19-13273

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Chain Date Contact Time Contact Time Contact Time Andred Contact Time Andred Contact Time Andred Contact Time Notified Time Noti	Document Number Override	19-13273 DEPUT Crash Time Date Arrived Time Arrived		DEPUTY C.	estigating Officer/Deputy PUTY C. FRANK			
10/25/2019 06 00 00 On Emergency Hit and Run Lane Closure Work Zone Trailer or Towed Reporting Tracehold Open Emergency Open Type Crash Type Sectoral Bus Related Tage Open Emergency Crash Type Crash Type Sectoral Bus Related Tage Prover Crash Type Crash Type Secondary Secondary Open Emergency Crash Type Crash Type Secondary Prover Crash Type Crash Type Secondary Open Emergency Crash Type Secondary Secondary Open Emergency Crash Type Crash Type Secondary Open Emergency Crash Type Secondary Secondary Open Emergency Crash Type Prove Emergency Prove Emergency Description South Ave Not to scale Prove Emergency Is a sworn law enforcement officer, agree that I have not added any CJIS data in this report. On the Reserve Envire Unit 1 AND UNIT 2 WAS NB IN Development Ave Emergency Landtoo Secondary Type Landtoo PRIVATE PROPERTY Emergency	Crash Date 10/25/2019			Time Arrived 09:26 AM				
On Emergency Hit and Run Lane Closure Work Zone Trailer or Towed Reporting Treeshold Government Property Active School Zone Sofbool Bus Relisted NO Trage Trage Reportable Crash Type PRIVATE PROPERTY/PARKING LOT Amended Secondary Crash Description						-		
Construction C			Lane Closu		Vork Zone			
			hool Zone		lated	Tags		- -
	✓ Reportable	Crash Type PRIVATE PR	OPERTY/PARKI	NG LOT		Amende	ed	
In THE TOWN OF DELLONA	-							
Not to scale Image: Interpret to the second secon				Ŀ			Photos By 9198 Additional Info	
I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report. ON THE ABOVE DATE AND TIME UNIT 1 AND UNIT 2 WERE INVOLVED IN A MINOR BACKING ACCIDENT ON PRIVATE PROPERTY. UNIT 2 WAS NB IN DRIVEWAY. UNIT 1 WAS BACKING OUT OF PARKING SPOT. UNIT 1 AND UNIT 2 MADE CONTACT. UNIT 1 REAR STRUCK UNIT 2 FRONT. Location PRIVATE PROPERTY E9392 SOUTH AVE (FIRE E9392) IN THE TOWN OF DELLONA IN SAUK COUNTY			South Ave					
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PRIVATE PROPERTY Latitude Longitude E9392 SOUTH AVE (FIRE E9392) 43.576727373 -89.852068372 IN THE TOWN OF DELLONA IN SAUK COUNTY Y Coordinate 4828815 Structure Type Structure Type	ON THE ABOVE DATE AND TIME	UNIT 1 AND UN	NT 2 WERE INVOL	VED IN A MINC	R BACKING ACCIE	DENT ON PRIVA		
PRIVATE PROPERTY Latitude Longitude E9392 SOUTH AVE (FIRE E9392) 43.576727373 -89.852068372 IN THE TOWN OF DELLONA IN SAUK COUNTY Y Coordinate 4828815 Structure Type Structure Type	ocation							
(FIRE E9392) X Coordinate Y Coordinate IN THE TOWN OF DELLONA 269713.78125 4828815 IN SAUK COUNTY Structure Type	PRIVATE PROPERTY							
IN SAUK COUNTY Structure Type	(FIRE E9392)				X Coordinate	-	Y Coo	rdinate
					Structure Type			

