19-12397

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

							` '	
Document Number Override	Primary Crash Do	Primary Crash Document # Agency 19-12:				ing Officer/Deputy  / A. MEEKER		
Crash Date 10/05/2019	//05/2019         06:08 PM         10/05/2019         06:20 PI           ite Notified         Time Notified         Total Units         Total Injur			Time Arrived 06:20 PM				
Date Notified			Total Injured					
10/05/2019	06:10 PM		02 		00	00	Reporting	
	lit and Run	Lane Closur		Work Zone		or Towed	Threshold	
Government Property	Active Sch		School Bus <b>NO</b>	Related	Tags			
Reportable	Crash Type PRIVATE PRO	PERTY/PARKIN	G LOT		Amende	ed	Secondary Crash	
Description Diagram						Reconstruction		
	ARKING STALL. UN	unit unit unit unit unit unit unit unit	added ar	HIS STALL, LOOKE	s report.		ND MADE CONTACT WITH	
Location								
PARKING LOT STH136 EB LOT				Latitude <b>43.4738446</b>	06	Longitu -89.77	ude 1 <b>0097828</b>	
IN THE VILLAGE OF WEST IN SAUK COUNTY	BARABOO			X Coordinate <b>275951.875</b>		Y Coor <b>48171</b>		
				Structure Typ	е			

# **6TL09B7DBP** 19-12397

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#### **Crash Scene**

]	First	Harmful Event		First Harmful Event Location							
	MO	TOR VEH IN TRANSPO	ORT			OFF ROADWAY, LOCATION UNKNOWN					
	Manı	ner of Collision	Light Condition								
	04	REAR TO REAR				DAYLIGHT					
	Road	Road Surface Condition(s)									
	WE	Г									
	Envi	onment Factor(s)									
	МОИ	NE .				NONE					
	Wea	ther Condition(s)									
	CLC	OUDY, RAIN									
	Anim	al Type					o Trafficwa <b>AFFICWA</b>	y Y - PARKIN	G LOT		
	Cras	h Classification - Location				Crash Clas	ssification -	Jurisdiction			
		VATE PROPERTY					PROPE	RTY			
	Triba	ll Land				Access Co				Special Study	
	Withi	n Interchange Area	Junction Location		Intersection	n Type					
	NO		NON-JUNCTION		NOT AN	INTERSE	CTION				
į	Unit	Summary =			_						
		Status		Vehicle Ope	erating As C	lassification		Unit Type			
	IN T	RANSIT	D CLASS	D CLASS			AUTOMOI	ILE			
01		cle Type					Operating As Endorsements				
0		SENGER CAR	TT : /B # B				<del></del>				
		Occs	Train/Bus # Recorded	Total # Citat	Total # Citations Issued		Total Traile			Mat Types	
	Insurance? Direction Of Travel				<b>0</b> Speed Lir		imit Total Lane		96		
_	YES		NOT ON ROADWAY	Pre CrashTire Mark		!	N/A	•		Total Lailes	
UNIT	Most Harmful Event: Collision With				Special Function		14/7	Emergency Motor Veh		nicle Use	
<b>D</b>		TOR VEH IN TRANSPO		NO SPEC		TION		NOT APPLICABLE			
	Traff	ic Way		Traffic Cont	NO CONTROL			Traffic Control Inoperative/Missing			
		KING LOT OR PRIVAT	TE PROPERTY					NO			
		ace Type	• •	Road Curva				Road Grade			
		CKTOP (BITUMINOUS  k Bus or HazMat	<del>)</del>	STRAIGH	RAIGHT						
	NO	K Bus of Hazivial									
	,	Vehicle									
		License Plate Number		Plate Type			St	Country of Is	suance		
		BURDZ		AUT - AUTOMOBIL		.E	WI	UNITED ST	TATES		
5	01	Vehicle Identification Num		Make			Year	Model			
٥	0	3C3HY55E78T125707		Body Style			2008	PT CRUISER			
		Color RED - RED		CV - CON	IVERTIBL	E		Bus Use NOT A BUS			
	LE	Initial Contact Point		Vehicle Da	mage						
LNO	IIC	6REAR		- BEAR							
<b>-</b>	VEHICL	Extent Of Damage MINOR DAMAGE			6REAR						
		Towed Due To Damage  NOT TOWED  Vehicle Removed By  OWNER									
		What Driver Was Doing		Vehicle Fa	ctors						
		BACKING									
		Driver Prior Action Other		NOT APP	PLICABLE						

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LIND	VEHICLE	Driver Actions LOOKED BUT DID	NOT SEE									
10	6	Owner Name ROBERT J VETHE			Owner Address 2045 SUNSET DR REEDSBURG, WI 53959 , US							
	9	Sequence Of Ev	ents									
	5	Event MOTOR VEH IN TR										
	05	Event										
	03	Event										
	9	Event										
		Policy Holder										
LNO		Insurance Company			Individual							
<b>-</b>		WEA-PROPERTY-	&-CASUALTY-IN	s-co	ROBERT VETHE							
		Individual										
		Driver			Citations Issued	Sex						
	_	ROBERT J VETHE			0	MALE						
_	INDIVIDUAL	(608) 524-6252			Date of Birth	Race WHITE						
	≥	Address			Driver License Number							
	Z	2045 SUNSET DR REEDSBURG, WI 5	53959 , US		STATE: WISCONSIN COUNTRY: UNITED STATES							
	Sat	fety Equipment	On Duty Crash		Safety Equipment							
	Jai	Seat Position			SHOULDED & LAB BELT							
		1FRONT SEAT-LI	EET SIDE (DDIVI	ED/MOTOPCY	SHOULDER & LAP BELT							
		Helmet Use	LI I GIDE (DIXIVI		Helmet Compliance							
		Eye Protection			Tint Compliance							
		_										
5	00	Iniury	Injury Severity NO APPARENT	IN IIIDV	Airbag NON DEPLOYED							
		Ejected	Ejection P	ath	NON DEPLOTED	Trapped/Extricated						
		NOT EJECTED		ECTED/NOT APPL	ICABLE	NOT TRAPPED						
		Medical Transport	1		EMS Agency Identifier	EMS Run #						
		NOT TRANSPORTED										
		Hospital			Date of Death Time of Death							
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)											
		Distracted By Action NOT DISTRACTED	)									
		Non Motorist	Striking Unit #	Location								
		Prior Action		•								

