18-06329

WISCONSIN MOTOR VEHICLE CRASH REPORT

Document Number Override	Primary Crash Document # Agency Crash Number 18-06329		Investigating Officer/Deputy DEPUTY B. SCHLOUGH				
Crash Date 06/16/2018	Crash Time 04:15 PM	Date Arrived 06/16/2018	Time Arrived	Time Arrived 04:35 PM			
Date Notified 06/16/2018	Time Notified 04:20 PM	Total Units 02	Total Injured Total Killed 00 00				
2	lit and Run			or Towed Reporting Threshold			
Government	Active School Zone	School Bus Related	Tags				
Property Reportable	Crash Type PRIVATE PROPERTY/PARK		Amend	ded Secondary Crash			
Description							
Diagram				Reconstruction By			
				Photos By			
	ALDI'S PARKING I	.OT					
				Additional Information			
	jui /						
DRAWING NOT TO SCALE							
✔ I, a sworn law enforcem	ent officer, agree that I have n	ot added any CJIS data in t	his report.				
UNIT 2 REMAINED LEGALLY P	ARKED. CONTACT WAS MADE WIT			MPACT UNIT 1 LEFT THE SCENE AND E AND OPERATOR STATED SHE DID			
NOT KNOW SHE BACKED INTO) UNIT 2.						

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WISCONSIN MOTOR VEHICLE CRASH REPORT