19-13273

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Crash Scene

Ī	First	Harmful Event		First Harmful Event Location IN PARKING LANE OR ZONE							
	MO	TOR VEH IN TRANSPO	RT								
	Manı	ner of Collision			Light Condition						
	02	FRONT TO REAR		DAYLIGHT							
	Road	d Surface Condition(s)		Roadway I	Factor(s)						
	DRY	(
	Envir	ronment Factor(s)									
	NOM	NE		NONE							
	Wea	ther Condition(s)									
	CLE	AR									
	Anim	nal Type				Relation T	o Trafficwa	ау			
								AY - OTHER			
		h Classification - Location				Crash Clas		- Jurisdiction			
		I Land				Access Co		KTT		Special Study	
	11100					NO CON				Special Study	
Ì	Withi	in Interchange Area	Junction Location		Intersectio	n Type				1	
	NO		NON-JUNCTION		NOT AN	INTERSE	CTION				
l		t Summary									
		Status		Vehicle Ope	erating As C	lassification		Unit Type			
				D CLASS	D CLASS			AUTOMOBILE			
2			-			Operating As Endorsements					
<u> </u>	•		Train/Bus # Recorded	Tatal # Citat	Total # Citations Issued		Total Tra	Total Trailers Tot		Total HazMat Types	
	Total Occs Train/Bus # Recorded		0			0		10tai 11a2i	mat Types		
		ance?	Direction Of Travel		Pre CrashTire				Total Lane	es	
⊢	YES NORTHBOUND			Mark		05		1			
UNIT		Harmful Event: Collision V			Special Function NO SPECIAL FUNCTION				Motor Vehi	cle Use	
_		TOR VEH IN TRANSPO	ORT			TION		NOT APP	-	ive/Missing	
		ic Way R KING LOT OR PRIVA T		Traffic Cont	NO CONTROL			Traffic Cont	roi moperat	ive/iviissing	
		ace Type		Road Curva				Road Grade			
		G, GRAVEL, OR STOP	IE		STRAIGHT			LEVEL			
		k Bus or HazMat									
	NO										
	1	Vehicle						_			
		License Plate Number			Plate Type		St		Country of Issuance		
		ACM7320 Vehicle Identification Num	har	AUT - AU Make	ITOMOBIL	.E	WI Year	UNITED STATES			
2	01	1FMCU9G93DUA7080		FORD			2013	Model ESCAPE SE			
		Color		Body Style				Bus Use			
		GRY - GRAY			UT - SPORT UTILITY VEHICLE NOT A BUS						
н	LE	Initial Contact Point		Vehicle Da	mage						
UNIT	6REAR Extent Of Damage MINOR DAMAGE			6REAR	6REAR						
	VEI	MINOR DAMAGE									
	-	Towed Due To Damage NOT TOWED		Vehicle Re	moved By						
		What Driver Was Doing			ctors						
		BACKING									
		Driver Prior Action Other		NOT APF	PLICABLE	.E					

19-13273

UNIT	VEHICLE	Driver Actions NO CONTRIBUTING A	CTION										
<u> </u>	٧E												
01	01	Owner Name MARILYN M BOHN (608) 393-7763			Owner Address E9392 SOUTH AVE REEDSBURG, WI 53959 , US								
		Sequence Of Even	ts										
	01	Event MOTOR VEH IN TRANSPORT											
	02	Event											
	03	Event											
	04	Event											
⊢	l	Policy Holder											
UNIT		Insurance Company AMERICAN-FAMILY-II	NS-CO		Individual MARILYN BOHN								
	l	ndividual											
		Driver MARILYN M BOHN			Citations Issued 0	Sex FEMALE							
_	DUAL	(608) 393-7763			Date of Birth	Race WHITE							
UNIT	INDIVIDUAL	Address E9392 SOUTH AVE REEDSBURG, WI 5395	59 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES								
	Sat	On I	Duty Crash		Safety Equipment								
	Jai	Seat Position			SHOULDER & LAP BELT								
		1FRONT SEAT-LEFT	SIDE (DRIV	ER/MOTORCY									
		Helmet Use			Helmet Compliance								
		Eye Protection			Tint Compliance								
2	001	Injury NO	y Severity	INJURY	Airbag NON DEPLOYED								
		Ejected NOT EJECTED	Ejection I	Path ECTED/NOT APPI		Trapped/Extricated NOT TRAPPED							
		Medical Transport		20122/11017.111	EMS Agency Identifier	EMS Run #							
		NOT TRANSPORTED Hospital			Date of Death	Time of Death							
		-											
	Distracted By Source Distracted By NOT APPLICABLE (NOT DISTRACTED)												
	Distracted By Action NOT DISTRACTED												
		Non Motorist	king Unit #	Location									
		Prior Action		•									

