

6TL09N3P7H

19-10334

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 19-10334	Investigating Officer/Deputy DEPUTY C. FRANK	
Crash Date 08/18/2019		Crash Time 11:34 AM	Date Arrived 08/18/2019	Time Arrived 11:59 AM	
Date Notified 08/18/2019		Time Notified 11:34 AM	Total Units 03	Total Injured 00	Total Killed 00
<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 NO		Tags	
<input checked="" type="checkbox"/> Reportable	Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

Description

Diagram 	Reconstruction By
	Photos By 9198
	Additional Information PHOTOS

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

ON THE ABOVE DATE AND TIME UNITS 2 AND 3 WERE PARKED ON NORTH AVE IN BLUFFVIEW TRAILER COURT IN FRONT OF C12 FACING WEST. UNIT 1 WAS TRAVELING WESTBOUND ON NORTH AVE. UNIT ONE OPERATOR STATED SHE LOST GRIP OF THE STERRING WHEEL CAUSING IT TO DRIFT RIGHT. UNIT 1 STRUCK UNIT 2 IN THE REAR CAUSING UNIT 2 TO LURCH FORWARD AND STRIKE UNIT 3. UNIT 2 CAME TO A REST IN NORTH DITCH. UNIT 1 PASSENGER STATED SHE WAS SCARED AND CLIMBED INTO BACK SEAT AREA AND EXITED UNIT 1 THROUGH REAR DRIVER DOOR. SHE THEN RAN TO FAMILY MEMBERS AT UNIT B12. UNIT 1 OPERATOR CONTINUED AND STOPPED UNIT NEAR S7467 WESTERN AVE. SHE RETRIEVED ANOTHER CHILD IN THIS AREA AND WALKED BACK TO GET HER IL DL AND PHONE. SHE RETURNED TO UNIT 1 AFTER MY ARRIVAL. OWNER OF UNIT 1, 2 AND 3 EXCHANGED INFORMATION.

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Location

Table with 3 columns: Address (ON C13 NORTH RD, 464 FT W OF EAST RD, HOUSE/BUILDING C13), Latitude (43.372421215), Longitude (-89.771702921), X Coordinate (275447.1875), Y Coordinate (4805904.5), Structure Type (HOUSE/BUILDING).

Crash Scene

Table with 3 columns: Event (PARKED MOTOR VEHICLE), Location (ROADSIDE), Manner (02--FRONT TO REAR), Light (DAYLIGHT), Road Surface (DRY), Environment (NONE), Weather (CLOUDY), Animal Type, Relation To Trafficway (TRAFFICWAY - ON ROAD), Crash Classification - Location (PUBLIC PROPERTY), Crash Classification - Jurisdiction (NO SPECIAL JURISDICTION), Tribal Land, Access Control (NO CONTROL), Special Study, Within Interchange Area (NO), Junction Location (NON-JUNCTION), Intersection Type (NOT AN INTERSECTION).

Unit Summary

Table with 5 columns: Unit Status (IN TRANSIT), Vehicle Operating As Classification (D CLASS), Unit Type (AUTOMOBILE), Vehicle Type ((SPORT) UTILITY VEHICLE), Operating As Endorsements, Total Occs (2), Train/Bus # Recorded, Total # Citations Issued (1), Total Trailers (0), Total HazMat Types (0), Insurance? (YES), Direction Of Travel (WESTBOUND), Pre Crash Tire Mark, Speed Limit (15), Total Lanes (2), Most Harmful Event: Collision With (PARKED MOTOR VEHICLE), Special Function (NO SPECIAL FUNCTION), Emergency Motor Vehicle Use (NOT APPLICABLE), Traffic Way (TWO-WAY, NOT DIVIDED), Traffic Control (NO CONTROL), Traffic Control Inoperative/Missing (NO), Surface Type (BLACKTOP (BITUMINOUS)), Road Curvature (STRAIGHT), Road Grade (LEVEL), Truck Bus or HazMat (NO).

Table with 4 columns: License Plate Number (Q590735), Plate Type (AUT - AUTOMOBILE), St (IL), Country of Issuance (UNITED STATES), Vehicle Identification Number (2T3RFREV3DW014698), Make (TOYOTA), Year (2013), Model (RAV4), Color (GRN - GREEN), Body Style (4H - HATCHBACK 4 DOOR), Bus Use (NOT A BUS), Initial Contact Point (12--FRONT), Vehicle Damage (1--RIGHT FRONT CORNER, 12--FRONT), Extent Of Damage (DISABLING DAMAGE), Towed Due To Damage (NOT TOWED), Vehicle Removed By.

