

6TL09T1TMT  
19-01474

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMENT  
1300 LANGE COURT  
BARABOO, WI 53913  
(608) 356-4895

6TL09T1TMT

|  |   |                                       |  |   |  |
|--|---|---------------------------------------|--|---|--|
| Document Number Override                     |   | Primary Crash Document #              | Agency Crash Number<br><b>19-01474</b> | Investigating Officer/Deputy<br><b>DEPUTY J. BODDEN</b> |  |
| Crash Date<br><b>02/05/2019</b>              |   | Crash Time<br><b>06:00 PM</b>         | Date Arrived<br><b>02/05/2019</b>      | Time Arrived<br><b>08:03 PM</b>                         |  |
| Date Notified<br><b>02/05/2019</b>           |   | Time Notified<br><b>06:32 PM</b>      | Total Units<br><b>00</b>               | Total Injured<br><b>00</b>                              | Total Killed<br><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<br><b>NO</b>       |  | Tags  |  |
| <input type="checkbox"/> Reportable          | Crash Type<br><b>PRIVATE PROPERTY/PARKING LOT</b> |                                       | <input type="checkbox"/> Amended       | <input type="checkbox"/> Secondary Crash                |  |

Description

|             |                                       |
|-------------|---------------------------------------|
| Diagram<br> | Reconstruction By                     |
|             | Photos By                             |
|             | Additional Information<br><b>NONE</b> |

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

UNIT 01 WAS BACKING INTO DRIVEWAY. UNIT 01 BACKED INTO A POST CAUSING THE POST TO BREAK OFF. DRIVER 01 REPORTED NO INJURIES. NON-REPORTABLE ACCIDENT.

6TL09T1TMT  
19-01474

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMENT  
1300 LANGE COURT  
BARABOO, WI 53913  
(608) 356-4895

Location

|  |   |                                   |
|--|---|-----------------------------------|
| ON 1015 CRESTVIEW CIR<br>209 FT W<br>OF ROSEMARY LN<br>(HOUSE/BUILDING 1015)<br><br>IN THE VILLAGE OF WEST BARABOO<br>IN SAUK COUNTY | Latitude<br><b>43.480599868</b>         | Longitude<br><b>-89.767278372</b> |
|  | X Coordinate<br><b>276204.875</b>       | Y Coordinate<br><b>4817907</b>    |
|  | Structure Type<br><b>HOUSE/BUILDING</b> |                                   |

Crash Scene

|   |   |   |
|---|---|---|
| First Harmful Event<br><b>OTHER POST, POLE OR SUPPORT</b>         | First Harmful Event Location<br><b>OUTSIDE RIGHT-OF-WAY (TRAFFICWAY)</b>            |   |
| Manner of Collision<br><b>NO COLLISION W/VEHICLE IN TRANSPORT</b> | Light Condition<br><b>DARK/LIGHTED</b>  |   |
| Road Surface Condition(s)<br><b>WET, ICE</b>                      | Roadway Factor(s)<br><br><b>ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)</b> |   |
| Environment Factor(s)<br><b>WEATHER CONDITIONS</b>                |   |   |
| Weather Condition(s)<br><b>RAIN, SLEET/HAIL</b>                   |   |   |
| Animal Type   | Relation To Trafficway<br><b>NON TRAFFICWAY - OTHER</b>                             |   |
| Crash Classification - Location<br><b>PRIVATE PROPERTY</b>        | Crash Classification - Jurisdiction<br><b>PRIVATE PROPERTY</b>                      |   |
| Tribal Land   | Access Control<br><b>NO CONTROL</b>   | Special Study                                   |
| Within Interchange Area<br><b>NO</b>                              | Junction Location<br><b>NON-JUNCTION</b>  | Intersection Type<br><b>NOT AN INTERSECTION</b> |

Unit Summary

|             |  |   |   |  |                         |
|-------------|--|---|---|--|-------------------------|
| <b>UNIT</b> | Unit Status<br><b>IN TRANSIT</b>   | Vehicle Operating As Classification<br><b>D CLASS</b> |   | Unit Type<br><b>AUTOMOBILE</b>                       |                         |
|             | Vehicle Type<br><b>(SPORT) UTILITY VEHICLE</b>                           | Operating As Endorsements                             |   |  |                         |
|             | Total Occs<br><b>1</b>   | Train/Bus # Recorded                                  | Total # Citations Issued<br><b>0</b>                | Total Trailers<br><b>0</b>                           | Total HazMat Types      |
|             | Insurance?<br><b>YES</b>   | Direction Of Travel<br><b>SOUTHBOUND</b>              | <input type="checkbox"/> <b>Pre Crash Tire Mark</b> | Speed Limit<br><b>N/A</b>                            | Total Lanes<br><b>1</b> |
|             | Most Harmful Event: Collision With<br><b>OTHER POST, POLE OR SUPPORT</b> | Special Function<br><b>NO SPECIAL FUNCTION</b>        |   | Emergency Motor Vehicle Use<br><b>NOT APPLICABLE</b> |                         |
|             | Traffic Way<br><b>PARKING-LOT-OR-PRIVATE-PROPERTY</b>                    | Traffic Control<br><b>NO CONTROL</b>                  |   | Traffic Control Inoperative/Missing<br><b>NO</b>     |                         |
|             | Surface Type<br><b>CONCRETE</b>  | Road Curvature<br><b>STRAIGHT</b>                     |   | Road Grade<br><b>UPHILL</b>                          |                         |
|             | Truck Bus or HazMat<br><b>NO</b>   |   |   |  |                         |

|             |                |   |   |                     |   |
|-------------|----------------|---|---|---------------------|---|
| <b>UNIT</b> | <b>VEHICLE</b> | <b>Vehicle</b>  |   |                     |   |
|             |                | License Plate Number<br><b>39937DS</b>                    | Plate Type<br><b>DIS - DISABLED</b>             | St<br><b>WI</b>     | Country of Issuance<br><b>UNITED STATES</b> |
|             |                | Vehicle Identification Number<br><b>2C4GM48L95R434505</b> | Make<br><b>CHRYSLER</b>                         | Year<br><b>2005</b> | Model<br><b>PACIFICA</b>                    |
|             |                | Color   | Body Style<br><b>UT - SPORT UTILITY VEHICLE</b> |                     | Bus Use<br><b>NOT A BUS</b>                 |
|             |                | Initial Contact Point<br><b>6--REAR</b>                   | Vehicle Damage<br><b>6--REAR</b>                |                     |   |
|             |                | Extent Of Damage<br><b>MINOR DAMAGE</b>                   |   |                     |   |

