19-02832

WISCONSIN MOTOR VEHICLE CRASH REPORT

	Document Number Override	Primary Crash Docume	nt # Agency 19-02	y Crash Number 832		Officer/Deputy B. SCHLOUGH		
х У	Crash Date 03/10/2019	Crash Time 01:41 PM				Time Arrived 01:42 PM		
6 I LUYJUKX5	Date Notified 03/10/2019	Time Notified 01:42 PM	Total L 02	Inits	Total Injured	Total Kille	Total Killed 00	
-09-	On Emergency	t and Run	ane Closure	ure Work Zone		or Towed	Towed Reporting Threshold	
9 F	Government Property	Active School Z	Cone School	Bus Related	Tags			
	Reportable	Crash Type DT4000 (STANDAR	D CRASH)		Amenc	led	Secondary Crash	
	Description							
WLINN ST UI U2 USH 12 OFF RAMP								
	DRAWING NOT TO SC	JALE						
	✔ I, a sworn law enforceme							
	UNIT 1 AND UNIT 2 WERE TRAV TO A STOP AT THE YIELD SIGN. REST FACING EAST IN THE LAN	. OPERATOR OF UNIT						

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WISCONSIN MOTOR VEHICLE **CRASH REPORT**

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

	~~	ation								(000) 330-403	
		LINN ST/ STH136 EB				Latitude			Longitu	da	
		MIW				43.4747	55554		Longitu	4429712	
0)F I	INN ST/ STH33 EB	X Coordinate Y Coordinate			-					
		HE VILLAGE OF WES	275604.8			48172					
I	N S	AUK COUNTY		Structure							
						Olidolaic	Type				
С	ra	sh Scene									
Fi	irst	Harmful Event				First Harm	nful Event Lo	ocation			
Ν	101	OR VEH IN TRANSPO	ORT			ON ROA	DWAY				
Μ	lanr	ner of Collision				Light Con	dition				
0	2	FRONT TO REAR				DAYLIG	HT				
R	oac	Surface Condition(s)				Roadway	Factor(s)				
W	٧E٦	г									
Е	nvir	onment Factor(s)									
Ν	ON	IE				NONE					
W	/eat	her Condition(s)									
С	LC	UDY									
A	nim	al Type				Relation T	o Trafficwa	/			
					TRAFFIC	CWAY - O	N ROAD				
С	ras	h Classification - Location			Crash Classification - Jurisdiction						
PUBLIC PROPERTY Tribal Land						NO SPECIAL JURISDICTIO					
							Access Control Special Study NO CONTROL			Special Study	
W	/ithi	n Interchange Area	Junction Location		Intersectio						
Ν	0		INTERSECTION-RELATE	ED	ROUND	ABOUT					
U	nif	Summary									
		Status		Vehicle O	perating As C	lassification	1	Unit Type			
IN	IN TRANSIT		D CLASS				AUTOMOBILE				
V	ehio	cle Type	Туре					Operating As Endorsements		ments	
(\$	SPO	ORT) UTILITY VEHICL	E								
Т	otal	Occs	Train/Bus # Recorded	Total # Ci	tations Issued		Total Trail	ers	Total Haz	Mat Types	
3				0	0		0		0		
		ance?	Direction Of Travel	Pro	e CrashTire	•	Speed Lin			_anes	
	ES		EASTBOUND		Mark		35	4		:	
		Harmful Event: Collision		Special Fi		TION		Emergency Motor Vehicle Use NOT APPLICABLE			
		c Way		Traffic Co					rol Inopera	tive/Missing	
	DIVIDED HWY W/TRAFFIC BARRIER			YIELD S	-			NO			
		се Туре		Road Cur				Road Grade	9		
BLACKTOP (BITUMINOUS)			STRAIG	HT			LEVEL				
	rucl I O	Bus or HazMat									
		/ehicle									
	[License Plate Number		Plate Typ	be		St	Country of Is	suance		
	775XWX Vehicle Identification Number 5 5FNYF18577B010205		AUT - A	UTOMOBI	E	WI UNITED STATES Year Model					
			Make								
5			HONDA	۱		2007	PILOT EXL				
		Color		Body Sty	le			Bus Use NOT A BUS			
		BLU - BLUE		UT - SP	ORT UTILI	TY VEHIC	LE				
Ц		Initial Contact Point		Vehicle [Damage						
C	د	12FRONT									
	C	Extent Of Damage		12FR0	DNT						

