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19-08675

WISCONSIN MOTOR VEHICLE CRASH REPORT

	Document Number Override	Primary Crash Document # Agency 19-086						Investigating Officer/Deputy DEPUTY E. KNULL			
כ	Crash Date	Crash Time 02:55 PM Time Notified		Date Arrived 07/14/2019 Total Units		Time Arrived					
1	07/14/2019 Date Notified					03:00 PM		Total Killed			
,	07/14/2019	02:55 PM		02	iiis		Total Injured 00		00		
016064446	On Emergency	lit and Run	Lane Closu			k Zone	Trailer	or To	owed	Reporting Threshold	
0 1 1	Government Property		hool Zone	NO School	Bus Relate	d 	Tags				
	Reportable	Crash Type PRIVATE PR	OPERTY/PARKI	NG LO	Г		Amend	ed		Secondary Crash	
	Description										
	Diagram			_		Ģ			onstruction on the struction of the structure of the stru	Ву	
		driv	e thru			not to scale		Addi NO	tional Inform	nation	
		culv									
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report. BOTH UNITS WERE IN THE DRIVE THRU OF CULVERS. UNIT 1 BUMPED THE BACK OF UNIT 2. UNIT 2 HAD A SCUFF MARK ON THE BUMPER FROM THE LICENSE PLATE SCREW OF UNIT 1. UNIT 1 DID NOT SUSTAIN ANY DAMAGE. BOTH VEHICLES WERE DRIVEN AWAY FROM THE SCENE. NO INJURIES										
	REPORTED BY ANY OCUPANT	NIT 1. UNIT 1 DID S	NOT SUSTAIN AN	T DAMA(∍E. BOIH	VEHICLES WER	KE DKIVEN AV	/VAY I	-KUM THE	SCENE. NO INJURIES	
	Location ——										
	PARKING LOT LINN ST/ STH33 EB LOT 42	0			Ī	Latitude 43.475183392	2		Longitud		
	(HOUSE/BUILDING 420) IN THE VILLAGE OF WEST	BARABOO				X Coordinate 276229.28125	i		Y Coordi 481730		
	IN SAUK COUNTY		Structure Type HOUSE/BUILDING								

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Scene

_											
		Harmful Event			First Harmful Event Location						
		TOR VEH IN TRANSPO	ORT	IN PARKING LANE OR ZONE							
		ner of Collision				Light Cond					
		FRONT TO REAR				DAYLIGHT					
	Road	Surface Condition(s)		Roadway	Factor(s)						
	DRY										
	Envi	ronment Factor(s)				1					
	NON	IE				NONE					
	Wea	ther Condition(s)				-					
	CLE	AR									
	Anim	al Type				Relation T	o Trafficwa	V			
	,							Y - PARKIN	G LOT		
	Cras	h Classification - Location				Crash Cla	ssification -	Jurisdiction			
	PRI	ATE PROPERTY				PRIVATI	E PROPE	RTY			
	Triba	l Land				Access Co				Special Study	
	1400				II. a	NO CON	TROL				
	Withi	n Interchange Area	Junction Location NON-JUNCTION		Intersection	on Type INTERSE	CTION				
			NON-JUNCTION		NOT AN	INTERSE	CTION				
		Summary =			i: A 0			I –			
		Status		Vehicle Ope	-	lassification	I	Unit Type	DII E		
		RANSIT cle Type		D CLASS				AUTOMOBILE Operating As Endorsements			
5		SENGER CAR				operating the Endersonnellie					
		Total Occs Train/Bus # Recorded			Total # Citations Issued		Total Traile		Total Haz	Mat Types	
	2				0		0		0		
	Insurance? Direction Of Travel		Pre CrashTire		`	Speed Lin	nit	Total Land	es		
⊢	YES	YES NOT ON ROADWAY		Mark							
UNI		Most Harmful Event: Collision With			Special Function NO SPECIAL FUNCTION				Motor Vehi		
		TOR VEH IN TRANSPO	ORT					NOT APP			
		c Way	TE DDODEDTY	Traffic Cont			Traffic Cont	rol Inoperat	tive/Missing		
		KING LOT OR PRIVA	IE PROPERTY	NO CONT				NO Road Grade			
		CKTOP (BITUMINOU:	S)	Road Curvature STRAIGHT				LEVEL			
		Bus or HazMat	<u>-, </u>	Опилоп							
	NO										
	,	/ehicle									
		License Plate Number		Plate Type	<u> </u>		St	Country of Issuance			
		AEG8214			ЈТОМОВІ І	E	WI	UNITED ST	TATES		
_		Vehicle Identification Nun	nber	Make			Year	Model			
5	01	YV1RH592552441548	3	VOLVO			2005	S60			
		Color		Body Style				Bus Use NOT A BU	c		
		BLK - BLACK		SD - SED				NOT A BU	<u> </u>		
_	;LE	Initial Contact Point 12FRONT		Vehicle Da	ımage						
	2	Extent Of Damage		NO DAM	AGE						
⊃∣	VEHICL	NO DAMAGE			AOL						
	_	Towed Due To Damage		moved By	Ву						
		NOT TOWED		OPERATOR							
		What Driver Was Doing		Vehicle Fa	ctors						
		GOING STRAIGHT									
		Driver Prior Action Other		NOT APP	NOT APPLICABLE						

