

6TL0B1716K

19-06143

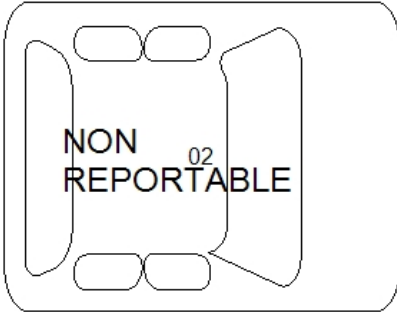
WISCONSIN MOTOR VEHICLE CRASH REPORT

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 19-06143		Investigating Officer/Deputy DEPUTY I. HANSON	
Crash Date 05/26/2019		Crash Time 12:40 PM		Date Arrived 05/26/2019		Time Arrived 12:55 PM	
Date Notified 05/26/2019		Time Notified 12:46 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 type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)			<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash

Description

Diagram 01 	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.

UNIT 1 WAS TRYING TO GET HIS MOTORCYCLE AROUND UNIT 2 WHICH WAS STOPPED IN THE PARKING LOT OF CHARLIES LAKESIDE. UNIT 1 STATED HE THOUGHT HE HAD ENOUGH ROOM TO GET AROUND UNIT 2. UNIT 1'S STORAGE COMPARTMENT HIT THE PASSENGER SIDE DOORS AS HE WENT AROUND. 9109

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Location

PARKING LOT STH78 NB LOT IN THE TOWN OF MERRIMAC IN SAUK COUNTY	Latitude 43.372516632	Longitude -89.674545288
	X Coordinate 283319.21875	Y Coordinate 4805658
	Structure Type	

Crash Scene

First Harmful Event OVERTURN/ROLLOVER		First Harmful Event Location ON ROADWAY	
Manner of Collision 05--SIDESWIPE/SAME DIRECTION		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 PRIVATE PROPERTY		Crash Classification - Jurisdiction PRIVATE PROPERTY	
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 M CLASS		Unit Type MOTORCYCLE	
	Vehicle Type MOTORCYCLE				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types	
	Insurance? YES	Direction Of Travel SOUTHBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 05	Total Lanes 0	
	Most Harmful Event: Collision With PARKED MOTOR VEHICLE		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					
	License Plate Number 816AH		Plate Type CYC - CYCLE	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number 1HD1FCW493Y618498		Make HARLEY DAVIDSON	Year 2003	Model NO DATA FO	
	Color BLK - BLACK		Body Style MC - MOTORCYCLE		Bus Use NOT A BUS	
	Initial Contact Point 7--LEFT REAR CORNER		Vehicle Damage 7--LEFT REAR CORNER			
	Extent Of Damage MINOR DAMAGE					

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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER	
	What Driver Was Doing OTHER		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions OTHER CONTRIBUTING ACTION			
01	Owner Name TERRY LITTS II (262) 745-8361		Owner Address 1409 E PINECREST LN ELKHORN, WI 53121 , US	
	Sequence Of Events			
01	Event	MOTOR VEH IN TRANSPORT		
	Event			
	Event			
	Event			
04	Policy Holder			
	Insurance Company USAA-CASUALTY-INS-CO		Individual TERRY LITTS	
UNIT INDIVIDUAL	Individual			
	Driver TERRY LITTS II (262) 745-8361		Citations Issued 0	Sex MALE
	Address 1409 E PINECREST LN ELKHORN, WI 53121 , US		Date of Birth	Race WHITE
			Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
01	Safety Equipment	On Duty Crash	Protective Gear BOOTS, JACKET	
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		
		Helmet Use NO	Helmet Compliance UNKNOWN	
		Eye Protection NO	Tint Compliance UNKNOWN	
	Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED	
		Ejected NOT APPLICABLE	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 INDIVIDUAL 01 001	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 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 2	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types		
	Insurance? YES	Direction Of Travel NOT ON ROADWAY	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 05	Total Lanes		
	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 VEHICLE 02 02	Vehicle					
		License Plate Number E719723		Plate Type AUT - AUTOMOBILE	St IL	Country of Issuance UNITED STATES	
Vehicle Identification Number 3VWDX7AJ3CM397277		Make VOLKSWAGEN	Year 2019	Model			
Color SIL - SILVER (ALUMINUM)		Body Style SD - SEDAN		Bus Use NOT A BUS			
Initial Contact Point 3--RIGHT SIDE MIDDLE		Vehicle Damage					
Extent Of Damage MINOR DAMAGE		3--RIGHT SIDE MIDDLE, 4--RIGHT SIDE REAR					
Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER					

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UNIT VEHICLE	What Driver Was Doing OTHER	Vehicle Factors	
	Driver Prior Action Other NONE	NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION		
	Owner Name ABRAHAM J VILCHIS (815) 687-6954	Owner Address 2418 ASPEN DR WOODSTOCK, IL 60098 , US	
UNIT INDIVIDUAL	Sequence Of Events		
	01	Event MOTOR VEH IN TRANSPORT	
	02	Event	
	03	Event	
	04	Event	
	Policy Holder		
	Insurance Company STATE-FARM-COUNTY-MUTUAL-INS-CO-OF-TEX		Individual ABRAHAM VILCHIS
	Individual		
	Driver ABRAHAM J VILCHIS (815) 687-6954		Citations Issued 0
	Address 2418 ASPEN DR WOODSTOCK, IL 60098 , US		Driver License Number STATE: ILLINOIS COUNTRY: UNITED STATES
UNIT INDIVIDUAL	Safety Equipment		Safety Equipment
	Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY	NONE USED - VEHICLE OCCUPANT	
	Helmet Use	Helmet Compliance	
	Eye Protection	Tint Compliance	
	Injury	Injury Severity NO APPARENT INJURY	Airbag UNKNOWN
	Ejected UNKNOWN	Ejection Path UNKNOWN	Trapped/Extricated UNKNOWN
	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		
Non Motorist	Striking Unit #	Location	

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UNIT	INDIVIDUAL	Prior Action			
		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			
UNIT	INDIVIDUAL	Individual			
		Passenger EMILY G VILCHIS (815) 687-6954		Citations Issued 0	Sex FEMALE
		Address 2418 ASPEN DR WOODSTOCK, IL 60098 , US		Date of Birth Race WHITE	
		Driver License Number STATE: ILLINOIS COUNTRY: UNITED STATES			
02	003	Safety Equipment		On Duty Crash	
		Seat Position 3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER		NONE USED - VEHICLE OCCUPANT	
		Helmet Use		Helmet Compliance	
		Eye Protection		Tint Compliance	
02	003	Injury		Injury Severity NO APPARENT INJURY	
		Airbag UNKNOWN			
		Ejected UNKNOWN		Ejection Path UNKNOWN	
		Trapped/Extricated UNKNOWN			
Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #	
Hospital		Date of Death		Time of Death	
Distracted By		Distracted By Source			
Distracted By Action					
Non Motorist		Striking Unit #		Location	

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UNIT INDIVIDUAL 02 003	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				