

6TL0BGSFCN
19-00413

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 19-00413	Investigating Officer/Deputy DEPUTY B. LUBER	
Crash Date 01/10/2019		Crash Time 04:00 PM	Date Arrived 01/10/2019	Time Arrived 04:28 PM	
Date Notified 01/10/2019		Time Notified 04:05 PM	Total Units 02	Total Injured 00	Total Killed 00
<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 NO		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

<p>Diagram</p>	Reconstruction By
	Photos By
	Additional Information NONE

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

I RESPONDED TO A CRASH AT THE INTERSECTION OF HWY 14 AND HWY 23. AT THE TIME OF THE CRASH THE STOP LIGHTS WERE MALFUNCTIONING (FLASHING RED) AND THE STOP SIGNS WERE DEPLOYED. UNIT 2 WAS STOPPED AT THE STOP LIGHT. AS UNIT 2 WAS ACCELERATING FROM THE STOP, UNIT 2 WAS STRUCK FROM BEHIND BY UNIT 1. OPERATOR OF UNIT 1 SAID SHE WAS NOT PAYING ATTENTION AND DID NOT SEE THE FLASHING RED LIGHT. NO INJURIES REPORTED. BOTH VEHICLES REMOVED FROM SCENE BY OPERATORS.

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Location

ON USH14 WB 35 FT E OF PRAIRIE VIEW RD/ STH23 WB IN THE TOWN OF SPRING GREEN IN SAUK COUNTY	Latitude 43.189696586	Longitude -90.073726595
	X Coordinate 250229.96875	Y Coordinate 4786468.5
	Structure Type	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 02--FRONT TO REAR	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLEAR		
Animal Type	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location INTERSECTION	Intersection Type FOUR-WAY INTERSECTION

Unit Summary

UNIT	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR	Operating As Endorsements			
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 1	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 45	Total Lanes 2
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT	Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED	Traffic Control TRAFFIC SIGNAL		Traffic Control Inoperative/Missing YES	
	Surface Type BLACKTOP (BITUMINOUS)	Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO				

UNIT	VEHICLE	Vehicle			
		License Plate Number ABH1594	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 2G1WA5EK8A1222038	Make CHEVROLET	Year 2010	Model IMPALA
		Color WHI - WHITE	Body Style SD - SEDAN		Bus Use NOT A BUS
		Initial Contact Point 12--FRONT	Vehicle Damage 12--FRONT		
	Extent Of Damage MINOR DAMAGE				

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UNIT	VEHICLE	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR		
		What Driver Was Doing ACCELERATING IN ROAD	Vehicle Factors		
		Driver Prior Action Other	NOT APPLICABLE		
		Driver Actions FOLLOWING TOO CLOSE, DISREGARDED RED LIGHT, OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER			
01	01	Owner Name RENEE LEA RODGERS-HACH (608) 588-5776	Owner Address 848 MUSCODA, WI 53573 , US		
		Sequence Of Events			
UNIT	VEHICLE	01 Event MOTOR VEH IN TRANSPORT			
		02 Event			
		03 Event			
		04 Event			
UNIT	VEHICLE	Policy Holder			
		Insurance Company MT-MORRIS-MUTUAL-INS-CO	Individual RENEE RODGERS-HACH		
UNIT	INDIVIDUAL	Individual			
		Driver RENEE LEA RODGERS-HACH (608) 588-5776	Citations Issued 1	Sex FEMALE	
		Address 848 MUSCODA, WI 53573 , US	Date of Birth	Race WHITE	
			Driver License Number STATE: WYOMING COUNTRY: UNITED STATES		
01	001	Safety Equipment			
		On Duty Crash	Safety Equipment		
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY	SHOULDER & LAP BELT		
		Helmet Use	Helmet Compliance		
		Eye Protection	Tint Compliance		
		Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED	
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED	
		Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #	
Hospital	Date of Death	Time of Death			
Distracted By		Distracted By Source UNKNOWN			
Distracted By Action OTHER ACTION (LOOKING AWAY FROM TASK ETC)					

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UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location	
		Prior Action				
		Action				
	Action Other					To/From School
	Drug & Alcohol		Suspected Alcohol Use NO		Suspected Drug Use NO	
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type		Alcohol Test Results	
	Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	
	Drug Type					
	Individual Condition APPEARED NORMAL					
	01	001	Violations			
UTC Number AE139820			Issue To? 001	Statute Number 346.89(1)	Description INATTENTIVE DRIVING	

Unit Summary

UNIT	02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE			
		Vehicle Type PASSENGER CAR					Operating As Endorsements		
		Total Occs 4		Train/Bus # Recorded		Total # Citations Issued 0		Total Trailers 0	Total HazMat Types 0
		Insurance? YES		Direction Of Travel WESTBOUND		<input type="checkbox"/> Pre Crash Tire Mark		Speed Limit 45	Total Lanes 2
		Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT			Special Function NO SPECIAL FUNCTION			Emergency Motor Vehicle Use NOT APPLICABLE	
		Traffic Way TWO-WAY, NOT DIVIDED			Traffic Control TRAFFIC SIGNAL			Traffic Control Inoperative/Missing YES	
		Surface Type BLACKTOP (BITUMINOUS)			Road Curvature STRAIGHT			Road Grade LEVEL	
		Truck Bus or HazMat NO							

