6TL092T5NP

19-09404

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

I	Document Number Override	Primary Crash	Document #	Agency 19-094	Crash Number	Investigating				
	Crash Date 07/29/2019	Crash Time 99:99		Date Ar 07/29/2		Time Arrive 08:51 PM				
	Date Notified	Time Notified 08:46 PM		Total Ur 02	nits	Total Injured 00		Total Killed 00		
	On Emergency	and Run	Lane Closu		Work Zone		r or Tov	wed	Reporting Threshold	
; 	Government Property		hool Zone	School NO	Bus Related	Tags				
	Reportable	Crash Type PRIVATE PR	OPERTY/PARKI	NG LOT	Γ	Amen	ded		Secondary Crash	
	Description						Recon	struction E	Зу	
						Photos By				
							Additio	onal Inform	nation	
							NONE	=		
		Non F	Reportal	ble						
	Non Reportabl									
	✓ I, a sworn law enforcement UNIT 2 WAS LEGALLY PARKED I							CONTAC		
	UNIT 2 WAS LEGALLY PARKED I VEHICLES WERE SEPARATED N					Ο ΓΑΓΓΑΝΟ ΟΑΝ		CONTAC	I WITH UNIT 2. WHEN	
	ocation									
	PARKING LOT W DALEY ST LOT				Latitude 43.17841	003		Longitude		
	N THE VILLAGE OF SPRING N SAUK COUNTY	GREEN			X Coordin	X Coordinate			nate 5	
						Structure Type NO STRUCTURE				

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Crash Scene

1	First	Harmful Event		First Harmful Event Location								
	PAR	KED MOTOR VEHICL	IN PARKING LANE OR ZONE									
	Manı	ner of Collision	Light Condition									
	03	FRONT TO FRONT	UNKNOWN									
	Road	Surface Condition(s)	Roadway	Factor(s)								
	DRY	,										
	Envi	onment Factor(s)										
	NOM	NE				NONE						
	Wea	ther Condition(s)										
	CLE	AR										
	Anim	al Type		Relation T	o Trafficwa	V						
								Y - PARKIN	IG LOT			
		h Classification - Location						Jurisdiction				
								ISDICTION				
	Triba	I Land				Access Co NO CON				Special Study		
	Withi	n Interchange Area	Junction Location		Intersectio		IKOL					
	NO	-	NON-JUNCTION			INTERSE	CTION					
l	Unit	t Summary										
		Status		Vehicle Ope	erating As C	lassification		Unit Type				
	IN T	RANSIT		D CLASS				AUTOMO				
~	Vehi	cle Type		•				Operating As Endorsements				
9	(SP	ORT) UTILITY VEHICL										
		Occs	Train/Bus # Recorded		Total # Citations Issued		Total Trai	lers	Total HazMat Types			
	1			0	0		0	•.	0			
	Insurance? Direction Of Travel			Pre	Pre CrashTire		Speed Limit N/A		Total Lanes 2			
UNIT	YES NOT ON ROADWAY Most Harmful Event: Collision With				Special Function				Y Motor Vehicle Use			
5		KED MOTOR VEHICL			NO SPECIAL FUNCTION			NOT APP				
	Traff	ic Way		Traffic Cont	Traffic Control			Traffic Control Inoperative/Missing				
		KING LOT OR PRIVA	TE PROPERTY	NO CONT	NO CONTROL			NO				
	BLACKTOP (BITUMINOUS)				iture			Road Grade				
					Т			LEVEL				
	I ruci	k Bus or HazMat										
	-	Vehicle										
		License Plate Number		Plate Type			St	Country of Is	suance			
		AAY6303	AUT - AUTOMOBILE		E WI		UNITED STATES					
_	_	Vehicle Identification Num	iber	Make		Year		Model				
2	01	1GNKVGKD1GJ1533	72	CHEVRO			2016	TRAVERS Bus Use	EL			
		Color		Body Style					s			
	ш	RED - RED Initial Contact Point		UT - SPORT UTILITY VEHICLE NOT A BUS Vehicle Damage								
E		12FRONT	Volitolo Da									
UNIT	VEHICL	Extent Of Damage	NO DAM									
-	νE	NO DAMAGE										
		Towed Due To Damage Vehicle Removed				/						
		NOT TOWED What Driver Was Doing		OWNER Vehicle Factors								
		PARK MANEUVER										
	Driver Prior Action Other NOT APPLICA					E						
				-								