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UNIT	INDIVIDUAL	Action										
5	INDIN											
		Action Other									To/From School	
		Sus	pected Alcohol U	lse		cted Drug Use						
	-	Drug & Alcohol No		I.A	NO				I AL			
		Alcohol Test Given Alcohol Test T TEST NOT GIVEN			ype				Alcohol Test Results			
				Drug Test Type	Э		Drug T	Test Results	<u>I</u>			
6	001	Drug Type		_								
		Individual Condition										
		APPEARED NORMAL										
l	Uni	└──t Summary <b>───</b>										
	Unit	Status				perating As Classi	fication		Unit Type			
		IN TRANSIT Vehicle Type				D CLASS				AUTOMOBILE Operating As Endorsements		
05	PASSENGER VAN							operating /				
	Tota	al Occs Train/Bus # Recorded			Total # Citations Issued Total Trail  0 0			ers	Total Hazl	Mat Types		
	Insurance? Direction Of Travel		_	Pre CrashTire Speed Lim			nit	Total Lane	es			
LINO	YES		NOT ON RO	ADWAY	Mark N/A Special Function		Emergency	Motor Vobi				
5		t Harmful Event: Collision W TOR VEH IN TRANSPO			NO SPECIAL FUNCTION			NOT APP		cie Ose		
		fic Way RKING LOT OR PRIVAT	E DDODEDTY		Traffic Control NO CONTROL			Traffic Cont	rol Inoperati	ive/Missing		
		ace Type	EPROPERIT		Road Curvature			NO Road Grade	)			
		ACKTOP (BITUMINOUS)	)		STRAIGHT				LEVEL			
	Truc <b>NO</b>	k Bus or HazMat										
		Vehicle										
		License Plate Number 705VAN			Plate Typ	e UTOMOBILE		St MN	Country of Is			
		Vehicle Identification Numb	per		Make	OTOMOBILE		Year	UNITED STATES  Model			
05	05	2A4RR5D14AR200572	!		CHRYS			2010				
		Color SIL - SILVER (ALUMINUM)			Body Styl				Bus Use NOT A BUS			
	쁘	Initial Contact Point			Vehicle D	Damage						
LIND	VEHICLE	7LEFT REAR CORNER  Extent Of Damage MINOR DAMAGE			7LEFT REAR CORNER							
		Towed Due To Damage NOT TOWED			OPERA							
		What Driver Was Doing BACKING			Vehicle F	actors						
		Driver Prior Action Other			NOT APPLICABLE							

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Crash Date 10/05/2019

Crash Time 06:08 PM

		Driver Actions											
	Щ	NO CONTRIBUTIN	IG ACTION										
LNO	VEHICL												
z	Ĭ												
_	/E												
		Owner Name			Owner Address								
		RAJ M RAMNARA	CE		909 BERKLEY BLVD								
07	02				BARABOO, WI 53913								
_	)				, , , , , , , , , , , , , , , , , , , ,	,							
	,	Sequence Of Ev	/ents										
	1	Event											
	01	MOTOR VEH IN TE	RANSPORT										
	2	Event											
	02												
	•	Event											
	03												
		Event											
	04	LVOIR											
╘		Policy Holder											
LIND		Insurance Company			Individual								
ر ر		STATE-FARM-GENERAL-INS-CO			RAJ RAMNARACE								
	Ī	Driver			Citations Issued	I	Sex						
		RYAN K RAMNAR	ACE		0		MALE						
	AL	(608) 498-0612			Date of Birth		Race						
	J				Date of Birtin		WHITE						
	INDIVIDUAL	Address			Driver License Number								
5		Address 909 BERKLEY BLVD BARABOO, WI 53913 , US			Divor Election Named								
	Z				STATE: WISCONSIN COUNTRY: UNITED STATES								
	Saf	fety Equipment	On Duty Crash		Safety Equipment								
	Gai												
		Seat Position			SHOULDER & LAP BELT								
		1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY											
		Helmet Use			Helmet Compliance								
		Eye Protection			Tint Compliance								
05	005		Injury Severity		Airbag								
0	8	Injury	NO APPARENT	INJURY	NON DEPLOYED								
		Ejected	Ejection P		·I		Trapped/Extricated						
		NOT EJECTED	NOT EJE	ECTED/NOT APP	LICABLE		NOT TRAPPED						
		Medical Transport			EMS Agency Identifier		EMS Run #						
		NOT TRANSPORT	ED		,								
		Hospital			Date of Death		Time of Death						
			Distracted By Source	<u> </u>									
	Distracted By NOT APPLICABLE (NOT DISTRACTED)												
		Distracted By Action											
		NOT DISTRACTED	)										
		Non Motorist	Striking Unit #	Location									
		Prior Action											

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		Action					
		Action					
	A						
<b>—</b>	Ú						
UNIT	₽						
5	2						
	INDIVIDUAL						
	=						
		Action Other					To/From School
		Suspected Alcohol U	se	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					
~	2	Drug Type	•				
02	002						
		Individual Condition					
		APPEARED NORMAL					