02	02	Vehicle					
		License Plate Number 886TDT		Plate Type AUT - AUTOMOBILE		St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1GNKVGKD6GJ190143		Make CHEVROLET		Year 2016	Model TRAVERSE L
		Color GLD - GOLD		Body Style UT - SPORT UTILITY VEHICLE			Bus Use NOT A BUS
		Initial Contact Point 6--REAR					

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UNIT VEHICLE	Vehicle Damage	
	Extent Of Damage MINOR DAMAGE	6--REAR
	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR
	What Driver Was Doing ACCELERATING IN ROAD	Vehicle Factors
UNIT VEHICLE	Driver Prior Action Other	NOT APPLICABLE
	Driver Actions NO CONTRIBUTING ACTION	
02 02	Owner Name JUSTIN T STAPLETON (608) 588-5776	Owner Address S12894 MCKENNA RD LONE ROCK, WI 53556 , US
	Sequence Of Events	
01 02 03 04	Event MOTOR VEH IN TRANSPORT	
	Event	
	Event	
	Event	
UNIT	Policy Holder	
	Insurance Company PROGRESSIVE-CASUALTY-INS-CO	Individual JUSTIN STAPLETON
UNIT INDIVIDUAL	Individual	
	Driver HEATHER ELIZABETH STAPLETON (608) 588-5776	Citations Issued 0
		Sex FEMALE
		Date of Birth
	Race WHITE	
Address S12894 MCKENNA RD LONE ROCK, WI 53556 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
02 002	Safety Equipment	
	On Duty Crash	Safety Equipment
	Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY	SHOULDER & LAP BELT
	Helmet Use	Helmet Compliance
	Eye Protection	Tint Compliance
Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #
Hospital	Date of Death	Time of Death

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UNIT	Distracted By Distracted By Source NOT APPLICABLE (NOT DISTRACTED)	
	Distracted By Action NOT DISTRACTED	
	Non Motorist	Striking Unit # Location
	Prior Action	
	Action	
	Action Other To/From School	
	Drug & Alcohol	Suspected Alcohol Use NO Suspected Drug Use NO
	Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type Alcohol Test Results
	Drug Test Given TEST NOT GIVEN	Drug Test Type Drug Test Results
	Drug Type	
Individual Condition APPEARED NORMAL		
UNIT	Individual	
	Passenger BRYCE T STAPLETON (608) 588-5776	Citations Issued 0 Sex MALE
		Date of Birth Race WHITE
	Address S12894 MCKENNA RD LONE ROCK, WI 53556 , US	Driver License Number
	Safety Equipment	On Duty Crash Safety Equipment SHOULDER & LAP BELT
	Seat Position 4--SECOND SEAT-LEFT SIDE(MOTORCYCLE/BI	Helmet Compliance
	Helmet Use	Tint Compliance
	Eye Protection	
	Injury	Injury Severity NO APPARENT INJURY Airbag NON DEPLOYED
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE Trapped/Extricated NOT TRAPPED
Medical Transport NOT TRANSPORTED	EMS Agency Identifier EMS Run #	
Hospital	Date of Death Time of Death	
Distracted By	Distracted By Source	

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UNIT	Distracted By Action					
	Non Motorist	Striking Unit #	Location			
		Prior Action				
	INDIVIDUAL	Action				
		Action Other	To/From School			
	02	003	Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use NO	
			Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	Alcohol Test Results	
			Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results	
			Drug Type			
			Individual Condition APPEARED NORMAL			
UNIT	INDIVIDUAL	Individual				
		Passenger BAYLEN R STAPLETON (608) 588-5776	Citations Issued 0	Sex MALE		
			Date of Birth	Race WHITE		
		Address S12894 MCKENNA RD LONE ROCK, WI 53556 , US	Driver License Number			
		02	004	Safety Equipment	On Duty Crash	Safety Equipment BOOSTER SEAT
				Seat Position 9--THIRD SEAT-RIGHT SIDE		
				Helmet Use	Helmet Compliance	
				Eye Protection	Tint Compliance	
		02	004	Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
				Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
Medical Transport NOT TRANSPORTED	EMS Agency Identifier			EMS Run #		
Hospital	Date of Death			Time of Death		
Distracted By	Distracted By Source					
Distracted By Action						

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UNIT	Non Motorist		Striking Unit #	Location		
	Prior Action					
	Action					
INDIVIDUAL	Action Other					
	To/From School					
	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO		
02	004	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type		
		Alcohol Test Results		Drug Test Given TEST NOT GIVEN		
		Drug Test Type		Drug Test Results		
		Drug Type				
		Individual Condition APPEARED NORMAL				
UNIT	INDIVIDUAL	Individual				
		Passenger MADelyn K STAPLETON (608) 588-5776		Citations Issued 0		Sex FEMALE
		Date of Birth		Race WHITE		
		Address S12894 MCKENNA RD LONE ROCK, WI 53556 , US		Driver License Number		
02	005	Safety Equipment		On Duty Crash		
		Seat Position 6--SECOND SEAT-RIGHT SIDE		Safety Equipment CHILD RESTRAINT SYSTEM - FORWARD FACING		
		Helmet Use		Helmet Compliance		
		Eye Protection		Tint Compliance		
		Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED	
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED		
Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #		
Hospital		Date of Death		Time of Death		
Distracted By		Distracted By Source				
Distracted By Action						

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		Prior Action				
	Action					
	Action Other				To/From School	
	02	005	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO
			Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	Alcohol Test Results	
			Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results	
			Drug Type			
			Individual Condition APPEARED NORMAL			