

6TL0B4X4KV

19-03174

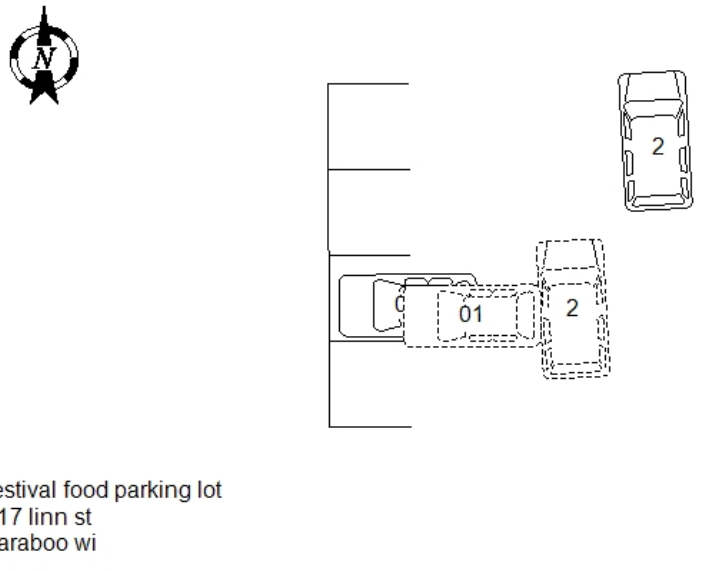
WISCONSIN MOTOR VEHICLE CRASH REPORT

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 19-03174 | Investigating Officer/Deputy DEPUTY E. KNULL | |
| Crash Date 03/19/2019 | | Crash Time 11:12 AM | Date Arrived 03/19/2019 | Time Arrived 11:17 AM | |
| Date Notified 03/19/2019 | | Time Notified 11:12 AM | 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

| | |
|---|---------------------------------------|
| Diagram not to scale  festival food parking lot 617 linn st baraboo wi | 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.

OPERATOR OF UNIT 1 WAS PARKED IN A STALL. UNIT TWO WAS NB IN THE PARKING LOT AND UNIT 1 BACKED INTO UNIT 2. MINOR DAMAGE TO UNIT 1 AND NO INJURY REPORTED. FUNCTIONAL DAMAGE TO UNIT 2 AND NO INJURY REPORTED. OPERATOR OF UNIT 1 CITED FOR NO INSURANCE. BOTH VEHICLES REMOVED FROM SCENE BY EACH RESPECTIVE OPERATOR.

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Location

| | | |
|--|---|-----------------------------------|
| PARKING LOT LINN ST/ STH136 WB LOT 615 (HOUSE/BUILDING 615) IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY | Latitude 43.473843821 | Longitude -89.769573123 |
| | X Coordinate 275994.3125 | Y Coordinate 4817163 |
| | Structure Type HOUSE/BUILDING | |

Crash Scene

| | | |
|---|---|---|
| First Harmful Event MOTOR VEH IN TRANSPORT | First Harmful Event Location IN PARKING LANE OR ZONE | |
| Manner of Collision 07--REAR TO SIDE | 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 NON TRAFFICWAY - PARKING LOT | |
| 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 CAR | Operating As Endorsements | | | |
| | Total Occs 1 | Train/Bus # Recorded | Total # Citations Issued 1 | Total Trailers 0 | Total HazMat Types 0 |
| | Insurance? NO | Direction Of Travel NOT ON ROADWAY | <input type="checkbox"/> Pre CrashTire Mark | Speed Limit | 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 PARKING LOT OR PRIVATE PROPERTY | | 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 | | | | |
| | VEHICLE 01 | License Plate Number ACW8493 | Plate Type AUT - AUTOMOBILE | St WI | Country of Issuance UNITED STATES |
| | | Vehicle Identification Number 1FAHP34N27W184151 | Make FORD | Year 2007 | Model FOCUS |
| | Color MAR - MAROON (BURGUNDY) | Body Style SD - SEDAN | | Bus Use NOT A BUS | |
| | Initial Contact Point 6--REAR | Vehicle Damage | | | |
| Extent Of Damage MINOR DAMAGE | 6--REAR | | | | |

