

6TL09N3P5J  
18-10105

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>18-10105</b>	Investigating Officer/Deputy <b>DEPUTY C. FRANK</b>	
Crash Date <b>09/11/2018</b>		Crash Time <b>04:12 PM</b>	Date Arrived <b>09/11/2018</b>	Time Arrived <b>04:21 PM</b>	
Date Notified <b>09/11/2018</b>		Time Notified <b>04:13 PM</b>	Total Units <b>02</b>	Total Injured <b>03</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>DT4000 (STANDARD CRASH)</b>		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

<p>Diagram</p>	Reconstruction By
	Photos By <b>9198</b>
	Additional Information <b>PHOTOS</b>

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

ON THE ABOVE DATE AND TIME UNIT 1 AND UNIT 2 WERE WESTBOUND ON HWY 154. UNIT 1 STRUCK UNIT 2 IN THE REAR. UNIT 1 IS AN AUTOMOBILE AND UNIT 2 IS A HORSE DRAWN AMISH BUGGY. UNIT 1 OPERATOR STATED SHE WAS WESTBOUND ON HWY 154 WHEN HER CHILD SAID SOMETHING TO HER. SHE STATED SHE LOOKED BACK AT THE CHILD IN THE BACK SEAT. WHEN SHE LOOKED FORWARD AGAIN SHE SAW THE WESTBOUND AMISH BUGGY WHERE SHE HAD NO TIME TO REACT AND STRUCK UNIT 2 IN THE REAR. THE AMISH HORSE SURVIVED WITH INJURIES TO THE REAR LEFT ANKLE AND ABRASIONS TO THE BODY FROM THE HARNESSSES.



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UNIT	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>OWNER</b>		
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors  <b>NOT APPLICABLE</b>		
	Driver Prior Action Other				
	Driver Actions <b>OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER</b>				
01	Driver Distractions <b>DISTRACTION/INATTENTION, PASSENGER</b>				
	Owner Name <b>TIFFANY ANN HAHN (608) 415-9036</b>		Owner Address <b>315 MYRTLE ST REEDSBURG, WI 53959 , US</b>		
<b>Sequence Of Events</b>					
01	Event	<b>OTHER NON-MOTORIST</b>			
	Event				
	Event				
	Event				
UNIT	<b>Policy Holder</b>				
	Insurance Company <b>GEICO-ADVANTAGE-INSURANCE-CO</b>		Individual <b>TIFFANY HAHN</b>		
UNIT	<b>Individual</b>				
	Driver <b>TIFFANY ANN HAHN (608) 415-9036</b>		Citations Issued <b>2</b>	Sex <b>FEMALE</b>	
	Address <b>315 MYRTLE ST REEDSBURG, WI 53959 , US</b>		Date of Birth [REDACTED]	Race <b>WHITE</b>	
			Driver License Number [REDACTED] <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
01	<b>Equipment</b>	On Duty Crash		Safety Equipment  <b>NONE USED - VEHICLE OCCUPANT</b>	
		Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</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	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	INDIVIDUAL	<b>Individual</b>					
		Passenger <b>TAYLA A HANSEN</b> <b>(608) 415-9036</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>		
				Date of Birth [REDACTED]	Race <b>WHITE</b>		
		Address <b>315 MYRTLE ST</b> <b>REEDSBURG, WI 53959 , US</b>		Driver License Number			
		<b>Equipment</b>		On Duty Crash	Safety Equipment		
		Seat Position <b>4--SECOND SEAT-LEFT SIDE(MOTORCYCLE/BI</b>		<b>CHILD RESTRAINT SYSTEM - FORWARD FACING</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>		
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		

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UNIT 01	INDIVIDUAL	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>Individual</b>				
		Passenger <b>TESSA L HANSEN</b> <b>(608) 415-9036</b>	Citations Issued <b>0</b>	Sex <b>FEMALE</b>		
		Address <b>315 MYRTLE ST</b> <b>REEDSBURG, WI 53959 , US</b>	Date of Birth [REDACTED]	Race <b>WHITE</b>		
UNIT 01	INDIVIDUAL	Driver License Number				
		<b>Equipment</b>	On Duty Crash	Safety Equipment		
		Seat Position <b>6--SECOND SEAT-RIGHT SIDE</b>	<b>CHILD RESTRAINT SYSTEM - FORWARD FACING</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>		
		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

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UNIT	INDIVIDUAL	Action					
		Action Other					
	01	003	<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>				
	02	01	<b>Violations</b>				
			UTC Number <b>AI389979</b>	Issue To? <b>001</b>	Statute Number <b>347.48(2m)(b)</b>	Seq Num <b>001</b>	Description <b>VEHICLE OPERATOR FAIL/WEAR SEAT BELT</b>
			UTC Number <b>AI389978</b>	Issue To? <b>001</b>	Statute Number <b>346.89(1)</b>	Seq Num <b>001</b>	Description <b>INATTENTIVE DRIVING</b>

