

6TL09H5JQG

19-09348

# 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 <b>19-09348</b>	Investigating Officer/Deputy <b>DEPUTY S. MESSNER</b>	
Crash Date <b>07/28/2019</b>		Crash Time <b>01:15 PM</b>	Date Arrived <b>07/28/2019</b>	Time Arrived <b>01:35 PM</b>	
Date Notified <b>07/28/2019</b>		Time Notified <b>01:18 PM</b>	Total Units <b>02</b>	Total Injured <b>00</b>	Total Killed <b>00</b>
<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 <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

## Description

Diagram	Reconstruction By
<p>Not to scale</p> <p>STH 23</p> <p>Unit 2</p> <p>Unit 1</p> <p>STOP</p> <p>STOP</p> <p>STH 23/33</p> <p>STH 33</p> <p>Evergreen Road</p>	Photos By <b>DEP. S. MESSNER</b>
	Additional Information <b>PHOTOS</b>

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

ON JULY 28, 2019, AT APPROXIMATELY 1:15PM, UNIT 1, BEARING WISCONSIN REGISTRATION PLATE #315HUK, WAS BEING DRIVEN BY BETTY C. ZIMMERMAN WITH PASSENGER JESSIE A. CONLIN. UNIT 1 WAS WESTBOUND ON STH 23, ACTIVATED ITS RIGHT TURN BLINKER AND CAME TO A STOP FOR THE STOP SIGN AT THE INTERSECTION OF STH 33. UNIT 2, BEARING WISCONSIN REGISTRATION PLATE #440YTT, WAS BEING DRIVEN BY ANDREW HOPFENSBERGER JR, WITH PASSENGER LINDA L. HOPFENSBERGER. UNIT 2 WAS WESTBOUND ON STH 23 AND BEHIND UNIT 1. UNIT 2 WAS SLOWING DOWN FOR THE INTERSECTION, BUT STRUCK THE DRIVER'S SIDE REAR END OF UNIT 1. THE DRIVER OF UNIT 2 EXPLAINED HE WAS LOOKING LEFT TO SEE IF THERE WAS ANY ONCOMING TRAFFIC WHEN HE STRUCK UNIT 1. BOTH VEHICLES RECEIVED FUNCTIONAL DAMAGE. NO MEDICAL ASSISTANCE WAS REQUESTED BY ANY INDIVIDUAL. UNIT 2'S DRIVER WAS CITED FOR FOLLOWING TOO CLOSELY. BOTH UNITS WERE REMOVED BY OPERATORS.

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**Location**

<b>ON STH23 WB 99 FT N OF COUNTY LAND FILL LN IN THE TOWN OF EXCELSIOR IN SAUK COUNTY</b>	Latitude <b>43.532497933</b>	Longitude <b>-89.891755177</b>
	X Coordinate <b>266338.1875</b>	Y Coordinate <b>4824013.5</b>
	Structure Type <b>NO STRUCTURE</b>	

**Crash Scene**

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>		First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>02--FRONT TO REAR</b>		Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>DRY</b>		Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>			
Weather Condition(s) <b>CLOUDY</b>			
Animal Type		Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>		Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land		Access Control <b>PARTIAL CONTROL</b>	Special Study
Within Interchange Area <b>YES</b>	Junction Location <b>INTERSECTION</b>	Intersection Type <b>FOUR-WAY INTERSECTION</b>	

**Unit Summary**

<b>UNIT 01</b>	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>		
	Vehicle Type <b>PASSENGER CAR</b>				Operating As Endorsements		
	Total Occs <b>2</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>		
	Insurance? <b>YES</b>	Direction Of Travel <b>WESTBOUND</b>	<input type="checkbox"/> Pre Crash <input type="checkbox"/> Tire Mark	Speed Limit <b>55</b>	Total Lanes <b>2</b>		
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>		
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>STOP SIGN</b>		Traffic Control Inoperative/Missing <b>NO</b>		
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>		
	Truck Bus or HazMat <b>NO</b>						
	<b>UNIT 01 VEHICLE</b>	<b>Vehicle</b>					
		License Plate Number <b>315HUK</b>		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
Vehicle Identification Number <b>3LNHM28T18R665062</b>		Make <b>LINCOLN</b>	Year <b>2008</b>	Model <b>MKZ AWD</b>			
Color <b>BLK - BLACK</b>		Body Style <b>4D - 4DR</b>		Bus Use <b>NOT A BUS</b>			
Initial Contact Point <b>7--LEFT REAR CORNER</b>		Vehicle Damage  <b>6--REAR, 7--LEFT REAR CORNER</b>					
Extent Of Damage <b>FUNCTIONAL DAMAGE</b>							
Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>					