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| | | | | |
|-----------------------|---|--|--|--|
| UNIT VEHICLE | Towed Due To Damage NOT TOWED | | Vehicle Removed By OPERATOR | |
| | What Driver Was Doing BACKING | | Vehicle Factors | |
| | Driver Prior Action Other | | NOT APPLICABLE | |
| | Driver Actions UNSAFE BACKING | | | |
| 01 | Owner Name JOSEPH EDWARD SCHULTZ (608) 477-8295 | | Owner Address 308 5TH AVE BARABOO, WI 53913 , US | |
| | Sequence Of Events | | | |
| 01 | 01 | Event MOTOR VEH IN TRANSPORT | | |
| | 02 | Event | | |
| | 03 | Event | | |
| | 04 | Event | | |
| UNIT INDIVIDUAL | Individual | | | |
| | Driver JOSEPH EDWARD SCHULTZ (608) 477-8295 | | Citations Issued 1 | Sex MALE |
| | Address 308 5TH AVE BARABOO, WI 53913 , US | | Date of Birth | Race WHITE |
| | Driver License Number | | STATE: WISCONSIN COUNTRY: UNITED STATES | |
| 01 | 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 | |
| 01 | 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 NOT APPLICABLE (NOT DISTRACTED) | | |
| NOT DISTRACTED | | Distracted By Action | | |
| Non Motorist | | Striking Unit # | Location | |

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| | | | | | | |
|-------------|-------------------|--------------|--|-------------------------|------------------------------------|---|
| UNIT | INDIVIDUAL | 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 | 01 | Violations | | | |
| | | | UTC Number AD979525 | Issue To? 001 | Statute Number 344.62(1) | Description OPERATE MOTOR VEHICLE W/O INSURANCE |

Unit Summary

| | | | | | | | | |
|-------------|-----------|---|--|---|--|--------------------------------|--|--|
| UNIT | 02 | Unit Status IN TRANSIT | | Vehicle Operating As Classification D CLASS | | Unit Type AUTOMOBILE | | |
| | | Vehicle Type (SPORT) UTILITY VEHICLE | | | | | 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 NOT ON ROADWAY | <input type="checkbox"/> Pre CrashTire Mark | Speed Limit | 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 PARKING LOT OR PRIVATE PROPERTY | | | 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 | 02 | Vehicle | | | |
| | | License Plate Number 755JLJ | Plate Type AUT - AUTOMOBILE | St WI | Country of Issuance UNITED STATES |
| | | Vehicle Identification Number 2C4RC1DG1HR722932 | Make CHRYSLER | Year 2017 | Model PACIFICA |
| | | Color GRY - GRAY | Body Style VN - VAN | | Bus Use NOT A BUS |
| | | Initial Contact Point 9--LEFT SIDE MIDDLE | Vehicle Damage | | |
| | | Extent Of Damage FUNCTIONAL DAMAGE | 9--LEFT SIDE MIDDLE | | |

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|----------------------|---|---|--|
| UNIT VEHICLE | Towed Due To Damage NOT TOWED | Vehicle Removed By OPERATOR | |
| | What Driver Was Doing GOING STRAIGHT | Vehicle Factors | |
| | Driver Prior Action Other | NOT APPLICABLE | |
| | Driver Actions NO CONTRIBUTING ACTION | | |
| 02 02 | Owner Name ERIN E EDWARDS-SELJE (608) 963-4783 | Owner Address 633 N OAK ST REEDSBURG, WI 53959 , US | |
| | Sequence Of Events | | |
| 01 02 03 04 | Event MOTOR VEH IN TRANSPORT | | |
| | Event | | |
| | Event | | |
| | Event | | |
| UNIT | Policy Holder | | |
| | Insurance Company WADENA-INSURANCE-CO | Individual ERIN EDWARDS-SELJE | |
| UNIT INDIVIDUAL | Individual | | |
| | Driver ERIN E EDWARDS-SELJE (608) 963-4783 | Citations Issued 0 | Sex FEMALE |
| | | Date of Birth | Race WHITE |
| | Address 633 N OAK ST REEDSBURG, WI 53959 , 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 |
| | Distracted By | Distracted By Source NOT APPLICABLE (NOT DISTRACTED) | |
| | Distracted By Action NOT DISTRACTED | | |

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|-------------|---------------------|---------------------------|--|------------------------------------|---------------------------------|----------------|----------------------|
| UNIT | Non Motorist | Striking Unit # | | Location | | | |
| | | Prior Action | | | | | |
| | INDIVIDUAL | Action | | | | | |
| | | Action Other | | | | To/From School | |
| | | Drug & Alcohol | | Suspected Alcohol Use NO | Suspected Drug Use NO | | |
| | 02 | 002 | 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 | | | | |