

WISCONSIN MOTOR VEHICLE
CRASH REPORT

6TL09CGFC1

Document Number Override		Primary Crash Document #	Agency Crash Number 19-02329	Investigating Officer/Deputy DEPUTY K. MUELLER	
Crash Date 02/25/2019		Crash Time 12:08 PM	Date Arrived 02/25/2019	Time Arrived 12:55 PM	
Date Notified 02/25/2019		Time Notified 12:08 PM	Total Units 02	Total Injured 02	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>	<p>Reconstruction By</p> <p>Photos By</p> <p>Additional Information NONE</p>
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I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

UNIT 1 WAS BACKING OUT OF THE DRIVEWAY AT E12107 SUNRISE CT. UNIT 2, THE FEDEX TRUCK, WAS PARKED IN THE CUL DE SAC. UNIT 1 BACKED IN TO UNIT 2. UNIT 2 HAD AN OCCUPANT IN THE CARGO AREA OF THE TRUCK WHICH FELL OUT OF THE BACK OF THE TRUCK CAUSING HIM TO BE INJURED. THE DRIVER OF UNIT 1 WAS CITED FOR UNSAFE BACKING. BOTH UNITS SUSTAINED MINOR DAMAGE. NOTE, TRACS MAPPING SYSTEM DOES NOT HAVE SUNRISE COVE CT ON THE MAP. THE NEAREST ROAD WAS USED FOR THE LOCATION TOOL.

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

Location

ON SUNSET DR 0.25 MI S OF STH78 NB IN THE TOWN OF MERRIMAC IN SAUK COUNTY	Latitude 43.329521161	Longitude -89.719263806
	X Coordinate 279540.4375	Y Coordinate 4801000
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 07--REAR TO SIDE	Light Condition DAYLIGHT	
Road Surface Condition(s) ICE	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 NON-JUNCTION	Intersection Type NOT AN INTERSECTION

Unit Summary

UNIT 01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE		
	Vehicle Type PASSENGER VAN			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 EASTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 25	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 NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

UNIT 01	Vehicle					
	01	License Plate Number 841RNN	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
		Vehicle Identification Number 5FNRL5H62DB082390	Make HONDA	Year 2013	Model ODYSSEY EX	
	VEHICLE	Color BLK - BLACK		Body Style VN - VAN		Bus Use NOT A BUS
		Initial Contact Point 5--RIGHT REAR CORNER		Vehicle Damage		
Extent Of Damage MINOR DAMAGE		5--RIGHT REAR CORNER				

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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER	
	What Driver Was Doing BACKING		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions UNSAFE BACKING, OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER			
01 01	Owner Name DANIEL RIETHMILLER (260) 241-4862		Owner Address E12107 SUNRISE COVE CT PRAIRIE DU SAC, WI 53578 , US	
	Sequence Of Events			
01 01	01	Event MOTOR VEH IN TRANSPORT		
	02	Event		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company PROGRESSIVE-CASUALTY-INS-CO		Individual DANIEL RIETHMILLER	
UNIT INDIVIDUAL	Individual			
	Driver DANIEL RIETHMILLER (260) 241-4862		Citations Issued 1	Sex MALE
	Address E12107 SUNRISE COVE CT PRAIRIE DU SAC, WI 53578 , US		Date of Birth	Race WHITE
			Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
01 001	Safety Equipment		On Duty Crash	
	Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		Safety Equipment SHOULDER & LAP BELT	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	Injury		Injury Severity POSSIBLE 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 UNKNOWN				

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UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location	
		Prior Action				
		Action				
	Action Other				To/From School	
	01	001	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	Violations				
UTC Number AI388650		Issue To? 001	Statute Number 346.87	Description UNSAFE BACKING OF VEHICLE		

Unit Summary

UNIT	02	Unit Status LEGALLY PARKED		Vehicle Operating As Classification D CLASS		Unit Type TRUCK		
		Vehicle Type CARGO VAN (10,000 LBS OR LESS)				Operating As Endorsements		
		Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0		
		Insurance? YES	Direction Of Travel UNKNOWN	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 25	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 NO CONTROL		Traffic Control Inoperative/Missing NO		
		Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL		
		Truck Bus or HazMat NO						

02	02	Vehicle				
		License Plate Number DG94296	Plate Type HTK - HEAVY TRUCK	St WI	Country of Issuance UNITED STATES	
		Vehicle Identification Number WDAPF3CC6E9578744	Make MERCEDES BENZ	Year 2014	Model SPRINTER 3	
		Color WHI - WHITE	Body Style CB - CAB CHASSIS		Bus Use NOT A BUS	
		Initial Contact Point 9--LEFT SIDE MIDDLE				

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UNIT VEHICLE	Vehicle Damage	
	Extent Of Damage MINOR DAMAGE	9--LEFT SIDE MIDDLE
	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR
	What Driver Was Doing LEGALLY PARKED	Vehicle Factors
UNIT VEHICLE	Driver Prior Action Other	NOT APPLICABLE
	Driver Actions NO CONTRIBUTING ACTION	
02 02	Owner Name FEDEX GROUND PACKAGE SYSTEM INC (800) 463-3339	Owner Address 3901 HANSON RD MADISON, WI 53704 , US
	Sequence Of Events	
01 02 03 04	Event MOTOR VEH IN TRANSPORT	
	Event	
	Event	
	Event	
UNIT INDIVIDUAL	Policy Holder	
	Insurance Company PROTECTIVE-INS-CO	Organization/Company FEDEX GROUND PACKAGE SYSTEM INC
02 002	Individual	
	Occupant Of Motor Vehicle Not In Transport JAMES EBERLE (608) 697-3780	Citations Issued 0
	Address 701 LAKE ST PARDEEVILLE, WI 53954 , US	Sex MALE Race WHITE
02 002	Safety Equipment	
	On Duty Crash	Safety Equipment NONE USED - VEHICLE OCCUPANT
02 002	Seat Position PASSENGER IN OTHER ENCLOSED PASSENGER	Helmet Compliance
	Helmet Use	Tint Compliance
02 002	Eye Protection	Airbag UNKNOWN
	Injury Injury Severity SUSPECTED MINOR INJURY	Ejection Path UNKNOWN
02 002	Ejected UNKNOWN	Trapped/Extricated UNKNOWN
	Medical Transport NOT TRANSPORTED	EMS Agency Identifier
	Hospital	EMS Run #
	Date of Death	Time of Death

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UNIT	Distracted By		Distracted By Source		
	Distracted By Action				
	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				
02	002	Individual Condition			
		APPEARED NORMAL			