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19-08675

WISCONSIN MOTOR VEHICLE CRASH REPORT

	Driver Astrono											
		Driver Actions FAULUSE TO CONTROL										
.	Щ	FAILURE TO CONTROL										
LIND	VEHICL											
5	Ξ											
	5											
		Owner Name			Owner Address							
		RHONDA L HANN	AM		426 MONROE ST							
5	5	(608) 393-8832			SAUK CITY, WI 53583	, US						
		0	4 -									
	•	Sequence Of Events Event										
	5	Event MOTOR VEH IN TRANSPORT										
	05	Event										
	0											
	03	Event										
	0											
	4	Event										
	9											
.		Policy Holder										
LIND					Individual							
5		Insurance Company			RHONDA HANNAM							
		PROGRESSIVE-DIRECT-INSURANCE-CO			INTONDA HANNAM							
		Individual										
		Driver MARIA A VITTENGL (608) 963-3138			Citations Issued		Sex					
	_				0		FEMALE					
	¥				Date of Birth		Race					
\vdash	ă					,	WHITE					
EN	INDIVIDUAL	Address			Driver License Number	•						
ر ر	9	S4116 WHISPERING PINES DR BARABOO, WI 53913 , US			STATE MUSSONOW OF	OLINITON LINUS	TED OTATEO					
	=				STATE: WISCONSIN COUNTRY: UNITED STATES							
			On Duty Crash		Safety Equipment							
	Sat	fety Equipment										
		Seat Position			SHOULDER & LAP BELT							
		1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY										
		Helmet Use			Helmet Compliance							
		Troining GGG										
		Eye Protection			Tint Compliance							
		,			Time Compilation							
	_		Injury Severity		Airbag							
6	90	Injury	NO APPARENT	INJURY	NON DEPLOYED							
		Ejected	Ejection P		1	1.	Trapped/Extricated					
		NOT EJECTED	-	ECTED/NOT APPL	ICABLE		NOT TRAPPED					
		Medical Transport	1401 201	LOTED/NOT ALTE	EMS Agency Identifier		EMS Run #					
		NOT TRANSPORT	ED		LIVIS Agency Identifier	'	LIVIS Ruii #					
			ED		Date of Dooth		<u> </u>					
		Hospital			Date of Death		Time of Death					
			D:									
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)											
			NOI APPLICAB	FE (MOT DISTRA	(ובט)							
	Distracted By Action											
	NOT DISTRACTED											
		Non Motorist	Striking Unit #	Location								
		Prior Action										

WISCONSIN MOTOR VEHICLE CRASH REPORT

								(000) 000 4000		
		Action								
	INDIVIDUAL									
—	J									
LINO	₽									
5	≥									
_										
	Z									
								1		
		Action Other						To/From School		
			Suspect	ted Alcohol Use	Suspected Drug Use					
	L	Orug & Alcohol	NO		NO					
	_	_								
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results			
		TEST NOT GIVEN								
				Drug Test Type		Davis Task Dassilks				
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results				
		TEST NOT GIVEN								
	_	Drug Type		<u> </u>		•				
7	001	9 -) -								
	0									
		Individual Condition								
		APPEARED NORM	IAL							
		ndividual								
		Passenger RYAN D BAUER (608) 393-8831			Citations Issued		Sex			
	- 1				0		MALE			
	A				Date of Birth		Race			
	'n				Date of Birtin		WHITE			
╘	₽						I WHILE			
UNIT	INDIVIDUAL	Address 426 MONROE ST SAUK CITY, WI 53583, US			Driver License Number		•			
\supset										
	Z				STATE: WISCONSIN COUNTRY: UNITED STATES					
			On Duty	/ Crash	Safety Equipment					
	Saf	ety Equipment			SHOULDER & LAP BELT					
		Seat Position								
		3FRONT SEAT-R	IGHT S	SIDE (TRAIN ENGINEER						
		Helmet Use			Helmet Compliance					
		Eye Protection			Tint Compliance					
	8		Injury S	everity	Airbag					
0	005	Iniurv	NO AD	PARENT INJURY	_					
_	·	, ,	NO AP	PARENT INJURT	NON DEPLOYED					
		Ejected		Ejection Path			Trapped/Extricated			
		NOT EJECTED		NOT EJECTED/NOT APPL	ICABLE		NOT TRAPPED			
		Medical Transport			EMS Agency Identifier		EMS Run #			
					LIVIO Agency Identinier		LIVIO INGILI#			
		NOT TRANSPORT	ΕD							
		Hospital			Date of Death		Time of Death			
	Distracted By Source									
		Distracted By	וטומום	ca by cource						
		Distracted By Action				-				
			Strikin~	Unit # Location						
		Non Motorist	Striking	Location						
		. Ton motorist								
		Prior Action								

