

6TL092T5L1  
18-00243

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>18-00243</b>		Investigating Officer/Deputy <b>DEPUTY J. KIRKENG</b>	
Crash Date <b>01/07/2018</b>		Crash Time <b>02:55 PM</b>		Date Arrived <b>01/07/2018</b>		Time Arrived <b>03:04 PM</b>	
Date Notified <b>01/07/2018</b>		Time Notified <b>02:56 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>NO</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
	Additional Information <b>NONE</b>

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

UNIT 2 WAS LEGALLY PARKED IN THE PARKING LOT. UNIT 1 ATTEMPTED TO BACK UP, WHILE DOING SO STRUCK UNIT 2 IN THE FRONT CORNER ON THE DRIVER'S SIDE CAUSING MINOR DAMAGE. THE RO'S OF THE VEHICLES EXCHANGED INFORMATION. THE RO OF UNIT 2 THEN STATED HE WOULD LIKE A REPORT COMPLETED FOR INSURANCE PURPOSES.

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Location

PARKING LOT CTHBD NB LOT IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude <b>43.527081376</b>	Longitude <b>-89.772574759</b>
	X Coordinate <b>275948.625</b>	Y Coordinate <b>4823084</b>
	Structure Type <b>NO STRUCTURE</b>	

Crash Scene

First Harmful Event <b>PARKED MOTOR VEHICLE</b>	First Harmful Event Location <b>IN PARKING LANE OR ZONE</b>	
Manner of Collision <b>02--FRONT TO REAR</b>	Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>DRY</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>		
Weather Condition(s) <b>CLOUDY</b>		
Animal Type	Relation To Trafficway <b>NON TRAFFICWAY - PARKING LOT</b>	
Crash Classification - Location <b>PRIVATE PROPERTY</b>	Crash Classification - Jurisdiction <b>PRIVATE PROPERTY</b>	
Tribal Land	Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>

Unit Summary

01 UNIT	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>TRUCK</b>		
	Vehicle Type <b>UTILITY TRUCK/PICKUP TRUCK</b>			Operating As Endorsements	
	Total Occs <b>1</b>	Train/Bus # Injured	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>YES</b>	Direction Of Travel <b>UNKNOWN</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>N/A</b>	Total Lanes <b>0</b>
	Most Harmful Event: Collision With <b>PARKED MOTOR VEHICLE</b>		Special Function <b>NO SPECIAL FUNCTION</b>	Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>PARKING LOT OR PRIVATE PROPERTY</b>		Traffic Control <b>NO CONTROL</b>	Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>CONCRETE</b>		Road Curvature <b>UNKNOWN</b>	Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>				

01 UNIT VEHICLE	<b>Vehicle</b>			
	License Plate Number <b>BRB0BLF</b>	Plate Type <b>LTK - LIGHT TRUCK</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>1N6AD0EV2AC422250</b>	Make <b>NISSAN</b>	Year <b>2010</b>	Model <b>FRONTIER L</b>
	Color <b>BLK - BLACK</b>	Body Style <b>PK - PICKUP</b>		Bus Use <b>NOT A BUS</b>
	Initial Contact Point <b>7--LEFT REAR CORNER</b>	Vehicle Damage		
	Extent Of Damage <b>MINOR DAMAGE</b>	<b>7--LEFT REAR CORNER</b>		

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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>BACKING</b>	Vehicle Factors		
		Driver Prior Action Other	<b>NOT APPLICABLE</b>		
		Driver Actions <b>NO CONTRIBUTING ACTION</b>			
01	01	Driver Distractions <b>UNKNOWN IF DISTRACTED</b>			
		Owner Name <b>BARBARA JESPERSEN (608) 393-2239</b>	Owner Address <b>S5596A BLUFF RD BARABOO, WI 53913 , US</b>		
<b>Sequence Of Events</b>					
UNIT	INDIVIDUAL	01	Event <b>PARKED MOTOR VEHICLE</b>		
		02	Event		
		03	Event		
		04	Event		
<b>Policy Holder</b>					
UNIT	INDIVIDUAL	Insurance Company <b>AMERICAN-FAMILY-INS-CO</b>	Individual <b>BARBARA JESPERSEN</b>		
		Driver <b>BARBARA JESPERSEN (608) 393-2239</b>	Citations Issued <b>0</b>	Sex <b>FEMALE</b>	
UNIT	INDIVIDUAL	Date of Birth	Race <b>WHITE</b>		
		Address <b>S5596A BLUFF RD BARABOO, WI 53913 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
01	001	<b>Equipment</b>	On Duty Crash	Safety Equipment	
		Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>	<b>RESTRAINT USE UNKNOWN</b>		
		Helmet Use	Helmet Compliance		
		Eye Protection	Tint Compliance		
		<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 APPLICABL</b>	Trapped/Extricated <b>NOT TRAPPED</b>	

