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20-00054

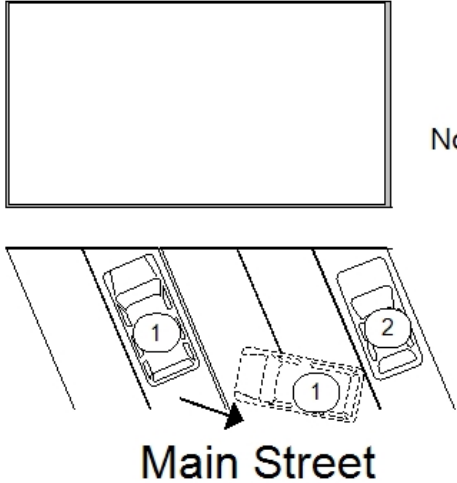
WISCONSIN MOTOR VEHICLE CRASH REPORT

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 20-00054	Investigating Officer/Deputy DEPUTY H. VOLZ	
Crash Date 01/02/2020		Crash Time 11:00 AM	Date Arrived 01/02/2020	Time Arrived 11:22 AM	
Date Notified 01/02/2020		Time Notified 11:16 AM	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 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
	Additional Information DRIVER BEHAVIOR AND CONDITION

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

UNIT 2 WAS LEGALLY PARKED. UNIT 1 WAS PARKED NEXT TO UNIT 2. UNIT 1 BACKED OUT OF THE PARKING STALL AND STRUCK UNIT 2. UNIT 1 THEN LEFT THE SCENE. UNIT 1 DRIVER WAS LOCATED AND DID NOT KNOW HE STRUCK THE VEHICLE. HE ADVISED HE HAS MEDICAL PROBLEMS AND SHOULD NOT BE DRIVING. A DRIVERS CONDITION FORM WILL BE FILED.

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Location

ON CTHB WB 151 FT W OF ALMA AVE IN THE VILLAGE OF PLAIN IN SAUK COUNTY	Latitude 43.278841037	Longitude -90.046340043
	X Coordinate 252816.453125	Y Coordinate 4796287.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 01 - ANGLE		Light Condition DAYLIGHT	
Road Surface Condition(s) DRY		Roadway Factor(s) NONE	
Environment Factor(s) NONE			
Weather Condition(s) CLEAR			
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

UNIT	Unit Status HIT AND RUN		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel SOUTHBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 25	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					

UNIT	VEHICLE	Vehicle			
		License Plate Number 833AKZ	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number KL7CJLSB7GB686513	Make CHEVROLET	Year 2016	Model TRAX
		Color WHI - WHITE	Body Style 4D - 4DR		Bus Use
		Initial Contact Point 05 - RIGHT REAR CORNER	Vehicle Damage 05 - RIGHT REAR CORNER		
Extent Of Damage MINOR DAMAGE					

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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR		
	What Driver Was Doing BACKING		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions UNSAFE BACKING, OTHER CONTRIBUTING ACTION				
01	Owner Name GERALD W LIEGEL (608) 546-4403		Owner Address 950 CEDAR ST PO BOX 106 PLAIN, WI 53577 , US		
	Sequence Of Events				
01	01	Event MOTOR VEH IN TRANSPORT			
	02	Event PARKED MOTOR VEHICLE			
	03	Event			
	04	Event			
UNIT	Policy Holder				
	Insurance Company QUARTZ		Individual GERALD LIEGEL		
UNIT INDIVIDUAL	Individual				
	Driver GERALD W LIEGEL (608) 546-4403		Citations Issued 0	Sex MALE	
	Address 950 CEDAR ST PO BOX 106 PLAIN, WI 53577 , US		Date of Birth	Race WHITE	
			Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
01	Safety Equipment		On Duty Crash		
			Safety Equipment		
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	RESTRAINT USE UNKNOWN		
	Helmet Use		Helmet Compliance		
	Eye Protection		Tint Compliance		
	Injury		Injury Severity NO APPARENT INJURY	Airbag NOT APPLICABLE	
	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					

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
		Action Other				To/From School	
		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					
01	001	Individual Condition					
		NOT OBSERVED					

Unit Summary

UNIT	02	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	0	0		
		Insurance?	Direction Of Travel	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit	Total Lanes		
		YES	NORTHBOUND		25	2		
Most Harmful Event: Collision With			Special Function		Emergency Motor Vehicle Use			
MOTOR VEH IN TRANSPORT			NO SPECIAL FUNCTION		NOT APPLICABLE			
Traffic Way			Traffic Control		Traffic Control Inoperative/Missing			
TWO-WAY, NOT DIVIDED			NO CONTROL		NO			
Surface Type			Road Curvature		Road Grade			
BLACKTOP (BITUMINOUS)			STRAIGHT		LEVEL			
Truck Bus or HazMat								
NO								

UNIT	VEHICLE	Vehicle					
		License Plate Number		Plate Type	St	Country of Issuance	
		810YEE		AUT - AUTOMOBILE	WI	UNITED STATES	
		Vehicle Identification Number		Make	Year	Model	
		JT2BK12U910037437		TOYOTA	2001	PRIUS	
		Color		Body Style		Bus Use	
SIL - SILVER (ALUMINUM)		4D - 4DR					
Initial Contact Point			Vehicle Damage				
08 - LEFT SIDE REAR							
Extent Of Damage			08 - LEFT SIDE REAR, 09 - LEFT SIDE MIDDLE				
FUNCTIONAL DAMAGE							
Towed Due To Damage			Vehicle Removed By				
NOT TOWED			OPERATOR				

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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	
		Owner Name MICKI L CRUSE (608) 697-3100	Owner Address 513 WASHINGTON AVE SAUK CITY, WI 53583 , US
Sequence Of Events			
UNIT	VEHICLE	01	Event PARKED MOTOR VEHICLE
		02	Event
		03	Event
		04	Event
Policy Holder			
UNIT	VEHICLE	Insurance Company AUTO-OWNERS-INS-CO	Individual MICKI CRUSE