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/14/2019

Crash Time 02:55 PM

TINO	INDIVIDUAL	Action								
		Action Other								To/From School
		Drug & Alcohol NO	pected Alcohol U	Jse	Suspected Drug Use NO					
ļ	_				_					
				Alcohol Test Typ	oe			Alcohol Test Results		
		TEST NOT GIVEN		D T4 T						
		TEST NOT GIVEN	Drug Test Given FEST NOT GIVEN Drug Test T			Drug	Test Results			
2	005	Drug Type		1						
		Individual Condition								
		APPEARED NORMAL								
•	Uni	Summary ===								
		Status			Vehicle Operating As Class	ification		Unit Type		
	IN T	RANSIT			D CLASS			AUTOMOBILE		
_	Vehi	cle Type		L				Operating A	s Endorsem	nents
05	(SP	ORT) UTILITY VEHICLE	Ī							
	Total Occs Train/Bus # Recorded				Total # Citations Issued Total Traile			ers	Total Hazl	Mat Types
	1				0 0				0	
İ	Insu	rance?	Direction Of Tra	avel	Pre CrashTire Speed Lim			mit Total Lanes		
╘	YES		NOT ON RO		□ Mark					
FIND		t Harmful Event: Collision W TOR VEH IN TRANSPO			Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE			
		ic Way		Traffic Control		Traffic Control Inoperative/Missing				
	PAR	KING LOT OR PRIVATE PROPERTY			NO CONTROL		NO			
	Surfa	асе Туре			Road Curvature		Road Grade			
	BLA	CKTOP (BITUMINOUS))		STRAIGHT			LEVEL		
		k Bus or HazMat						•		
	NO									
	,	Vehicle								
İ		License Plate Number			Plate Type		St	Country of Is	suance	
		ABV7741			AUT - AUTOMOBILE		WI	UNITED ST	TATES	
05	~	Vehicle Identification Numb			Make		Year	Model		
0	02	1FMCU0G78FUC77884	4		FORD		2015	ESCAPE		
		Color GRY - GRAY			Body Style UT - SPORT UTILITY	/EHICI	_E	Bus Use NOT A BU	S	
	Щ	Initial Contact Point			Vehicle Damage					
⊨	占	6REAR								
TNO TNO	VEHICLE	Extent Of Damage MINOR DAMAGE			6REAR					
	>	Towed Due To Damage			Vehicle Removed By					
		NOT TOWED			OPERATOR					
		What Driver Was Doing			Vehicle Factors					
		LEGALLY PARKED								
		Driver Prior Action Other			NOT APPLICABLE					
ı										

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

Crash Date 07/14/2019

Crash Time 02:55 PM

	Driver Actions											
LINO	VEHICLE	NO CONTRIBUTING ACTION										
05	02	Owner Name THERESA L WEDI (608) 235-7483	EKIND		Owner Address 2660 KENNETH CT SUN PRAIRIE, WI 53590 , US							
		Sequence Of Events										
	01	Event MOTOR VEH IN TRANSPORT										
	02	Event										
	03	Event										
	04	Event										
_	i	Policy Holder										
LNO		Insurance Company			Individual							
		AMERICAN-FAMILY-INS-CO			THERESA WEDEKIND							
		Individual										
		Driver ASHLEY MARIE KERL (608) 495-1986			Citations Issued 0		Sex FEMALE					
	JAL				Date of Birth		Race					
╘	שו					'	WHITE					
	INDIVIDUAL	Address 425 S BIRD ST # 310			Driver License Number							
	Z	SUN PRAIRIE, WI 53590 , US			STATE: WISCONSIN COUNTRY: UNITED STATES							
	ļ		On Duty Crasl	n	Safety Equipment							
	Saf	fety Equipment	,									
		Seat Position			SHOULDER & LAP BEI	LT						
		1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY Helmet Use			Helmet Compliance							
		Themse osc										
		Eye Protection			Tint Compliance							
05	003	f	Injury Severity	1	Airbag							
0	ŏ		NO APPARI	ENT INJURY	NON DEPLOYED							
		Ejected NOT EJECTED		ion Path EJECTED/NOT APP	LICARI E		Trapped/Extricated NOT TRAPPED					
		Medical Transport	1401	LUCIED/NOT ALL	EMS Agency Identifier		EMS Run #					
		NOT TRANSPORT	ED									
		Hospital			Date of Death	Date of Death Time of Death						
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)											
		Distracted By Action NOT DISTRACTED)									
		Non Motorist	Striking Unit #	Location								
		Prior Action										

WISCONSIN MOTOR VEHICLE CRASH REPORT

							• •
		Action					
	Υ						
╘	7						
LINO	5						
ر							
	INDIVIDUAL						
		Action Other					To/From School
		Suspects	ed Alcohol Use	Suspected Drug Use			
	I	Drug & Alcohol NO	ed Alconol Ose	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	3	
		TEST NOT GIVEN					
7	3	Drug Type	-		1		
02	003						
		Individual Condition					
		APPEARED NORMAL					