

6TL0B4X4JB  
18-09395

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>18-09395</b>	Investigating Officer/Deputy <b>DEPUTY E. KNULL</b>	
Crash Date <b>08/26/2018</b>		Crash Time <b>10:47 AM</b>	Date Arrived <b>08/26/2018</b>	Time Arrived <b>11:15 AM</b>	
Date Notified <b>08/26/2018</b>		Time Notified <b>10:47 AM</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 checked="" type="checkbox"/> Government Property		<input type="checkbox"/> Active School Zone	School Bus Related <b>NO</b>	Tags	
<input type="checkbox"/> Reportable	Crash Type <b>DT4000 (STANDARD CRASH)</b>		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

Description

<p>Diagram</p>	Reconstruction By
	Photos By <b>KNULL</b>
	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 FACING SB ON N WEBB AVE WAITING TO TURN WB. UNIT 2 STOPPED BEHIND UNIT 1. UNIT 1 REALIZED HE WANTED TO GO EB AND BACKED UP TO REPOSITION AND BACKED INTO UNIT 2. UNIT 2 WAS ON DUTY POLICE CAR AND SUSTAINED VERY MINOR DAMAGE TO LICENSE PLATE. UNIT 1 DID NOT SUSTAIN DAMAGE. BOTH VEHICLES THEN PARKED ON E MAIN ST FACING WB. NO INJURIES REPORTED AND BOTH VEHICLES REMOVED FROM THE SCENE BY EACH RESPECTIVE DRIVER.

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Location

ON N WEBB AVE 46 FT N OF S WEBB AVE IN THE CITY OF REEDSBURG IN SAUK COUNTY	Latitude <b>43.532631126</b>	Longitude <b>-90.010126701</b>
	X Coordinate <b>256773.53125</b>	Y Coordinate <b>4824368</b>
	Structure Type <b>NO STRUCTURE</b>	

Crash Scene

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>	First Harmful Event Location <b>ON ROADWAY</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>CLEAR</b>		
Animal Type	Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>	Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land	Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>INTERSECTION</b>	Intersection Type <b>FOUR-WAY INTERSECTION</b>

Unit Summary

<b>UNIT 01</b>	Unit Status <b>IN TRANSIT</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>SOUTHBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>25</b>	Total Lanes <b>3</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>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>TRAFFIC SIGNAL</b>		Traffic Control Inoperative/Missing <b>NO</b>
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>
	Truck Bus or HazMat <b>NO</b>				

<b>UNIT 01</b>	<b>Vehicle</b>			
	License Plate Number <b>2669BK</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>IL</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>8BRPE7DD9GE123037</b>	Make <b>MERCEDES BENZ</b>	Year <b>2016</b>	Model <b>SPRINTER</b>
	Color <b>WHI - WHITE</b>	Body Style <b>VN - VAN</b>		Bus Use <b>NOT A BUS</b>
	Initial Contact Point <b>6--REAR</b>	Vehicle Damage		
	Extent Of Damage <b>NO DAMAGE</b>	<b>NO DAMAGE</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>UNSAFE BACKING</b>		
01	01	Driver Distractions <b>NOT DISTRACTED</b>		
		Owner Name <b>MICHAEL L HAHN (815) 262-7062</b>	Owner Address <b>5385 WIL ACRE DR LOVES PARK, IL 61111 , US</b>	
<b>Sequence Of Events</b>				
UNIT	INDIVIDUAL	01	Event <b>MOTOR VEH IN TRANSPORT</b>	
		02	Event	
		03	Event	
		04	Event	
<b>Policy Holder</b>				
UNIT	INDIVIDUAL	Insurance Company <b>PROGRESSIVE-CLASSIC-INS-CO</b>	Individual <b>MICHAEL HAHN</b>	
		Driver <b>MICHAEL L HAHN (815) 262-7062</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>
		Address <b>5385 WIL ACRE DR LOVES PARK, IL 61111 , US</b>	Date of Birth [REDACTED]	Race <b>WHITE</b>
			Driver License Number [REDACTED]	<b>STATE: ILLINOIS COUNTRY: UNITED STATES</b>
<b>Equipment</b>	On Duty Crash	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>		
	Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>	Helmet Compliance		
	Helmet Use	Tint Compliance		
	Eye Protection			
01	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 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>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>AUTOMOBILE</b>		
	Vehicle Type <b>PASSENGER CAR</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>SOUTHBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>25</b>	Total Lanes <b>3</b>
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>		Special Function <b>POLICE</b>	Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>TRAFFIC SIGNAL</b>	Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>	Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>				

UNIT VEHICLE 02 02	<b>Vehicle</b>				
	License Plate Number <b>2902</b>	Plate Type <b>OFF - MUNICIPAL OFFICI</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
	Vehicle Identification Number <b>1FAHP2MK7GG106605</b>	Make <b>FORD</b>	Year <b>2016</b>	Model <b>TAURUS INT</b>	
	Color <b>BLK - BLACK</b>	Body Style <b>4D - 4DR</b>		Bus Use <b>NOT A BUS</b>	
	Initial Contact Point <b>12--FRONT</b>	Vehicle Damage			
	Extent Of Damage <b>MINOR DAMAGE</b>	<b>12--FRONT</b>			

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UNIT	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>	
	What Driver Was Doing <b>STOP IN TRAFFIC</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
	Driver Distractions <b>NOT DISTRACTED</b>			
02	02	Owner Name <b>CITY OF REEDSBURG (608) 524-6404</b>		Owner Address <b>134 S LOCUST ST REEDSBURG, WI 53959 , US</b>
<b>Sequence Of Events</b>				
	01	Event <b>MOTOR VEH IN TRANSPORT</b>		
	02	Event		
	03	Event		
	04	Event		
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>CITIES-&amp;-VILLAGES-MUTUAL-INS-CO</b>		Government <b>CITY OF REEDSBURG</b>	
UNIT	<b>Individual</b>			
	Driver <b>JONATHON SCHAEFER (608) [REDACTED]</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
	Address <b>[REDACTED] WI [REDACTED]</b>		Date of Birth <b>[REDACTED]</b>	Race <b>WHITE</b>
			Driver License Number <b>[REDACTED]</b> STATE: WISCONSIN COUNTRY: UNITED STATES	
	<b>Equipment</b>		Safety Equipment	
On Duty Crash <b>POLICE</b>		<b>SHOULDER &amp; LAP BELT</b>		
Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>		Helmet Compliance		
Helmet Use		Tint Compliance		
Eye Protection				
02	002	<b>Injury</b>		Airbag
		Injury Severity <b>NO APPARENT INJURY</b>	<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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	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>					
<b>Property Owner</b>						
PROP OWNER	01 Government CITY OF REEDSBURG (608) 524-6404			Address 134 S LOCUST ST REEDSBURG, WI 53959 , US		
	<b>Fixed Objects Struck</b>					
01	Striking Unit	Struck Object		Structure Number	Damage Tag Number	
	01	OTHER OBJECT - NOT FIXED				