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UNIT INDIVIDUAL 01 001	Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier	EMS Run #		
	Hospital	Date of Death	Time of Death		
	<b>Non Motorist</b>	Striking Unit #	Prior Action	Location	To/From School
	Action				
	Action Other				
	<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>				

## Unit Summary

UNIT 02	Unit Status <b>LEGALLY PARKED</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>AUTOMOBILE</b>		
	Vehicle Type <b>PASSENGER VAN</b>			Operating As Endorsements	
	Total Occs <b>1</b>	Train/Bus # Injured	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>YES</b>	Direction Of Travel <b>NOT ON ROADWAY</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>N/A</b>	Total Lanes <b>0</b>
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>		Special Function <b>NO SPECIAL FUNCTION</b>	Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>PARKING LOT OR PRIVATE PROPERTY</b>		Traffic Control <b>NO CONTROL</b>	Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>CONCRETE</b>		Road Curvature <b>UNKNOWN</b>	Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>				

UNIT VEHICLE 02 02	<b>Vehicle</b>			
	License Plate Number <b>AAH2780</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>2C4RC1BG4DR709136</b>	Make <b>CHRYSLER</b>	Year <b>2013</b>	Model <b>TOWN &amp; AMP</b>
	Color <b>BLU - BLUE</b>	Body Style <b>VN - VAN</b>	Bus Use <b>NOT A BUS</b>	
	Initial Contact Point <b>11--LEFT FRONT CORNER</b>	Vehicle Damage		
	Extent Of Damage <b>MINOR DAMAGE</b>	<b>11--LEFT FRONT CORNER</b>		

# WISCONSIN MOTOR VEHICLE CRASH REPORT

UNIT	VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OWNER</b>			
		What Driver Was Doing <b>LEGALLY PARKED</b>		Vehicle Factors			
		Driver Prior Action Other		<b>NOT APPLICABLE</b>			
		Driver Actions <b>NO CONTRIBUTING ACTION</b>					
02	02	Driver Distractions <b>NOT DISTRACTED</b>					
		Owner Name <b>ROBERT SCHANKE (608) 415-0233</b>		Owner Address <b>251 4TH ST REEDSBURG, WI 53959 , US</b>			
<b>Sequence Of Events</b>							
UNIT	01	Event <b>MOTOR VEH IN TRANSPORT</b>					
		Event					
		Event					
		Event					
UNIT	02	<b>Policy Holder</b>					
		Insurance Company <b>WEST-BEND-MUTUAL-INS-CO</b>		Individual <b>ROBERT SCHANKE</b>			
		<b>Individual</b>					
		Occupant Of <b>ROBERT SCHANKE JR (608) 415-0233 Transport</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>		
UNIT	INDIVIDUAL	Date of Birth		Race <b>WHITE</b>			
		Address <b>251 4TH ST REEDSBURG, WI 53959 , US</b>		Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>			
		<b>Equipment</b>	On Duty Crash	Safety Equipment <b>NONE USED - VEHICLE OCCUPANT</b>			
		Seat Position <b>OTHER</b>		Helmet Compliance			
02	002	Helmet Use		Tint Compliance			
		Eye Protection		Airbag <b>UNKNOWN</b>			
		<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Ejection Path <b>UNKNOWN</b>			
		Ejected <b>UNKNOWN</b>		Trapped/Extricated <b>UNKNOWN</b>			

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<b>UNIT</b> <b>INDIVIDUAL</b>       <b>02</b> <b>002</b>	Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier		EMS Run #		
	Hospital	Date of Death		Time of Death		
	<b>Non Motorist</b>	Striking Unit #	Prior Action	Location		To/From School
	Action					
	Action Other					
	<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>					