6TL09T1TMT

19-01474

# WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMENT  
1300 LANGE COURT  
BARABOO, WI 53913  
(608) 356-4895

|   |   |  |  |  |
|---|---|--|--|--|
| UNIT<br>VEHICLE                               | Towed Due To Damage<br><b>NOT TOWED</b>                         |  | Vehicle Removed By<br><b>OWNER</b>                                 |  |
|   | What Driver Was Doing<br><b>BACKING</b>                         |  | Vehicle Factors  |  |
|   | Driver Prior Action Other                                       |  | <b>NOT APPLICABLE</b>  |  |
|   | Driver Actions<br><b>UNSAFE BACKING</b>                         |  |  |  |
| 01<br>01                                      | Owner Name<br><b>CHERYL ANN SLAVIK<br/>(608) 547-1360</b>       |  | Owner Address<br><b>30 PONDEROSA DR<br/>MAUSTON, WI 53948 , US</b> |  |
|   | <b>Sequence Of Events</b>                                       |  |  |  |
| 01<br>01                                      | 01  | Event<br><b>OTHER POST, POLE OR SUPPORT</b>                    |  |  |
|   | 02  | Event  |  |  |
|   | 03  | Event  |  |  |
|   | 04  | Event  |  |  |
| UNIT  | <b>Policy Holder</b>  |  |  |  |
|   | Insurance Company<br><b>PROGRESSIVE-CASUALTY-INS-CO</b>         |  | Individual<br><b>CHERYL SLAVIK</b>                                 |  |
| UNIT<br>INDIVIDUAL                            | <b>Individual</b>   |  |  |  |
|   | Driver<br><b>CHERYL ANN SLAVIK<br/>(608) 547-1360</b>           |  | Citations Issued<br><b>0</b>                                       | Sex<br><b>FEMALE</b>                     |
|   | Address<br><b>30 PONDEROSA DR<br/>MAUSTON, WI 53948 , US</b>    |  | Date of Birth  | Race<br><b>WHITE</b>                     |
|   | Driver License Number   |  | <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>                     |  |
| 01<br>001                                     | <b>Safety Equipment</b>   |  | On Duty Crash  |  |
|   | Seat Position<br><b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b> |  | Safety Equipment<br><b>SHOULDER &amp; LAP BELT</b>                 |  |
|   | Helmet Use  |  | Helmet Compliance  |  |
|   | Eye Protection  |  | Tint Compliance  |  |
|   | <b>Injury</b>   |  | Injury Severity<br><b>NO APPARENT INJURY</b>                       | Airbag<br><b>NON DEPLOYED</b>            |
| Ejected<br><b>NOT EJECTED</b>                 |   | Ejection Path<br><b>NOT EJECTED/NOT APPLICABLE</b>             |  | Trapped/Extricated<br><b>NOT TRAPPED</b> |
| Medical Transport<br><b>NOT TRANSPORTED</b>   |   | EMS Agency Identifier  |  | EMS Run #                                |
| Hospital                                      |   | Date of Death  |  | Time of Death                            |
| <b>Distracted By</b>                          |   | Distracted By Source<br><b>NOT APPLICABLE (NOT DISTRACTED)</b> |  |  |
| Distracted By Action<br><b>NOT DISTRACTED</b> |   |  |  |  |

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

|                   |                       |  |  |                   |  |                                 |
|-------------------|-----------------------|--|--|-------------------|--|---------------------------------|
| <b>UNIT</b>       | <b>INDIVIDUAL</b>     | <b>Non Motorist</b>  |  | Striking Unit #   | Location   |                                 |
|                   |                       | Prior Action   |  |                   |  |                                 |
|                   | Action                |  |  |                   |  |                                 |
|                   | Action Other          |  |  |                   | To/From School   |                                 |
|                   | <b>01</b>             | <b>001</b>   | <b>Drug &amp; Alcohol</b>                      |                   | Suspected Alcohol Use<br><b>NO</b>                               | Suspected Drug Use<br><b>NO</b> |
|                   |                       |  | Alcohol Test Given<br><b>TEST NOT GIVEN</b>    | Alcohol Test Type | Alcohol Test Results   |                                 |
|                   |                       |  | Drug Test Given<br><b>TEST NOT GIVEN</b>       | Drug Test Type    | Drug Test Results  |                                 |
|                   |                       |  | Drug Type                                      |                   |  |                                 |
|                   |                       |  | Individual Condition<br><b>APPEARED NORMAL</b> |                   |  |                                 |
|                   | <b>Property Owner</b> |  |  |                   |  |                                 |
| <b>PROP OWNER</b> | <b>01</b>             | Individual<br><b>KATHLEEN A ALLEN</b><br><b>(608) 356-6175</b> |  |                   | Address<br><b>E12414 STH 33</b><br><b>BARABOO, WI 53913 , US</b> |                                 |
|                   |                       | <b>Fixed Objects Struck</b>                                    |  |                   |  |                                 |