19-09967

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override		Primary Crash Document #		Agency Crash Number 19-09967		0 0	Investigating Officer/Deputy DEPUTY B. MEARS		
۷ď	Crash Date 08/10/2019		Crash Time 11:30 AM		Date Arrived 08/10/2019		Time Arrived 11:50 AM			
8M <i>(</i>	Date Notified 08/10/2019		Time Notified 11:31 AM		Total Units 02		Total Injured 00	Total Killed 00		
0BS	On Emergency Hit		t and Run Lane Closu		re	Work Zone	Trailer or	Trailer or Towed		Reporting Threshold
6 I L	Government Property		Active Sci	ctive School Zone Scho		hool Bus Related Tags				
	Reportable Crash Type PRIVATE PRO			OPERTY/PARKI	KING LOT Amended					Secondary Crash

Description



UNIT 1 OPERATOR STATED SHE HAD BEEN IN A PARKING STALL TO THE LEFT OF UNIT #2. SHE SAID SHE HAD JUST BACKED OUT OF THE STALL BACKING TO HER LEFT AND WAS STARTING TO PULL FORWARD WHEN UNIT #2 STARTED BACKING UP AND STRUCK HER. UNIT #2 OPERATOR STATED HE DID NOT SEE HER AT ALL AND STARTED TO BACK OUT OF HIS STALL AND SHE HIT HIM. THERE WERE NO INJURIES. UNIT 1 HAD DAMAGE TO FRONT RT BUMPER AND BROKEN LICENSE PLATE HOLDER. UNIT #2 HAD A CARGO CARRIER ATTACHED TO THE REAR OF THE UNIT AND HAD DAMAGE TO THE LEFT SIDE. CRASH HAPPENED IN THE PARKING LOT OF KINDSCHI'S STATION AT 105 MAIN ST IN LOGANVILLE. BOTH OPERATORS WERE PROVIDED WITH OTHER DRIVERS INFORMATION AND BOTH UNITS WERE REMOVED BY THE OPERATORS.

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	Loc	ation 									
	ON	150 E MAIN S MAIN STA	STH23 WB			Latitude			Longitud	le	
	89 F					43.44063	34732		-90.036	728016	
	_	WALNUT ST				X Coordin	ate		Y Coord	inate	
	(НО	USE/BUILDING 150 E N	IAIN)			254250.9	9375		481422	8.5	
	IN T	HE VILLAGE OF LOGA	Structure -	Туре							
		AUK COUNTY					BUILDING				
	C	ah Caana									
		sh Scene				_					
		Harmful Event					nful Event Lo				
		TOR VEH IN TRANSPO	RT			IN PARK	ING LANE	OR ZONE			
	-	ner of Collision				Light Cond					
	02	FRONT TO REAR				DAYLIGI	HT				
	Road	d Surface Condition(s)				Roadway	Factor(s)				
	DRY	•									
	Fnvii	ronment Factor(s)									
						NONE					
	NOI	NE .				NONE					
	Wea	ther Condition(s)				1					
	CLC	UDY									
	Anim	nimal Type					o Troffic				
	AHHT	iai iyhe					o Trafficway	r - PARKIN	GLOT		
	Cros	h Classification - Location							G LUI		
		VATE PROPERTY					E PROPER	Jurisdiction			
		I Land				Access Co		. 1 1		Special Study	
	11100	ii Land			NO CONTROL		Special Study		Special Study		
	\\/ith	n Interchange Area J	unction Location		Intersection Type						
	NO	ŭ	ION-JUNCTION			N INTERSECTION					
			1011-0011011		NOT AIL	INTLINOL	011011				
		Summary ===		177111		10 1					
		Status			erating As C	ng As Classification Unit Type					
		IN TRANSIT							AUTOMOBILE Operating As Endorsements		
01	Vehicle Type				Operating As Endorsements						
•		SENGER VAN	Train/Bus # Recorded	T	Total # Citations Issued Total Traile			lers Total HazMat Types			
		Occs	Train/bus # Recorded	Total # Citations Issued 0		0		ers		wat Types	
	01	ance?	Direction Of Travel				Speed Lim	iŧ	O Total Lane	20	
	YES		EASTBOUND		CrashTire Mark	!	N/A		0	53	
UNIT		Harmful Event: Collision Wi		Special Fun			IVA	Emergency		de Use	
5		TOR VEH IN TRANSPO		NO SPECIAL FUNCT		TION		NOT APPLICABLE		010 000	
		ic Way	· · ·	Traffic Cont	Traffic Control			Traffic Control Inoperative/Missing			
		KING LOT OR PRIVATI	E PROPERTY	NO CONT				NO		3	
		ace Type		Road Curva				Road Grade DOWNHILL			
		CKTOP (BITUMINOUS))	STRAIGH							
		k Bus or HazMat									
	NO										
	,	Vehicle									
		License Plate Number		Plate Type			St	Country of Is:	suance		
		268ENX			JTOMOBIL	E I	WI	UNITED ST			
		Vehicle Identification Numb	Make		-		Model				
5	5	JN8AE2KP7D9068572		NISSAN			2013	QUEST S/S	SV		
		Color		Body Style			Bus Use				
		WHI - WHITE			VN - VAN			NOT A BUS	3		
	щ	Initial Contact Point		Vehicle Da			ı				
╘	C	12FRONT									
LNO	Ī	Extent Of Damage		12FROM	NT						
_	12FRONT Extent Of Damage FUNCTIONAL DAMAGE										
		Towed Due To Damage		Vehicle Re	Vehicle Removed By						
		NOT TOWED			OPERATOR						
					OI ENATOR						