19-13273

		Action									
	AL										
╘	INDIVIDUAL										
UNIT	N										
	ND										
		Action Other							To/From School		
	L	Drug & Alcohol NO	bected Alcohol U	se	Suspected Drug Use NO						
	Alcohol Test Given Alcohol Test Type Alcohol Test Results										
		Drug Test Given		Drug Test Type		Drug Test Resul	ts				
		TEST NOT GIVEN		0 71							
6	001	Drug Type		-							
-	0										
		Individual Condition									
		APPEARED NORMAL									
	Uni	t Summary									
		Status			hicle Operating As Class	ification	Unit Type				
		RANSIT cle Type		D	D CLASS			AUTOMOBILE Operating As Endorsements			
02		ORT) UTILITY VEHICLE									
		I Occs	Train/Bus # Re		tal # Citations Issued	ilers	Total HazM	lat Types			
	1	rance?	Direction Of Tra	0		mit	0 Total Lane:	2			
⊢	YES				Pre CrashTire Mark		05 1		5		
UNIT		Harmful Event: Collision Wi			pecial Function O SPECIAL FUNCTIO	Emergency NOT APP	Motor Vehic	le Use			
		TOR VEH IN TRANSPOR	KI (affic Control		-	rol Inoperativ	/e/Missing		
	PAR	KING LOT OR PRIVATI	E PROPERTY		NO CONTROL			NO			
			F		Road Curvature			Road Grade			
		k Bus or HazMat		3	TRAIGHT						
	NO										
	Y	Vehicle		-							
		License Plate Number 688GDV			late Type	St WI	Country of Is				
2	~	Vehicle Identification Numb	ber		lake	Year	UNITED STATES Model				
02	02	JF2SJADC4FH596130			UBARU	2015	FORESTER 2				
		Color BLK - BLACK			ody Style IT - SPORT UTILITY \	/EHICLE	Bus Use NOT A BUS				
	щ	Initial Contact Point		-	Vehicle Damage						
UNIT		12FRONT									
Б	VEHICL	Extent Of Damage MINOR DAMAGE		1	12FRONT						
		Towed Due To Damage		V	ehicle Removed By						
		NOT TOWED What Driver Was Doing			ahicle Factors						
		GOING STRAIGHT			Vehicle Factors						
		Driver Prior Action Other		N	IOT APPLICABLE						

19-13273

_	ILE	Driver Actions NO CONTRIBUTIN	IG ACT	ION									
UNIT	VEHICL												
02	02	Owner Name ANGELA K VODAI	ĸ			Owner Address 817 ISLAND CRT BARABOO, WI 53913, US							
		Sequence Of Ev	/ents										
	01	Event MOTOR VEH IN TRANSPORT											
	02	Event											
	03	Event											
	04	Event											
E	F	Policy Holder											
UNIT		Insurance Company PROGRESSIVE-AI	DVANC	ED-INSUR	ANCE-CO	Individual ANGELA VODAK							
	I	ndividual											
		Driver JAMES WILLIAM PRITZKOW				Citations Issued	Sex						
	AL	(608) 697-4315	~~~~~			0 Date of Birth	MALE Race						
ы	DU						WHITE						
UNIT	INDIVIDUAL	Address 817 ISLAND CT BARABOO, WI 539	913 ,U	s		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES							
	Saf	ety Equipment	On Duty	Crash		Safety Equipment							
	Gui	Seat Position				SHOULDER & LAP BELT							
		1FRONT SEAT-L	EFT SI	DE (DRIVE	R/MOTORCY								
		Helmet Use				Helmet Compliance							
		Eye Protection				Tint Compliance							
02	002	Injury	Injury So NO AP	PARENT I		Airbag NON DEPLOYED							
		Ejected NOT EJECTED		Ejection Pa	th CTED/NOT APPL		Trapped/Extricated NOT TRAPPED						
		Medical Transport		NOTEDE		EMS Agency Identifier	EMS Run #						
		NOT TRANSPORT	ED										
		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	_										

19-13273

UNIT	INDIVIDUAL	Action						
	Ľ	Action Other Drug & Alcohol	Suspected Alcohol Us	5e	Suspected Drug Use			To/From School
		Alcohol Test Given TEST NOT GIVEN Drug Test Given		Alcohol Test Type Drug Test Type		Drug Test Results	Alcohol Test Results	
02	002	TEST NOT GIVEN						
		Individual Condition	MAL					