Extent Of Damage FUNCTIONAL DAMAGE

VEHIC

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Towed Due To Damage	Vehicle Removed By				
		NOT TOWED	OPERATOR				
		What Driver Was Doing	Vehicle Factors				
		SLOW/STOPPING					
		Driver Prior Action Other					
		Driver Actions					
	щ	FAILED TO YIELD RIGHT-OF-WAY, FAILURE TO	CONTROL				
F	CL						
UNIT	VEHICLE						
	N						
		Owner Name	Owner Address				
			E7415 MILE RD				
01	01	(608) 963-3461	REEDSBURG, WI 53959	ə, US			
	ę	Sequence Of Events					
	01	Event MOTOR VEH IN TRANSPORT					
	~	Event					
	02						
	03	Event					
	+	Event					
	04						
F	ļ	Policy Holder					
UNIT		Insurance Company CINCINNATI-INS-CO,-THE	Individual				
			QUIRIN KLINK				
		Individual	Citations Issued	Sex			
			0	MALE			
	JAL	(608) 963-3461	Date of Birth	Race			
F	INDIVIDUAL			WHITE			
UNIT		Address E7415 MILE RD	Driver License Number				
	IN	REEDSBURG, WI 53959 , US	STATE: WISCONSIN COUNTRY: UNITED STATES				
		On Duty Crash	Safety Equipment				
	Sat	fety Equipment					
		Seat Position	SHOULDER & LAP BELT				
		1FRONT SEAT-LEFT SIDE (DRIVER/MOTORC) Helmet Use	Helmet Compliance				
		nemet use	Heimer Compliance				
		Eye Protection	Tint Compliance				
0	001	Injury Severity Injury NO APPARENT INJURY	Airbag NON DEPLOYED				
	Ŭ	Ejected Ejection Path	NON DELECTED	Trapped/Extricated			
		NOT EJECTED NOT EJECTED/NOT A	PPLICABLE	NOT TRAPPED			
		Medical Transport	EMS Agency Identifier	EMS Run #			
		NOT TRANSPORTED					
		Hospital	Date of Death	Time of Death			
		Distracted By Source		I			
		Distracted By NOT APPLICABLE (NOT DIST	RAUIED)				
		Distracted By Action NOT DISTRACTED					

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Non Motorist	iking Unit #	Location						
		Prior Action								
		Action								
	٩L									
UNIT	INDIVIDUAL									
5	DIV									
	Z									
		Action Other						To/From School		
					1					
	l	Drug & Alcohol	spected Alcohol U)	se	Suspected Drug Use NO					
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	2		Alcohol Test Results			
		Drug Test Given		Drug Test Type		Drug Test Results				
	-	TEST NOT GIVEN Drug Type								
6	001									
		Individual Condition								
		APPEARED NORMAL								
	I	Individual								
		Passenger ELLA M KLINK (608) 963-3461			Citations Issued Sex 0 FEMALE					
	INDIVIDUAL				Date of Birth		Race WHITE			
UNIT		Address E7415 MILE RD			Driver License Number					
	Z	REEDSBURG, WI 539	959 , US							
		On	Duty Crash		Safety Equipment					
	Sat	fety Equipment								
		Seat Position 3FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER			SHOULDER & LAP BELT					
		Helmet Use			Helmet Compliance					
		Eye Protection			Tint Compliance					
0	002	Inju Inju	ury Severity		Airbag					
	0	Ejected	D APPARENT IN Ejection Pat	NJURY h	NON DEPLOYED		Trapped/Extricated			
		NOT EJECTED Medical Transport	NOT EJEC	CTED/NOT APPI			NOT TRAPPED			
		NOT TRANSPORTED)		EMS Agency Identifier		EMS Run #			
		Hospital			Date of Death		Time of Death			
		Distracted By	stracted By Source		ł					
		Distracted By Action								
I		Non Motorist	iking Unit #	Location						
						<u></u>	0 1 0 1	02/10/2010		

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Prior Action								
		Action								
	INDIVIDUAL									
Ę	DO									
UNIT	Σ									
	Z									
	-									
		Action Other							To/From School	
			Suspect	ted Alcohol U	se	Suspected Drug Use				
		Drug & Alcohol	NO			NO				
		Alcohol Test Given			Alcohol Test Type)		Alcohol Test Results		
		TEST NOT GIVEN								
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Results			
01	002	Drug Type								
	0									
		Individual Condition								
		APPEARED NORM	MAL							
		ndividual								
		Passenger EMMYLOU J KLINK (608) 963-3461			Citations Issued					
	Ļ				0		FEMALE			
⊢	INDIVIDUAL					Date of Birth		Race WHITE		
UNIT	N	Address				Driver License Number				
	Z	E7415 MILE RD REEDSBURG, WI	53959	, US						
	Sat	On Duty Crash				Safety Equipment				
		Seat Position				BOOSTER SEAT				
		6SECOND SEAT-RIGHT SIDE								
		Helmet Use				Helmet Compliance				
		Eye Protection				Tint Compliance				
			la ina c			Airbog				
0	003	Injury	Injury S	eventy PARENT II	NJURY	Airbag NON DEPLOYED				
		Ejected		Ejection Pat				Trapped/Extricated		
		NOT EJECTED		NOT EJEC	CTED/NOT APPI			NOT TRAPPED		
		Medical Transport NOT TRANSPORT	ED			EMS Agency Identifier		EMS Run #		
		Hospital	ED			Date of Death		Time of Death		
						Sale of Douli		- me er bourr		
		Distracted By	Distract	ed By Source	•					
		Distracted By Action								
		Non Motorist	Striking	Unit #	Location					
Nicos	nsin M	Motor Vehicle Crash			This repor	t does not include anv CJI	IS data.	Crash Date	03/10/2019	