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		What Driver Was Doing BACKING	Vehicle Factors							
		Driver Prior Action Other	NOT APPLICABLE							
LIND	VEHICLE	Driver Actions UNKNOWN								
01	01	Owner Name ANITA MARIA MCKNIGHT (608) 408-8798	Owner Address 530 ALEXANDER AVE REEDSBURG, WI 53959, US							
		Sequence Of Events								
	01	Event MOTOR VEH IN TRANSPORT								
	02	Event								
	03	Event								
	04	Event								
_		l Policy Holder								
LNO		Insurance Company	Individual	Individual						
		STATE-FARM-GENERAL-INS-CO	ANITA MCKNIGHT							
		ndividual Driver	Citations Issued	Sex						
	_	ANITA MARIA MCKNIGHT	0	FEMALE						
_	DUA	(608) 408-8798	Date of Birth	Race WHITE						
LINO	INDIVIDUAL	Address 530 ALEXANDER AVE REEDSBURG, WI 53959 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES							
	Sat	On Duty Crash Tety Equipment	Safety Equipment	Safety Equipment						
		Seat Position 1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY	SHOULDER & LAP BELT							
		Helmet Use	Helmet Compliance							
		Eye Protection	Tint Compliance							
2	001	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED							
		Ejected Ejection Path NOT EJECTED NOT EJECTED/NOT API	PLICABLE	Trapped/Extricated NOT TRAPPED						
		Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #						
		Hospital	Date of Death	Time of Death						
		Distracted By Source NOT APPLICABLE (NOT DISTR	ACTED)							
		Distracted By Action NOT DISTRACTED								
		Non Motorist Striking Unit # Location								
		Prior Action								