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UNIT VEHICLE	What Driver Was Doing <b>RIGHT TURN</b>	Vehicle Factors	
	Driver Prior Action Other	<b>NOT APPLICABLE</b>	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>		
01 01	Owner Name <b>JESSIE A CONLIN (608) 415-0779</b>	Owner Address <b>715 MARY AVE REEDSBURG, WI 53959 , US</b>	
	<b>Sequence Of Events</b>		
01 02 03 04	Event <b>MOTOR VEH IN TRANSPORT</b>		
	Event		
	Event		
	Event		
UNIT	<b>Policy Holder</b>		
	Insurance Company <b>SAFECO-INS-CO-OF-ILLINOIS</b>	Individual <b>JESSIE CONLIN</b>	
UNIT INDIVIDUAL	<b>Individual</b>		
	Driver <b>BETTY CONLIN ZIMMERMAN (608) 415-0779</b>	Citations Issued <b>0</b>	Sex <b>FEMALE</b>
		Date of Birth	Race <b>WHITE</b>
	Address <b>715 MARY AVE REEDSBURG, WI 53959 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01 001	<b>Safety Equipment</b>	On Duty Crash	Safety Equipment
	Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>	<b>SHOULDER &amp; LAP BELT</b>	
	Helmet Use	Helmet Compliance	
	Eye Protection	Tint Compliance	
01 001	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
	Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier	EMS Run #
	Hospital	Date of Death	Time of Death
	<b>Distracted By</b>	Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>	
	Distracted By Action <b>NOT DISTRACTED</b>		
	<b>Non Motorist</b>	Striking Unit #	Location
Prior Action			

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UNIT INDIVIDUAL	Action		
	Action Other		To/From School
	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
	Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results
	Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results
	Drug Type		
	Individual Condition <b>APPEARED NORMAL</b>		
	<b>Individual</b>		
	Passenger <b>JESSIE A CONLIN</b>	Citations Issued <b>0</b>	Sex <b>FEMALE</b>
	Address <b>715 MARY AV REEDSBURG, WI 53959 , US</b>		Date of Birth Race <b>WHITE</b>
Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>			
UNIT INDIVIDUAL	<b>Safety Equipment</b>	On Duty Crash	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>
	Seat Position <b>2--FRONT SEAT-MIDDLE</b>		
	Helmet Use	Helmet Compliance	
	Eye Protection	Tint Compliance	
	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
	Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier	EMS Run #
	Hospital	Date of Death	Time of Death
	<b>Distracted By</b>	Distracted By Source	
	Distracted By Action		
UNIT INDIVIDUAL	<b>Non Motorist</b>	Striking Unit #	Location
	Prior Action		

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UNIT	INDIVIDUAL	Action			
		Action Other			To/From School
01	002	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
		Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results	
		Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results	
		Drug Type			
		Individual Condition <b>APPEARED NORMAL</b>			

### Unit Summary

UNIT	02	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>AUTOMOBILE</b>		
		Vehicle Type <b>PASSENGER CAR</b>	Operating As Endorsements			
		Total Occs <b>2</b>	Train/Bus # Recorded	Total # Citations Issued <b>1</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
		Insurance? <b>YES</b>	Direction Of Travel <b>WESTBOUND</b>	<input type="checkbox"/> <b>Pre Crash Tire Mark</b>	Speed Limit <b>55</b>	Total Lanes <b>2</b>
		Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>		Special Function <b>NO SPECIAL FUNCTION</b>	Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
		Traffic Way <b>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>STOP SIGN</b>	Traffic Control Inoperative/Missing <b>NO</b>	
		Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>	Road Grade <b>LEVEL</b>	
		Truck Bus or HazMat <b>NO</b>				