Unit Summary

UNIT	02	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>O CLASS</b>		Unit Type <b>EQUIPMENT</b>			
		Vehicle Type <b>HORSE AND BUGGY</b>					Operating As Endorsements		
		Total Occs <b>3</b>		Train/Bus # Injured		Total # Citations Issued <b>0</b>		Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
		Insurance? <b>NO</b>		Direction Of Travel <b>WESTBOUND</b>		<input type="checkbox"/> Pre Crash Tire Mark		Speed Limit <b>55</b>	Total Lanes <b>2</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>NO CONTROL</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	<b>Vehicle</b>					
		License Plate Number		Plate Type	St	Country of Issuance	
		Vehicle Identification Number		Make	Year	Model	
		Color <b>BLK - BLACK</b>		Body Style <b>HE - HORSE-BUGGY</b>		Bus Use <b>NOT A BUS</b>	
		Initial Contact Point <b>6--REAR</b>		Vehicle Damage			
		Extent Of Damage <b>DISABLING DAMAGE</b>		<b>ALL AREAS</b>			

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UNIT	VEHICLE	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>OWNER</b>			
		What Driver Was Doing <b>GOING STRAIGHT</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>PAUL F MAST</b>		Owner Address <b>E2875 HWY 154 HILLPOINT, WI 53937 , US</b>			
<b>Sequence Of Events</b>							
UNIT	INDIVIDUAL	01	Event <b>MOTOR VEH IN TRANSPORT</b>				
		02	Event				
		03	Event				
		04	Event				
02	004	<b>Individual</b>					
		Driver <b>CLARA C MAST</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>		
				Date of Birth [REDACTED]	Race <b>WHITE</b>		
		Address <b>E2875 HWY 154 HILLPOINT, WI 53937 , US</b>		Driver License Number			
		<b>Equipment</b>		On Duty Crash	Safety Equipment		
		Seat Position <b>3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER</b>		<b>NOT APPLICABLE</b>			
		Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
		<b>Injury</b>		Injury Severity <b>SUSPECTED MINOR 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>		
Medical Transport <b>EMS GROUND</b>		EMS Agency Identifier <b>6001024</b>	EMS Run #				

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<b>UNIT</b>	<b>INDIVIDUAL</b>	Hospital <b>REEDSBURG AREA MED CTR</b>		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>UNIT</b>	<b>INDIVIDUAL</b>	<b>Individual</b>				
Occupant Of Non-Motor Vehicle Transportation Device <b>ANNA L MAST</b>				Citations Issued <b>0</b>		Sex <b>FEMALE</b>		
				Date of Birth [REDACTED]		Race <b>WHITE</b>		
Address <b>E2875 HWY 154 HILLPOINT, WI 53937 , US</b>				Driver License Number				
<b>Equipment</b>				On Duty Crash		Safety Equipment		
Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>				<b>NOT APPLICABLE</b>				
Helmet Use				Helmet Compliance				
Eye Protection				Tint Compliance				
<b>Injury</b>				Injury Severity <b>SUSPECTED MINOR 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>		
Medical Transport <b>EMS GROUND</b>		EMS Agency Identifier <b>6001024</b>		EMS Run #				
Hospital <b>REEDSBURG AREA MED CTR</b>		Date of Death		Time of Death				
<b>Non Motorist</b>		Striking Unit #	Prior Action	Location		To/From School		



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		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	INDIVIDUAL	<b>Individual</b>			
				Occupant Of Non-Motor Vehicle Transportation Device <b>GARY D MAST</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
				Address <b>E2875 HWY 154 HILLPOINT, WI 53937 , US</b>		Date of Birth [REDACTED]	Race <b>WHITE</b>
				Driver License Number			
<b>Equipment</b>	On Duty Crash			Safety Equipment			
	Seat Position <b>2--FRONT SEAT-MIDDLE</b>			<b>NOT APPLICABLE</b>			
Helmet Use				Helmet Compliance			
Eye Protection				Tint Compliance			
UNIT	INDIVIDUAL			<b>Injury</b>	Injury Severity <b>SUSPECTED MINOR INJURY</b>		Airbag <b>NON DEPLOYED</b>
					Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABL</b>
		Medical Transport <b>EMS GROUND</b>		EMS Agency Identifier <b>6001024</b>		EMS Run #	
		Hospital <b>REEDSBURG AREA MED CTR</b>		Date of Death		Time of Death	
		<b>Non Motorist</b>		Striking Unit #	Prior Action	Location	To/From School

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<b>UNIT</b>	<b>INDIVIDUAL</b>	Action		
		Action Other		
<b>02</b>	<b>006</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>		