</b>		Permitted Load <b>NOT APPLICABLE</b>	
<input type="checkbox"/> <b>OS/OW Load</b>	WI Permit Number			<input type="checkbox"/> <b>Permitted Vehicle On Permitted Route</b>	<input type="checkbox"/> <b>Escort Vehicle Required By Permit</b>	<input type="checkbox"/> <b>Escort Vehicle Present</b>			
Measured Height		Measured Length		Measured Width		Measured Weight			