UNIT	02	<b>Vehicle</b>			
		License Plate Number <b>440YTT</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>2C4RC1DG3HR611489</b>	Make <b>CHRYSLER</b>	Year <b>2017</b>	Model <b>PACIFICA</b>
		Color <b>RED - RED</b>	Body Style <b>VN - VAN</b>	Bus Use <b>NOT A BUS</b>	
		Initial Contact Point <b>12--FRONT</b>	Vehicle Damage		
		Extent Of Damage <b>FUNCTIONAL DAMAGE</b>	<b>1--RIGHT FRONT CORNER, 12--FRONT</b>		
		Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OPERATOR</b>		
		What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors		
Driver Prior Action Other	<b>NOT APPLICABLE</b>				

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UNIT	VEHICLE	Driver Actions <b>FOLLOWING TOO CLOSE, OTHER CONTRIBUTING ACTION</b>	
		Owner Name <b>ANDREW HOPFENSBERGER JR (608) 244-9558</b>	Owner Address <b>4606 BOYNTON PL MADISON, WI 53714 , US</b>
02	02	<b>Sequence Of Events</b>	
	01	Event <b>MOTOR VEH IN TRANSPORT</b>	
	02	Event	
	03	Event	
	04	Event	
UNIT	INDIVIDUAL	<b>Policy Holder</b>	
		Insurance Company <b>STATE-FARM-GENERAL-INS-CO</b>	Individual <b>ANDREW HOPFENSBERGER</b>
UNIT	INDIVIDUAL	Driver <b>ANDREW HOPFENSBERGER JR (608) 244-9558</b>	Citations Issued <b>1</b>
		Sex <b>MALE</b>	Date of Birth
		Address <b>4606 BOYNTON PL MADISON, WI 53714 , US</b>	Race <b>WHITE</b>
		Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
02	003	<b>Safety Equipment</b>	On Duty Crash
		Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>
		Helmet Use	Helmet Compliance
		Eye Protection	Tint Compliance
		<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>
			Airbag <b>NON DEPLOYED</b>
		Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>
		Trapped/Extricated <b>NOT TRAPPED</b>	
		Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier
		Hospital	EMS Run #
		Date of Death	Time of Death
		<b>Distracted By</b>	Distracted By Source <b>EXTERNAL (TO VEHICLE/NON-MOTORIST AREA)</b>
		Distracted By Action <b>OTHER ACTION (LOOKING AWAY FROM TASK ETC)</b>	
		<b>Non Motorist</b>	Striking Unit #
			Location
		Prior Action	

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UNIT	INDIVIDUAL	Action			
		Action Other		To/From School	
		<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>	
		Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results	
		Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results	
		Drug Type			
		Individual Condition <b>APPEARED NORMAL</b>			
		<b>Individual</b>			
		Passenger <b>LINDA L HOPFENSBERGER</b>	Citations Issued <b>0</b>	Sex <b>FEMALE</b>	
		Address <b>4606 BOYNTON PL MADISON, WI 53714 , US</b>		Date of Birth	
Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		Race <b>WHITE</b>			
UNIT	INDIVIDUAL	<b>Safety Equipment</b>	On Duty Crash	Safety Equipment	
		Seat Position <b>3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER</b>	<b>SHOULDER &amp; LAP BELT</b>		
		Helmet Use	Helmet Compliance		
		Eye Protection	Tint Compliance		
		<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>	
		Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>	
		Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier	EMS Run #	
		Hospital	Date of Death	Time of Death	
		<b>Distracted By</b>	Distracted By Source		
		Distracted By Action			
UNIT	INDIVIDUAL	<b>Non Motorist</b>	Striking Unit #	Location	
		Prior Action			

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<b>UNIT</b>	<b>INDIVIDUAL</b>	Action				
		Action Other			To/From School	
	<b>02</b>	<b>004</b>	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
			Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type		Alcohol Test Results
			Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results	
			Drug Type			
			Individual Condition <b>APPEARED NORMAL</b>			
	<b>01</b>	<b>Violations</b>				
		UTC Number <b>BD757022</b>	Issue To? <b>003</b>	Statute Number <b>346.14(1m)</b>	Description <b>AUTOMOBILE FOLLOWING TOO CLOSELY</b>	