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		Action							
⊢	INDIVIDUAL								
UNIT	DIVIE								
	Ξ								
		Action Other						To/From School	
					_			To/Troill Carloo	
	L	Orug & Alcohol NO	pected Alcohol U	se	Suspected Drug Use NO				
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	,		Alcohol Test Results		
		Drug Test Given Drug Test TEST NOT GIVEN		Drug Test Type	pe Drug Test Results				
01	001	Drug Type							
		Individual Condition							
		APPEARED NORMAL							
	Unit	Summary							
	Unit	Status			ehicle Operating As Classi	ification	Unit Type		
7	IN TRANSIT Vehicle Type				CLASS		AUTOMOBILE Operating As Endorsements		
02		ORT) UTILITY VEHICLE				Total Trail		Tatal Handet Tones	
	03	Occs	Train/Bus # Red		Total # Citations Issued 0		ers	Total HazMat Types 0	
_	Insur	ance?	Direction Of Tra	_	Pre CrashTire Mark	Speed Lin	mit Total Lanes 0		
UNIT		Harmful Event: Collision Wi			pecial Function IO SPECIAL FUNCTIO	N .	NOT APPI	Motor Vehicle Use LICABLE	
		fic Way RKING LOT OR PRIVATE PROPERTY			raffic Control		Traffic Control Inoperative/Missing NO		
	Surfa	асе Туре			oad Curvature		Road Grade		
		CKTOP (BITUMINOUS) Bus or HazMat		s	TRAIGHT		DOWNHILL		
	NO	C Duo OI TIAZIVIAL							
	'	/ehicle				10:	0 (
		License Plate Number 289394F			Plate Type FRM - FARM	St WI	Country of Is UNITED ST		
02	02	Vehicle Identification Numb			Make JEEP	Year 2002	Model		
		Color		E	Body Style		Bus Use		
	ш	BLK - BLACK Initial Contact Point			UT - SPORT UTILITY \ /ehicle Damage	/EHICLE	NOT A BUS		
LINO	ICL	6REAR			-				
5	VEHICL	Extent Of Damage MINOR DAMAGE			6REAR				
		Towed Due To Damage NOT TOWED			Vehicle Removed By OPERATOR				
		What Driver Was Doing LEAVING A PARKED I	POSITION	\	/ehicle Factors				
		Driver Prior Action Other	30.11014	1	NOT APPLICABLE				

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		Driver Actions									
		UNSAFE BACKING	3								
_	VEHICLE										
LINO	≌										
5	픎										
	>										
		Owner Name			Owner Address						
	~ 1	GERHARDT NORB	BERT DURST		E2696 STATE ROAD 15						
05	02	(608) 393-7403			HILLPOINT, WI 53937	, US					
		0 of F									
	•	Sequence Of Ev	ents/								
	5	Event MOTOR VEH IN TR	ANSDODT								
	0										
	0	Event									
	02										
		Event									
	03										
		T									
	9	Event									
\vdash	ı	Policy Holder									
LNO		Insurance Company			Individual						
-		PROGRESSIVE-CASUALTY-INS-CO			GERHARDT DURST						
		<u>Individual</u>									
		Driver GERHARDT NORBERT DURST (608) 393-7403			Citations Issued	Sex					
	_				0	MALE					
	¥				Date of Birth	Race					
-	<u>م</u>					WHITE					
L	INDIVIDUAL	Address E2696 STATE ROAD 154 HILLPOINT, WI 53937 , US			Driver License Number						
\supset											
	Z				STATE: WISCONSIN COUNTRY: UNITED STATES						
			On Duty Crash		Cofet: Familian and						
	Sat	fety Equipment	On Duty Clash		Safety Equipment						
	- u				SHOULDER & LAP BELT						
		Seat Position									
		1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY									
		Helmet Use			Helmet Compliance						
		Eye Protection			Tint Compliance						
~	7		Injury Severity		Airbag						
05	002	Injury	NO APPARENT I	NJURY	NON DEPLOYED						
		Ejected	Ejection Pa			Trapped/Extricated					
		NOT EJECTED	1 '	 CTED/NOT APPI	ICARI E	NOT TRAPPED					
			NOT ESE	CILD/NOT ALL		EMS Run #					
	Medical Transport NOT TRANSPORTED Hospital				EMS Agency Identifier	EIVIS RUIT #					
					Date of Death	Time of Death					
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)										
		Distracted By	NOT APPLICABL	.E (NOT DISTRA	CTED)						
		Distracted By Action									
	NOT DISTRACTED										
			Striking Unit #	Location							
		Non Motorist	5								
		Prior Action		I							

