

6TLOBMQKWD

Document Number Override		Primary Crash Document #	Agency Crash Number <b>19-12335</b>	Investigating Officer/Deputy <b>SERGEANT E. MILLER</b>	
Crash Date <b>10/04/2019</b>		Crash Time <b>01:28 PM</b>	Date Arrived <b>10/04/2019</b>	Time Arrived <b>01:52 PM</b>	
Date Notified <b>10/04/2019</b>		Time Notified <b>01:35 PM</b>	Total Units <b>02</b>	Total Injured <b>00</b>	Total Killed <b>00</b>
<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 <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable	Crash Type <b>DT4000 (STANDARD CRASH)</b>		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

**Description**

<p>Diagram</p> <p>NOT TO SCALE</p>	Reconstruction By
	Photos By
	Additional Information <b>NONE</b>

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

UNIT 1 PARKED LEGALLY ON SIDE OF ROAD ACROSS FROM DRIVEWAY WHERE UNIT 2 BACKED OUT OF NOT SEEING UNIT 1 STRIKING UNIT 1 ON DRIVERS SIDE REAR DOOR WITH UNIT 2'S RIGHT REAR BUMPER CAUSING DAMAGE TO DRIVERS SIDE REAR DOOR OF UNIT 1

**Location**

<p><b>INTERSECTION ON S12985 SHIFFLET RD AT PRIVATE PROPERTY (FIRE S12985)</b></p> <p><b>IN THE TOWN OF SPRING GREEN IN SAUK COUNTY</b></p>	Latitude	Longitude
	X Coordinate	Y Coordinate
	Structure Type <b>FIRE</b>	

**Crash Scene**

First Harmful Event <b>PARKED MOTOR VEHICLE</b>		First Harmful Event Location <b>IN PARKING LANE OR ZONE</b>	
Manner of Collision <b>07--REAR TO SIDE</b>		Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>DRY</b>		Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>			
Weather Condition(s) <b>CLOUDY</b>			
Animal Type		Relation To Trafficway <b>NON TRAFFICWAY - OTHER</b>	
Crash Classification - Location <b>PRIVATE PROPERTY</b>		Crash Classification - Jurisdiction <b>PRIVATE PROPERTY</b>	
Tribal Land		Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>	

**Unit Summary**

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

**Vehicle**

<b>UNIT</b>	<b>VEHICLE</b>	License Plate Number <b>94963</b>				Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>1G1JD5SH6H4130144</b>				Make <b>CHEVROLET</b>	Year <b>2017</b>	Model <b>SONIC</b>
		Color <b>SIL - SILVER (ALUMINUM)</b>				Body Style <b>4D - 4DR</b>		Bus Use <b>NOT A BUS</b>
		Initial Contact Point <b>8--LEFT SIDE REAR</b>				Vehicle Damage		
		Extent Of Damage <b>FUNCTIONAL DAMAGE</b>				<b>8--LEFT SIDE REAR</b>		
		Towed Due To Damage <b>NOT TOWED</b>				Vehicle Removed By <b>OWNER</b>		
		What Driver Was Doing <b>LEGALLY PARKED</b>				Vehicle Factors		
		Driver Prior Action Other				<b>NOT APPLICABLE</b>		

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19-12335

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

UNIT	VEHICLE	Driver Actions <b>NO CONTRIBUTING ACTION</b>	
		Owner Name <b>SAUK COUNTY HEALTH DEPARTMENT</b>	Owner Address <b>505 BROADWAY ST #372 BARABOO, WI 53913 , US</b>
01	01		
<b>Sequence Of Events</b>			
UNIT	01	Event <b>PARKED MOTOR VEHICLE</b>	
	02	Event	
	03	Event	
	04	Event	
<b>Policy Holder</b>			
		Insurance Company <b>WISCONSIN-COUNTY-MUTUAL-INS-CORP</b>	Government <b>SAUK COUNTY HEALTH DEPARTMENT</b>

**Unit Summary**

UNIT	02	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>TRUCK</b>
		Vehicle Type <b>CARGO VAN (10,000 LBS OR LESS)</b>	Operating As Endorsements	
		Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>
		Insurance? <b>YES</b>	Direction Of Travel <b>SOUTHBOUND</b>	Total Trailers <b>0</b>
			<input type="checkbox"/> Pre Crash Tire Mark	Total HazMat Types <b>0</b>
		Speed Limit <b>N/A</b>	Total Lanes <b>2</b>	
		Most Harmful Event: Collision With <b>PARKED MOTOR VEHICLE</b>	Special Function <b>NO SPECIAL FUNCTION</b>	Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>
		Traffic Way <b>PARKING LOT OR PRIVATE PROPERTY</b>	Traffic Control <b>NO CONTROL</b>	Traffic Control Inoperative/Missing <b>NO</b>
		Surface Type <b>BLACKTOP (BITUMINOUS)</b>	Road Curvature <b>STRAIGHT</b>	Road Grade <b>LEVEL</b>
		Truck Bus or HazMat <b>NO</b>		

UNIT	VEHICLE	<b>Vehicle</b>			
		License Plate Number <b>836TTD</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
02	02	Vehicle Identification Number <b>2B6HB11XCWK145215</b>	Make <b>DODGE</b>	Year <b>1998</b>	Model <b>RAM VAN</b>
		Color <b>GRN - GREEN</b>	Body Style <b>VN - VAN</b>	Bus Use <b>NOT A BUS</b>	
		Initial Contact Point <b>6--REAR</b>	Vehicle Damage		
		Extent Of Damage <b>NO DAMAGE</b>	<b>NO DAMAGE</b>		
		Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OWNER</b>		
		What Driver Was Doing <b>BACKING</b>	Vehicle Factors		
		Driver Prior Action Other	<b>NOT APPLICABLE</b>		

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT	VEHICLE	Driver Actions <b>LOOKED BUT DID NOT SEE</b>			
		Owner Name <b>DAVID F HARDYNS (608) 588-0200</b>	Owner Address <b>257 WEST MADISON ST SPRING GREEN, WI 53588 , US</b>		
<b>Sequence Of Events</b>					
UNIT	01	Event <b>MOTOR VEH IN TRANSPORT</b>			
	02	Event <b>PARKED MOTOR VEHICLE</b>			
	03	Event			
	04	Event			
<b>Policy Holder</b>					
UNIT	Insurance Company <b>TRUMBULL-INS-CO</b>		Individual <b>DAVID HARDYNS</b>		
	<b>Individual</b>				
UNIT	INDIVIDUAL	Driver <b>DAVID F HARDYNS (608) 588-0200</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>	
			Date of Birth	Race <b>WHITE</b>	
	Address <b>257 WEST MADISON ST SPRING GREEN, WI 53588 , US</b>		Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
<b>Safety Equipment</b>					
UNIT	001	On Duty Crash	Safety Equipment		
		Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>	<b>SHOULDER &amp; LAP BELT</b>		
		Helmet Use	Helmet Compliance		
		Eye Protection	Tint Compliance		
		<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>	
		Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>	
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #		
Hospital		Date of Death	Time of Death		
<b>Distracted By</b>					
Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>					
Distracted By Action <b>NOT DISTRACTED</b>					
<b>Non Motorist</b>					
Striking Unit #		Location			
Prior Action					

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

<b>UNIT</b>	<b>INDIVIDUAL</b>	Action				
		Action Other		To/From School		
	<b>02</b>	<b>001</b>	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
			Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results	
			Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results	
			Drug Type			
			Individual Condition <b>APPEARED NORMAL</b>			