

6TL09CGFCB
19-08440

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

6TL09CGFCB

Document Number Override		Primary Crash Document #	Agency Crash Number 19-08440	Investigating Officer/Deputy DEPUTY K. MUELLER	
Crash Date 07/10/2019		Crash Time 10:15 AM	Date Arrived 07/10/2019	Time Arrived 10:24 AM	
Date Notified 07/10/2019		Time Notified 10:16 AM	Total Units 02	Total Injured 01	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>	Reconstruction By
	Photos By KMUELLER
	Additional Information PHOTOS

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

UNIT 1 WAS LEAVING THE PARKING LOT. UNIT 2 WAS ENTERING THE PARKING LOT. THE VEHICLES STRUCK EACH OTHER ON THE FRONT DRIVERS SIDE OF EACH VEHICLE. THERE WAS MINOR DAMAGE, THE DRIVER OF UNIT 2 SAID SHE DIDN'T BELIEVE SHE WAS INVOLVED IN A COLLISION. THE DRIVER OF UNIT 1 WAS PREGNANT AND THEREFORE GOING TO THE HOSPITAL ON HER OWN ACCORD.

Location

PARKING LOT CTHPF EB LOT E11340 (FIRE E11340) IN THE TOWN OF PRAIRIE DU SAC IN SAUK COUNTY	Latitude 43.293406744	Longitude -89.757372952
	X Coordinate 276318.15625	Y Coordinate 4797090.5
	Structure Type FIRE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location IN PARKING LANE OR ZONE	
Manner of Collision 06--SIDESWIPE/OPPOSITE 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	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type (SPORT) UTILITY VEHICLE				Operating As Endorsements	
	Total Occs 2	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit N/A	Total Lanes 0	
	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 UNKNOWN		Road Grade HILLCREST	
	Truck Bus or HazMat NO					

Vehicle

UNIT	VEHICLE	License Plate Number ACD4979				Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number JM3KFBCMXXJ0348477				Make MAZDA	Year 2018	Model CX-5
		Color GRY - GRAY				Body Style UT - SPORT UTILITY VEHICLE		Bus Use NOT A BUS
		Initial Contact Point 11--LEFT FRONT CORNER				Vehicle Damage		
		Extent Of Damage MINOR DAMAGE				11--LEFT FRONT CORNER		
		Towed Due To Damage NOT TOWED				Vehicle Removed By OPERATOR		
		What Driver Was Doing GOING STRAIGHT				Vehicle Factors		
		Driver Prior Action Other				NOT APPLICABLE		

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTION		
		Owner Name VARIAN MEDICAL SYSTEMS INC (650) 493-4000	Owner Address 3100 HANSEN WAY #029 PALO ALTO, CA 94304 , US	
01	01	Sequence Of Events		
	01	Event MOTOR VEH IN TRANSPORT		
	02	Event		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company SAFETY-NATIONAL-CASUALTY-CORP	Organization/Company VARIAN MEDICAL SYSTEMS INC		
UNIT	Individual			
	Driver CYNTHIA GRAY KRUSER (920) 723-3885	Citations Issued 0	Sex FEMALE	
		Date of Birth	Race WHITE	
	Address N2284 RAUSCH RD LODI, WI 53555 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
01	001	Safety Equipment		
		On Duty Crash	Safety Equipment SHOULDER & LAP BELT	
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		
		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 NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				
Non Motorist	Striking Unit #	Location		
Prior Action				

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT INDIVIDUAL	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		
	Individual		
	Passenger STELLA R KRUSER (920) 723-3885	Citations Issued 0	Sex FEMALE
	Address N2284 RAUSCH RD LODI, WI 53555 , US	Date of Birth	Race WHITE
Driver License Number			
UNIT INDIVIDUAL	Safety Equipment	On Duty Crash	Safety Equipment CHILD RESTRAINT SYSTEM - FORWARD FACING
	Seat Position 6--SECOND SEAT-RIGHT SIDE		
	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	
	Distracted By Action		
Non Motorist	Striking Unit #	Location	
Prior Action			

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT	INDIVIDUAL	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				
		01	003			

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 WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit N/A	Total Lanes 0
		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	Road Grade UPHILL	
		Truck Bus or HazMat NO				

UNIT	VEHICLE	Vehicle			
		License Plate Number LAKEWI	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 5GAKVDKD3DJ207890	Make BUICK	Year 2013	Model ENCLAVE
		Color WHI - WHITE	Body Style UT - SPORT UTILITY VEHICLE	Bus Use NOT A BUS	
		Initial Contact Point 11--LEFT FRONT CORNER	Vehicle Damage		
		Extent Of Damage MINOR DAMAGE	11--LEFT FRONT CORNER		
		Towed Due To Damage NOT TOWED	Vehicle Removed By OWNER		
		What Driver Was Doing GOING STRAIGHT	Vehicle Factors		
		Driver Prior Action Other	NOT APPLICABLE		

UNIT VEHICLE	Driver Actions		
	02	02	Owner Name ROBERTA G BERK (608) 493-9477
			Owner Address E12832 HALWEG RD MERRIMAC, WI 53561 , US
Sequence Of Events			
UNIT	01	Event MOTOR VEH IN TRANSPORT	
	02	Event	
	03	Event	
	04	Event	
Policy Holder			
UNIT	Insurance Company AUTO-OWNERS-INS-CO		Individual ROBERTA BERK
	Individual		
UNIT INDIVIDUAL	Driver ROBERTA G BERK (608) 493-9477		Citations Issued 0
			Sex FEMALE
			Date of Birth
	Address E12832 HALWEG RD MERRIMAC, WI 53561 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES
UNIT INDIVIDUAL	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
	02	002	Injury
			Airbag NON DEPLOYED
	Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE
	Trapped/Extricated NOT TRAPPED		
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier
	Hospital		EMS Run #
	Date of Death		Time of Death
Distracted By		Distracted By Source UNKNOWN	
Distracted By Action UNKNOWN			
Non Motorist		Striking Unit #	Location
Prior Action			

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT	INDIVIDUAL	Action			
		Action Other		To/From School	
02	002	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 PHYSICALLY IMPAIRED, USING CANE OR CRUTCHES			