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		Driver Actions							
	ш	NO CONTRIBUTING AC	TION						
E	2								
UNIT	VEHICL								
	亩								
	>								
		0 N							
		Owner Name			Owner Address 724 HIGH ST				
2	01	CARRIE ANNE LOUIS (608) 215-0032			ARENA, WI 53503, US				
0	0	(000) 213-0032			ARENA, WI 35305 , 05				
	ġ	Sequence Of Event	s						
		Event							
	01	PARKED MOTOR VEHI	CLE						
		Event							
	02	Evon							
		F							
	03	Event							
	•	_							
	04	Event							
	0								
н	F	Policy Holder							
UNIT		Insurance Company			Individual				
		PROGRESSIVE-CLASS	IC-INS-CO		CARRIE LOUIS				
					1				
		ndividual							
					Citations Issued	Sex			
	Ļ	CARRIE ANNE LOUIS (608) 215-0032			0	FEMALE			
	٩N	(608) 213-0032			Date of Birth	Race			
Εl	D					WHITE			
	INDIVIDUAL	Address			Driver License Number	· · · · · · · · · · · · · · · · · · ·			
		724 HIGH ST			STATE: WISCONSIN COUNTRY: UNITED STATES				
	=	ARENA, WI 53503 , US			STATE: WISCONSIN COU	UNTRY: UNITED STATES			
		On D	uty Crash		Safety Equipment				
	Saf	ety Equipment							
		Seat Position			SHOULDER & LAP BELT				
		1FRONT SEAT-LEFT		R/MOTORCY					
		Helmet Use			Helmet Compliance				
					Ternet Compilance				
		Eye Protection			Tint Compliance				
		Lyc Troteonom							
	_ !	Injury	Severity		Airbag				
2	001				NON DEPLOYED				
	U .				NON DEFLOTED	Tranned/Eutriceted			
		Ejected	Ejection Pa			Trapped/Extricated			
		NOT EJECTED	NOTEJE	CTED/NOT APPI		NOT TRAPPED			
		Medical Transport			EMS Agency Identifier	EMS Run #			
		NOT TRANSPORTED							
		Hospital			Date of Death	Time of Death			
		Distracted By Source							
		Distracted By UNK	NOWN						
		Distracted By Action							
		UNKNOWN							
		Striki	ng Unit #	Location					
		Non Motorist	-						
		Prior Action							

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		Action									
	NDIVIDUAL										
⊨	Ы										
UNIT	Σ										
-	ā										
	≤										
		Action Other								To/From School	
	,	Sus	pected Alcohol U	lse	Suspected Drug Use						
	L	Drug & Alcohol No			NO						
		Alcohol Test Given Alcohol Test T			e		Alcohol Tes	t Results			
		TEST NOT GIVEN		Drug Test Type	Drug Test Results						
		Drug Test Given TEST NOT GIVEN	Diug rest ry			Drug Te	est Results	5			
	~	Drug Type									
2	001	blug Typo									
		Individual Condition									
		APPEARED NORMAL									
	Unit	t Summary									
	- ·	Status			Vehicle Operating As Class	sification		Unit Type			
		ALLY PARKED			D CLASS			AUTOMOBILE			
8		cle Type			Operating As Endorsements					nents	
	-	ORT) UTILITY VEHICLE			Total # Citations Issued Total Traile				Total Llas		
	1 ota 0	Occs	Hail/Bus # Recorded				0		Total HazMat Types 0		
	-	ance?	Direction Of Travel				Speed Limit		Total Lanes		
	YES		NOT ON RO		Mark N/A		•		2		
UNIT		Harmful Event: Collision Wi	th		Special Function			Emergency		cle Use	
	MO	TOR VEH IN TRANSPORT			NO SPECIAL FUNCTION	ON		NOT APP			
	Traffic Way				Traffic Control			Traffic Control Inoperative/Missing			
	PARKING LOT OR PRIVATE PROPERTY				NO CONTROL			NO Road Grade			
						Road Curvature STRAIGHT					
	BLACKTOP (BITUMINOUS) Truck Bus or HazMat				STRAIGHT			LEVEL			
	NO										
	_	Vehicle									
		License Plate Number			Plate Type		St	Country of Is	suance		
		AFU7344			AUT - AUTOMOBILE		WI	UNITED ST			
		Vehicle Identification Numb	ber		Make		Year	Model			
03	02	JM3KFBCL7H0159206	i		MAZDA	2	2017	CX-5			
		Color			Body Style		Bus Use				
		RED - RED			UT - SPORT UTILITY VEHICLE			NOT A BUS			
	Щ	Initial Contact Point			Vehicle Damage						
UNIT		12FRONT									
5	VEHICLE	Extent Of Damage			NO DAMAGE						
	>	NO DAMAGE Towed Due To Damage			Vehicle Removed By						
		NOT TOWED			OWNER						
		What Driver Was Doing			Vehicle Factors						
	LEGALLY PARKED										
1	Driver Prior Action Other				NOT APPLICABLE						

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		Driver Actions NO CONTRIBUTING ACTION						
UNIT	VEHICLE							
5	VEH							
		Queres Name						
		Owner Name AMY J GHASTIN	Owner Address 28776 WILD ROOT LN					
02	02	(608) 604-4822	LONE ROCK, WI 53556 , US					
	ç	Sequence Of Events						
	01	Event MOTOR VEH IN TRANSPORT						
	02	Event						
	B Event							
	04	Event						
F	I	Policy Holder						
UNIT		Insurance Company	Individual					
		STATE-FARM-GENERAL-INS-CO	AMY GHASTIN					