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LIND	INDIVIDUAL	Action							
		Action Other					To/From School		
	L	Orug & Alcohol NO	cted Alcohol Use	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				
05	005	Drug Type	-						
		Individual Condition							
		APPEARED NORMAL							
	i	ndividual							
		Passenger ADYN L DURST		Citations Issued 0		Sex MALE			
_	DUAI	(608) 393-7403				Race WHITE			
LINO	INDIVIDUAL	Address E2696 STATE ROAD 154 HILLPOINT, WI 53937		Driver License Number					
	Saf	On Du	ty Crash	Safety Equipment					
	Safety Equipment EMT/FIRST-RESPONDER Seat Position 3FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER			SHOULDER & LAP BELT					
		Helmet Use		Helmet Compliance					
		Eye Protection		Tint Compliance					
8	္က	Injury S	Severity	Airbag					
05	003		PPARENT INJURY	NON DEPLOYED		Tropped/Extrinated			
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPL	ICABLE		Trapped/Extricated NOT TRAPPED			
		Medical Transport NOT TRANSPORTED	•	EMS Agency Identifier		EMS Run #			
	Hospital			Date of Death Time of Death					
		Distracted By	cted By Source	1		<u> </u>			
		Distracted By Action							
		Non Motorist Striking	g Unit # Location						
		Prior Action	L						

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		Action									
	7										
.	INDIVIDUAL										
LND	۵										
5	>										
_											
	Z										
		Action Other						To/From School			
			Suspected Alcohol	Heo	Suspected Drug Use						
		Drug & Alcohol	NO	Ose	NO						
	_	_	110								
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results				
		TEST NOT GIVEN									
		Drug Test Given		Drug Test Type		Drug Test Results					
		TEST NOT GIVEN		3 ,,		Drug root recuite					
02	003	Drug Type									
0	Ō										
		Individual Condition									
		APPEARED NORM	AL								
	1	ndividual									
	-	Passenger			Citations Issued		Sex				
		CORBIN E DURST (608) 393-7403			0						
	7						MALE				
	INDIVIDUAL				Date of Birth		Race				
-	<u> </u>				WHITE						
	≥	Address			Driver License Number						
⊃	⊒	E2696 STATE ROAD 154 HILLPOINT, WI 53937, US									
	Z										
		On Duth Crook			Safety Equipment						
	Saf	ety Equipment	On Duty Crash		Safety Equipment						
	Jai										
		Seat Position			CHILD RESTRAINT	SYSTEM - FORW	VARD FACING				
		6SECOND SEAT-RIGHT SIDE									
		Helmet Use			Helmet Compliance						
		Treilliet Ose									
		Fire Destanting			Tist Compliance						
		Eye Protection			Tint Compliance						
05	004		Injury Severity		Airbag						
0	0	injury _i	NO APPARENT	INJURY	NON DEPLOYED						
		Ejected	Ejection P	ath			Trapped/Extricated				
		NOT EJECTED	NOT EJE	ECTED/NOT APPL	ICABLE		NOT TRAPPED				
		Medical Transport	1.101. 201		EMS Agency Identifier		EMS Run #				
			-n		ENIS Agency Identiller		EIVIS KUII #				
		NOT TRANSPORTE	=υ								
		Hospital			Date of Death		Time of Death				
	Distracted By Source										
		Distracted By									
	Distracted By Action										
				1.							
		Non Motories	Striking Unit #	Location							
		Non Motorist									
		Prior Action		•							

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		Action					
		Action					
	AL						
—	'n						
늘	₽						
UNIT	2						
	INDIVIDUAL						
	=						
		Action Other					To/From School
		Suspected Alcohol L	lse	Suspected Drug Use			
	L	Drug & Alcohol NO		NO			
		Alcohol Test Given	Alcohol Test Type			Alcohol Test Results	
		TEST NOT GIVEN					
		Drug Test Given	Drug Test Type		Drug Test Results		
		TEST NOT GIVEN					
~	4	Drug Type					
02	004						
		Individual Condition					
		APPEARED NORMAL					