

6TL09H5JQH

19-09974

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 19-09974	Investigating Officer/Deputy DEPUTY S. MESSNER	
Crash Date 08/10/2019		Crash Time 01:50 PM	Date Arrived 08/10/2019	Time Arrived 02:37 PM	
Date Notified 08/10/2019		Time Notified 01:59 PM	Total Units 02	Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input checked="" 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		Tags	
<input type="checkbox"/> Reportable	Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

Description

Diagram 	Reconstruction By
	Photos By DEPUTY S. MESSNER #9134
	Additional Information PHOTOS

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

ON SATURDAY, AUGUST 10, 2019, AT APPROXIMATELY 1:59 PM, I, DEPUTY MESSNER, WAS DISPATCHED TO E10704A PIONEER DRIVE, TOWNSHIP OF DELTON, SAUK COUNTY, WI, IN REGARDS TO A HIT-AND-RUN ON PRIVATE PROPERTY. I ARRIVED ON SCENE AND MADE CONTACT WITH THE OWNER OF PEIONEER DRIVE AUTO, DANIEL LEJA, M/W DOB: 12/16/1992. IN SPEAKING TO DANIEL, I LEARNED THE FOLLOWING INFORMATION. DANIEL ADVISED THAT A SILVER VEHICLE, BEARING ILLINOIS REGISTRATION PLATES, CAME INTO HIS PARKING LOT, TURNED AROUND AND DID NOT CLEAR IN THEIR MANEUVER. THE VEHICLE STRUCK A VEHICLE THAT WAS FOR SALE, CAUSING MINOR DAMAGE TO THE FRONT CORNER OF THE BUMPER. I PHOTOGRAPHED THE DAMAGE VEHICLE. I ADVISED DANIEL THE ACCIDENT WAS A NON-REPORTABLE ACCIDENT AND A NON-REPORTABLE CRASH REPORT WAS COMPLETED. I VERIFIED PIONEER DRIVE AUTO HAD AUTO-OWNERS INSURANCE. I ENDED CONTACT WITH DANIEL. I CANVASSED THE AREA FOR THE SUSPECT VEHICLE AND DID NOT LOCATE ANY VEHICLE MATCHING THE DESCRIPTION WITH POSSIBLE FRONT END DAMAGE.

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Location

PARKING LOT PIONEER DR LOT E10704A (FIRE E10704A) IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude	Longitude
	43.630505103	-89.788678514
	X Coordinate	Y Coordinate
	275032.96875	4834614.5
Structure Type		FIRE

Crash Scene

First Harmful Event	First Harmful Event Location	
PARKED MOTOR VEHICLE	OFF ROADWAY, LOCATION UNKNOWN	
Manner of Collision	Light Condition	
OTHER	DAYLIGHT	
Road Surface Condition(s)	Roadway Factor(s)	
GRAVEL	NOT APPLICABLE	
Environment Factor(s)		
NONE		
Weather Condition(s)		
CLEAR		
Animal Type	Relation To Trafficway	
	NON TRAFFICWAY - PARKING LOT	
Crash Classification - Location	Crash Classification - Jurisdiction	
PRIVATE PROPERTY	PRIVATE PROPERTY	
Tribal Land	Access Control	Special Study
	NO CONTROL	
Within Interchange Area	Junction Location	Intersection Type
NO	OTHER LOCATION NOT LISTED AB	NOT AN INTERSECTION

Unit Summary

UNIT	Unit Status	Vehicle Operating As Classification		Unit Type	
	LEGALLY PARKED	D CLASS		AUTOMOBILE	
	Vehicle Type	Operating As Endorsements			
	PASSENGER CAR				
	Total Occs	Train/Bus # Recorded	Total # Citations Issued	Total Trailers	Total HazMat Types
	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				
Traffic Way	Traffic Control		Traffic Control Inoperative/Missing		
PARKING LOT OR PRIVATE PROPERTY	NO CONTROL		NO		
Surface Type	Road Curvature		Road Grade		
SLAG, GRAVEL, OR STONE	UNKNOWN		UNKNOWN		
Truck Bus or HazMat					
NO					

UNIT	VEHICLE	Vehicle			
		License Plate Number	Plate Type	St	Country of Issuance
		Vehicle Identification Number	Make	Year	Model
		JTDJT923185175945	TOYOTA	2008	YARIS
		Color	Body Style	Bus Use	
		BLU - BLUE	2H - HATCHBACK 2 DOOR	NOT A BUS	
		Initial Contact Point	Vehicle Damage		
12--FRONT	12--FRONT				
Extent Of Damage					
MINOR DAMAGE					
Towed Due To Damage	Vehicle Removed By				
NOT TOWED					

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UNIT VEHICLE	What Driver Was Doing LEGALLY PARKED	Vehicle Factors
	Driver Prior Action Other	NOT APPLICABLE
	Driver Actions NO CONTRIBUTING ACTION	
01	Owner Name PIONEER DRIVE AUTOMATIVE (608) 432-3122	Owner Address E10704A PIONEER DRIVE WISCONSIN DELLS, WI 53965 , US
Sequence Of Events		
01	Event MOTOR VEH IN TRANSPORT	
02	Event	
03	Event	
04	Event	
UNIT	Policy Holder	
	Insurance Company AUTO-OWNERS-INS-CO	Organization/Company PIONEER DRIVE AUTOMATIVE

Unit Summary

UNIT	Unit Status HIT AND RUN	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE		
	Vehicle Type PASSENGER CAR	Operating As Endorsements			
UNIT	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 CrashTire Mark	Speed Limit N/A	Total Lanes
	Most Harmful Event: Collision With PARKED MOTOR VEHICLE		Special Function UNKNOWN	Emergency Motor Vehicle Use UNKNOWN	
	Traffic Way UNKNOWN		Traffic Control UNKNOWN	Traffic Control Inoperative/Missing UNKNOWN	
	Surface Type UNKNOWN		Road Curvature UNKNOWN	Road Grade UNKNOWN	
	Truck Bus or HazMat NO				

UNIT VEHICLE	Vehicle			
	License Plate Number	Plate Type	St	Country of Issuance
	Vehicle Identification Number	Make	Year	Model
	Color	Body Style	Bus Use NOT A BUS	
	Initial Contact Point 12--FRONT	Vehicle Damage		
	Extent Of Damage MINOR DAMAGE	12--FRONT		
	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR		
	What Driver Was Doing UNKNOWN			

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UNIT VEHICLE	Vehicle Factors		
	Driver Prior Action Other	UNKNOWN	
	Driver Actions UNKNOWN		
02	Owner Name	Owner Address , ,	
	Sequence Of Events		
01 02 03 04	Event	PARKED MOTOR VEHICLE	
	Event		
	Event		
	Event		
UNIT INDIVIDUAL	Individual		
	Driver	Citations Issued 0	
		Sex	
		Date of Birth	
		Race	
	Address , ,	Driver License Number	
02	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	
	Injury	Injury Severity NO APPARENT INJURY	Airbag NOT APPLICABLE
001	Ejected NOT APPLICABLE	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT APPLICABLE
	Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #
	Hospital	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		To/From School	
	02	001	Drug & Alcohol	Suspected Alcohol Use	Suspected Drug Use
			Alcohol Test Given	Alcohol Test Type	Alcohol Test Results
			TEST NOT GIVEN		
			Drug Test Given	Drug Test Type	Drug Test Results
			TEST NOT GIVEN		
			Drug Type		
			Individual Condition		
			NOT OBSERVED		