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Prior Action										
		Action										
	UAL											
UNIT	INDIVIDUAL											
	IND											
	Action Other To/From School											
	l	Drug & Alcohol NO	pected Alcohol L	lse	Suspected Drug Use NO							
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Typ	be			Alcohol Tes	t Results			
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Tes	st Results					
6	003	Drug Type		<u> </u>		ļ						
	0	Individual Condition										
	Uni	t Summary										
		Status		,	Vehicle Operating As Class	ification		Unit Type				
	IN T	RANSIT		1	D CLASS			ΑυτοΜο	BILE			
05		се Туре						Operating A	s Endorsem	nents		
0		SENGER CAR I Occs Train/Bus # Recorded			Total # Citations Issued Total Trail				T			
	1 ota 1	I Occs			Total # Citations Issued 0	0			Total HazN 0			
⊨		Insurance? Direction Of Travel YES EASTBOUND			Pre CrashTire Mark		Speed Limi 5	it	Total Lane	IS		
UNIT		Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT			Special Function NO SPECIAL FUNCTION			Emergency NOT APP	Motor Vehic	cle Use		
		fic Way IDED HWY W/TRAFFIC BARRIER			Traffic Control YIELD SIGN			Traffic Cont	rol Inoperati	ve/Missing		
	Surfa	асе Туре			Road Curvature			Road Grade				
		ACKTOP (BITUMINOUS)			STRAIGHT LEVEL							
	Truc NO	k Bus or HazMat										
	1	Vehicle										
		License Plate Number			Plate Type	St		Country of Is				
		584VTN Vehicle Identification Numb) Ar		AUT - AUTOMOBILE Make	W		UNITED S	IAIES			
03	02	1G1PC5SH2B7207272			CHEVROLET			Model CRUZE LS				
		Color BLU - BLUE			Body Style 4D - 4DR			Bus Use NOT A BU	S			
_	Ш	Initial Contact Point 6REAR			Vehicle Damage							
UNIT	VEHICLE	Extent Of Damage			6REAR							
	2	MINOR DAMAGE			Vahiala Ramayad Du							
		Towed Due To Damage NOT TOWED			Vehicle Removed By OPERATOR							
•		What Driver Was Doing SLOW/STOPPING										

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WISCONSIN MOTOR VEHICLE CRASH REPORT

				Vehic	le Factors			
		Driver Prior Action Other		NOT	APPLICABLE			
		Driver Actions NO CONTRIBUTING ACT	ION					
⊨	С Ц	NO CONTRIBUTING ACT						
UNIT	VEHICLE							
	N							
		Owner Name			Dwner Address			
07	02	ERIN L URBEN (608) 415-9483			805 HILL ST ROCK SPRINGS, WI 53961 ,US			
	;	Sequence Of Events						
	6	MOTOR VEH IN TRANSPO	ORT					
	02	Event						
	03	Event						
	04	Event						
╘		Policy Holder						
UNIT		Insurance Company			lividual			
-		PROGRESSIVE-CASUAL	TY-INS-CO					
		Individual Driver		Cit	ations Issued	Sex		
	_	ERIN L URBEN		0		FEMALE		
⊢	INDIVIDUAL	(608) 415-9483			te of Birth	Race WHITE		
UNIT	N	Address 305 HILL ST		Dri	iver License Number			
	Ī	ROCK SPRINGS, WI 5396	1,US	ST	STATE: WISCONSIN COUNTRY: UNITED STATES			
		On Duty	Crash	Sat	fety Equipment			
	Sat	fety Equipment						
		Seat Position 1FRONT SEAT-LEFT SI	DE (DRIVER/MOTORCY	SH	SHOULDER & LAP BELT			
		Helmet Use		He	Helmet Compliance			
		Eye Protection		Tin	t Compliance			
02	004	Injury Se			bag			
0	õ		PARENT INJURY	NC	ON DEPLOYED			
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT AP		RIE	Trapped/Extricated NOT TRAPPED		
		Medical Transport			IS Agency Identifier	EMS Run #		
		NOT TRANSPORTED						
		Hospital		Dat	te of Death	Time of Death		
		Distracted By NOT A	ed By Source PPLICABLE (NOT DISTR	RACTE	D)	1		
		Distracted By Action NOT DISTRACTED						
		Non Motorist	Unit # Location					

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Prior Action						
UNIT	INDIVIDUAL	Action						
		Action Other	suspected Alcohol Use	2	Suspected Drug Use			To/From School
	L	Drug & Alcohol N	10		NO			
		Alcohol Test Given TEST NOT GIVEN	/	Alcohol Test Type			Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN	[Drug Test Type	Drug Test Resul			
02	004	Drug Type				•		
		Individual Condition						
		APPEARED NORMA	AL					