

6TL0B4X4LH

19-08412

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

Crash Scene

First Harmful Event PARKED MOTOR VEHICLE		First Harmful Event Location IN PARKING LANE OR ZONE	
Manner of Collision UNKNOWN		Light Condition UNKNOWN	
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 TRIBAL LAND		Crash Classification - Jurisdiction INDIAN RESERVATION/TRUST	
Tribal Land HO-CHUNK NATION		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 HIT AND RUN		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 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? UNKNOWN	Direction Of Travel UNKNOWN	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit	Total Lanes	
	Most Harmful Event: Collision With PARKED MOTOR VEHICLE		Special Function UNKNOWN		Emergency Motor Vehicle Use UNKNOWN	
	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					
	License Plate Number		Plate Type	St	Country of Issuance	
	Vehicle Identification Number		Make	Year	Model	
	Color WHI - WHITE		Body Style		Bus Use NOT A BUS	
	Initial Contact Point VEHICLE NOT AT SCENE		Vehicle Damage VEHICLE NOT AT SCENE			
	Extent Of Damage VEHICLE NOT AT SCENE					
	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR			
	What Driver Was Doing UNKNOWN		Vehicle Factors UNKNOWN			
Driver Prior Action Other						

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UNIT	VEHICLE	Driver Actions UNKNOWN	
		Owner Name	Owner Address
01	01		, ,
Sequence Of Events			
UNIT	INDIVIDUAL	01	Event PARKED MOTOR VEHICLE
		02	Event
		03	Event
		04	Event
Individual			
UNIT	INDIVIDUAL	Driver	Citations Issued 0
			Sex
		Date of Birth	Race
		Address	Driver License Number
		, ,	
Safety Equipment		On Duty Crash	Safety Equipment
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY	RESTRAINT USE UNKNOWN
		Helmet Use	Helmet Compliance
		Eye Protection	Tint Compliance
UNIT	INDIVIDUAL	Injury	Injury Severity NO APPARENT INJURY
			Airbag NOT APPLICABLE
		Ejected NOT APPLICABLE	Ejection Path NOT EJECTED/NOT APPLICABLE
			Trapped/Extricated NOT APPLICABLE
		Medical Transport NOT TRANSPORTED	EMS Agency Identifier
		Hospital	EMS Run #
			Date of Death
			Time of Death
Distracted By		Distracted By Source	
Distracted By Action			
Non Motorist		Striking Unit #	Location
Prior Action			

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UNIT	INDIVIDUAL	Action	
		Action Other	
01	001	Suspected Alcohol Use	
		Suspected Drug Use	
		Alcohol Test Given	Alcohol Test Type
		TEST NOT GIVEN	Alcohol Test Results
		Drug Test Given	Drug Test Type
		TEST NOT GIVEN	Drug Test Results
		Drug Type	
		Individual Condition	
		NOT OBSERVED	

Unit Summary

UNIT	02	Unit Status		Vehicle Operating As Classification		Unit Type	
		LEGALLY PARKED		D CLASS		AUTOMOBILE	
		Vehicle Type				Operating As Endorsements	
		(SPORT) UTILITY VEHICLE					
		Total Occs	Train/Bus # Recorded	Total # Citations Issued	Total Trailers	Total HazMat Types	
		0		0	0	0	
		Insurance?	Direction Of Travel	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit	Total Lanes	
		YES	NOT ON ROADWAY				
		Most Harmful Event: Collision With		Special Function		Emergency Motor Vehicle Use	
		MOTOR VEH IN TRANSPORT		NO SPECIAL FUNCTION		NOT APPLICABLE	
		Traffic Way		Traffic Control		Traffic Control Inoperative/Missing	
		PARKING LOT OR PRIVATE PROPERTY		NO CONTROL		NO	
		Surface Type		Road Curvature		Road Grade	
		BLACKTOP (BITUMINOUS)		STRAIGHT		LEVEL	
		Truck Bus or HazMat					
		NO					

UNIT	VEHICLE	Vehicle			
		License Plate Number	Plate Type	St	Country of Issuance
02	02	ADR8289	AUT - AUTOMOBILE	WI	UNITED STATES
		Vehicle Identification Number	Make	Year	Model
		2FMGK5BC1CBD08547	FORD	2012	FLEX
		Color	Body Style	Bus Use	
		GRN - GREEN	UT - SPORT UTILITY VEHICLE	NOT A BUS	
		Initial Contact Point	Vehicle Damage		
		6--REAR	6--REAR		
		Extent Of Damage			
		MINOR DAMAGE			
		Towed Due To Damage	Vehicle Removed By		
		NOT TOWED	OPERATOR		
		What Driver Was Doing	Vehicle Factors		
		LEGALLY PARKED	NOT APPLICABLE		
		Driver Prior Action Other			

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UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTION	
		02	02
Sequence Of Events			
UNIT	VEHICLE	01	Event MOTOR VEH IN TRANSPORT
		02	Event
		03	Event
		04	Event
Policy Holder			
		Insurance Company AMERICAN-FAMILY-INS-CO	Individual CHRISTIAN HOLST