L	_00	ation								
ſ	-	614 W PINE USH12 W	/В			5			Longitud	
	398 FT S OF BERKLEY BLVD				43.47599	6408		-89.768	79791	
	-	(FIRE 614 W PINE)				X Coordina 276064.9			Y Coord 481740	
	IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY				Structure Type					
(Cra	sh Scene								
T	First	Harmful Event				First Harm	Iful Event L	ocation		
	PAF	RKED MOTOR VEHICL	E			OFF ROADWAY, LOCATION UNKNOWN				
	Manner of Collision 04REAR TO REAR					Light Condition				
					DAYLIG					
	Roa	d Surface Condition(s)				Roadway	Factor(s)			
	WE	Т								
Ē	Envi	ironment Factor(s)								
	WE	ATHER CONDITIONS				NONE				
ŀ	Wea	ather Condition(s)								
	RAI	N								
-	Anin	nal Type				Relation T	o Trafficwa	у		
						NON TR	AFFICWA	Y - PARKIN	G LOT	
Ī		sh Classification - Location						Jurisdiction		
_	-	BLIC PROPERTY						ISDICTION		
	Tribal Land					Access Co NO CON				Special Study
	With NO	in Interchange Area	Junction Location NON-JUNCTION		Intersectio	n Type INTERSE	CTION			
L	Jni	t Summary								
l		t Summary			erating As C	lassification		Unit Type		
l	Unit IN T	Status IRANSIT		Vehicle Ope D CLASS		lassification		AUTOMO		
	Unit IN T Vehi	Status TRANSIT icle Type				lassification				nents
ן -	Unit IN T Vehi PAS	Status TRANSIT icle Type SSENGER CAR	Train/Rus # Injured	D CLASS				AUTOMOI Operating A	s Endorser	
	Unit IN T Vehi PAS	Status TRANSIT icle Type	Train/Bus # Injured	D CLASS			Total Trail 0	AUTOMOI Operating A	s Endorser	nents Mat Types
5	Unit IN T Vehi PAS Tota 1 Insu	Status IRANSIT icle Type SSENGER CAR Il Occs rance?	Direction Of Travel	D CLASS	tions Issued		Total Trail 0 Speed Lin	AUTOMOI Operating A ers	s Endorser Total Haz 0 Total Land	Mat Types
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	Unit IN T Vehi PAS Tota 1 Insu YES	Status IRANSIT icle Type SSENGER CAR Il Occs rance?	Direction Of Travel WESTBOUND	D CLASS	tions Issued CrashTire Mark		Total Trail 0 Speed Lin	AUTOMOI Operating A ers	s Endorser Total Haz 0 Total Land 1 Motor Vehi	Mat Types es cle Use
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	Unit IN T Vehi PAS Tota 1 Insu YES PAF Traff PAF Surf: BLA	Status TRANSIT icle Type SSENGER CAR al Occs rance? S t Harmful Event: Collision N RKED MOTOR VEHICL fic Way RKING LOT OR PRIVA ace Type ACKTOP (BITUMINOU:	Direction Of Travel WESTBOUND With E TE PROPERTY	D CLASS	tions Issued CrashTire Mark Inction CIAL FUNC Trol TROL ature		Total Trail 0 Speed Lin	AUTOMOI Operating A ers nit Emergency NOT APPI Traffic Contr NO	s Endorser Total Haz 0 Total Land 1 Motor Vehi LICABLE rol Inoperat	Mat Types es cle Use
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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Towed Due To Damage	Vehicle Removed By							
		NOT TOWED	OPERATOR							
		What Driver Was Doing BACKING	Vehicle Factors							
		Driver Prior Action Other	NOT APPLICABLE							
		Driver Actions	I							
.	щ	NO CONTRIBUTING ACTION								
UNIT	VEHICL									
5	EH									
	>									
		Driver Distractions								
		NOT DISTRACTED								
2	01									
0	0									
		Owner Name	Owner Address							
		SHARON MARIE MUSSER	821 9TH ST							
		(608) 356-5127	BARABOO, WI 53913 , US							
		Soquence Of Events								
		Event								
	01	PARKED MOTOR VEHICLE								
	02	Event								
	03	Event								
	04	Event								
		Deliev Helder								
UNIT		Policy Holder Insurance Company	Individual							
5		AMERICAN-FAMILY-INS-CO	SHARON MUSSER							
		Individual								
		Driver	Citations Issued	Sex						
	L,	SHARON MARIE MUSSER	0	FEMALE						
	NΑ	(608) 356-5127	Date of Birth	Race						
UNIT				WHITE						
5	INDIVIDUA	Address 821 9TH ST	Driver License Number							
	Z	BARABOO, WI 53913 , US	STATE: WISCONSIN COUNTRY: UNITED STATES							
		Equipment On Duty Crash	Safety Equipment							
		Seat Position 1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY	SHOULDER & LAP BELT							
		Helmet Use	Helmet Compliance							
		Eye Protection	Tint Compliance							
5	001	Injury Severity	Airbag							
0	ŏ	Injury NO APPARENT INJURY	NON DEPLOYED							
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABL	Trapped/Extricated NOT TRAPPED						
Nicco	ncin M		ort does not include any CJIS data.	Crash Date 06/16/2018						