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UNIT VEHICLE	What Driver Was Doing GOING STRAIGHT	Vehicle Factors	
	Driver Prior Action Other	NOT APPLICABLE	
	Driver Actions FAILURE TO CONTROL		
01 01	Owner Name LILIA ALFARO-VALDOVINOS (815) 297-3262	Owner Address 4150 S LOREN RD PEARL CITY, IL 61062 , US	
	Sequence Of Events		
01 02 03 04	Event 01 PARKED MOTOR VEHICLE		
	Event		
	Event		
	Event		
UNIT	Policy Holder		
	Insurance Company PROGRESSIVE-ADVANCED-INSURANCE-CO	Individual LILIA ALFARO-VALDOVINOS	
UNIT INDIVIDUAL	Individual		
	Driver LILIA ALFARO-VALDOVINOS (815) 297-3262	Citations Issued 1	Sex FEMALE
		Date of Birth	Race HISPANIC
	Address 4150 S LOREN RD PEARL CITY, IL 61062 , US	Driver License Number STATE: ILLINOIS COUNTRY: UNITED STATES	
01 001	Safety Equipment	On Duty Crash	Safety Equipment
	Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY	SHOULDER & LAP BELT	
	Helmet Use	Helmet Compliance	
	Eye Protection	Tint Compliance	
	Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #
	Hospital	Date of Death	Time of Death
	Distracted By	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)	
	Distracted By Action NOT DISTRACTED		
	Non Motorist	Striking Unit #	Location
	Prior Action		

WISCONSIN MOTOR VEHICLE
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UNIT 01	INDIVIDUAL	Action			
		Action Other		To/From School	
		Drug & Alcohol	Suspected Alcohol Use NO	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	
		Drug Type			
		Individual Condition APPEARED NORMAL			
		Individual			
		Passenger ESMERALDA B SANCHEZ (608) 658-4922	Citations Issued 0	Sex FEMALE	
		Address 2433 CHALET GARDENS CRT FITCHBURG, WI 53575 , US	Date of Birth Race HISPANIC		
UNIT 01	INDIVIDUAL	Driver License Number			
		Safety Equipment	On Duty Crash		
		Seat Position 3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER	SHOULDER & LAP BELT		
		Helmet Use	Helmet Compliance		
		Eye Protection	Tint Compliance		
		Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED	
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED	
		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	
	01	002	Drug & Alcohol		Suspected Alcohol Use NO	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	
			Drug Type			
			Individual Condition APPEARED NORMAL			
	01	001	Violations			
			UTC Number AE754940	Issue To? 001	Statute Number 346.57(2)	Description FAILURE TO KEEP VEHICLE UNDER CONTROL

Unit Summary

UNIT	02	Unit Status LEGALLY PARKED	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE	
		Vehicle Type PASSENGER CAR	Operating As Endorsements		
	Total Occs 0	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? NO	Direction Of Travel NOT ON ROADWAY	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 15	Total Lanes 2
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL	Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT	Road Grade LEVEL	
	Truck Bus or HazMat NO				

Vehicle

UNIT	02	02	VEHICLE	License Plate Number ACM1416	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
				Vehicle Identification Number 2T1BR32E66C598277	Make TOYOTA	Year 2006	Model COROLLA
				Color TAN - TAN	Body Style SD - SEDAN		Bus Use NOT A BUS
				Initial Contact Point 6--REAR	Vehicle Damage		
				Extent Of Damage DISABLING DAMAGE	6--REAR, 7--LEFT REAR CORNER, 8--LEFT SIDE REAR		
				Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By BILLS TOWING		
				What Driver Was Doing LEGALLY PARKED	Vehicle Factors		
				Driver Prior Action Other	NOT APPLICABLE		

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UNIT 02	VEHICLE 02	Driver Actions NO CONTRIBUTING ACTION
		Owner Name GABRIEL ACEVEDO ORTIZ
		Owner Address S7559 USH 12 #C12 NORTH FREEDOM, WI 53951 , US
Sequence Of Events		
	01	Event MOTOR VEH IN TRANSPORT
	02	Event
	03	Event
	04	Event

Unit Summary

UNIT 03	Unit Status LEGALLY PARKED	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE	
	Vehicle Type (SPORT) UTILITY VEHICLE	Operating As Endorsements		
	Total Occs 0	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0
	Insurance? NO	Direction Of Travel NOT ON ROADWAY	<input type="checkbox"/> Pre CrashTire Mark	Total HazMat Types 0
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE
	Traffic Way TWO-WAY, NOT DIVIDED		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 03	VEHICLE 03	Vehicle			
		License Plate Number ADY1141	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number JTLKT324450181049	Make TOYOTA	Year 2005	Model SCION
		Color PLE - PURPLE	Body Style UT - SPORT UTILITY VEHICLE	Bus Use NOT A BUS	
		Initial Contact Point 6--REAR	Vehicle Damage		
		Extent Of Damage MINOR DAMAGE	6--REAR		
		Towed Due To Damage NOT TOWED	Vehicle Removed By		
		What Driver Was Doing LEGALLY PARKED	Vehicle Factors		
		Driver Prior Action Other	NOT APPLICABLE		
		Driver Actions NO CONTRIBUTING ACTION			

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03

03

Owner Name
GABRIEL ACEVEDO ORTIZ

Owner Address
**S7559 USH 12 #C12
NORTH FREEDOM, WI 53951 , US**

Sequence Of Events

01

Event
MOTOR VEH IN TRANSPORT

02

Event

03

Event

04

Event