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Medical Transport NOT TRANSPORTED		EMS Agency Ident	ifier	EMS Run #	EMS Run #		
		Hospital	U		Date of Death		Time of De	Time of Death	
					Date of Death				
		Non Motorist	triking Unit #	Prior Action	Location				To/From School
		Action							
	_								
	NA								
UNIT	ē								
	INDIVIDUAL								
	Z								
		Action Other							
	Ľ	Drug & Alcohol	uspected Alcohol L IO	Jse	Suspected Drug Us	se			
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type		Alcohol Te	st Results	
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test	Results	
01	001	Drug Type							
	0								
		Individual Condition							
		NOT OBSERVED							
		t Summary 🗖							
	Unit	t Summary			/ehicle Operating As (Classification			
	Unit	t Summary 🗖			/ehicle Operating As (O CLASS	Classification	AUTOMO	DBILE As Endorsem	ients
02	Unit LEC Vehi	t Summary Status GALLY PARKED		C		Classification	AUTOMO		ients
	Unit LEC Vehi PAS	t Summary Status SALLY PARKED icle Type	Train/Bus # Inj	ured T	O CLASS	d Tc	AUTOMO	As Endorsem	
	Unit LEC Vehi PAS Tota 1	t Summary Status SALLY PARKED icle Type SSENGER VAN	Train/Bus # Inj	ured T 0	OCLASS	d To	AUTOMC	As Endorsem	lat Types
02	Unit LEC Vehi PAS Tota 1 Insu YES	t Summary Status SALLY PARKED icle Type SSENGER VAN II Occs rance? S	Direction Of Tr.	ured T avel ADWAY	O CLASS	d To	AUTOMC Operating J Detal Trailers Deed Limit /A	As Endorsem Total HazN 0 Total Lane 1	Nat Types s
	Unit LEO Vehi PAS Tota 1 Insu YES Mos	t Summary Status SALLY PARKED icle Type SSENGER VAN I Occs rance? S t Harmful Event: Collision	Direction Of Tr NOT ON RO	ured T avel ADWAY	O CLASS	d To 0 e Sp	AUTOMC Operating A Detal Trailers Deeed Limit /A Emergency	As Endorsem Total HazN 0 Total Lane	Nat Types s
02	Unit LEC Vehi PAS Tota 1 Insu YES Mos	t Summary Status SALLY PARKED icle Type SSENGER VAN II Occs rance? S	Direction Of Tr NOT ON RO	ured T avel ADWAY S	O CLASS	d To 0 e Sp	AUTOMC Operating / Dotal Trailers Deed Limit /A Emergency NOT APP	As Endorsem Total HazM 0 Total Lane 1 / Motor Vehic	Nat Types s de Use
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18-06329

WISCONSIN MOTOR VEHICLE **CRASH REPORT**

		Towed Due To Damage	Vehicle Removed By	
		NOT TOWED	OPERATOR	
		What Driver Was Doing LEGALLY PARKED	Vehicle Factors	
		Driver Prior Action Other	NOT APPLICABLE	
F	Ц	NO CONTRIBUTING ACTION		
UNIT	Ę			
	VEHICLE			
	-			
		Driver Distractions NOT DISTRACTED		
2	2			
02	02			
		Owner Name	Owner Address	
		LISA L SUSSEK	1245 PINEVIEW DR REEDSBURG, WI 53959, US	
		Sequence Of Events		
	2			
	0			
	02	Event		
	03	Event		
	0			
	04	Event		
F	I	Policy Holder		
UNIT		Insurance Company	Individual	
_		STATE-FARM-GENERAL-INS-CO	LISA SUSSEK	
	l	ndividual Occupant Of Motor Vehicle Not In Transport	Citations Issued	Sex
	_	LISA LYNN SUSSEK	0	FEMALE
	NAI		Date of Birth	Race
UNIT	١ <u>ם</u>			WHITE
S	NDIVIDUA	Address 1245 PINEVIEW DR	Driver License Number	
	Z	REEDSBURG, WI 53959 , US	STATE: WISCONSIN COUNTRY: UN	NITED STATES
		On Duty Crash	Safety Equipment	
		Seat Position	NONE USED - VEHICLE OCCUPAN	т
		3FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER		
		Helmet Use	Helmet Compliance	
1		Eye Protection	Tint Compliance	
1				
02	002	Injury Severity NO APPARENT INJURY	Airbag UNKNOWN	
		Ejected	Ejection Path	Trapped/Extricated
1		UNKNOWN	UNKNOWN	UNKNOWN
			ort does not include any CJIS data.	Crash Date 06/16/2018
Form	DT40	00	5 of 6	Crash Time 04:15 PM

18-06329

WISCONSIN MOTOR VEHICLE CRASH REPORT

					EMS Agency Identifier		EMS Run #	
	NOT TRANSPORTED Hospital				Date of Death		Time of Death	
	Non Motor		Striking Unit # Prior Action		Location			To/From School
		Action		·				
⊢	UAL							
	INDIVIDUAL							
	IJ							
		Action Other						
		Action Other						
	Ľ	Drug & Alcohol	Suspected Alcohol L NO	Jse	Suspected Drug Us	Se		
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type		Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Results	
07	002	Drug Type						
	Ū	Individual Condition						
		APPEARED NORI	MAL					