

6TL0D0GSFL
20-05508


WISCONSIN MOTOR VEHICLE CRASH REPORT

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

6TL0D0GSFL

Document Number Override		Primary Crash Document #	Agency Crash Number 20-05508	Investigating Officer/Deputy DEPUTY S. FINNEGAN	
Crash Date 06/10/2020		Crash Time 10:13 AM	Date Arrived 06/10/2020	Time Arrived 10:26 AM	
Date Notified 06/10/2020		Time Notified 10:15 AM	Total Units 02	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 PRIVATE PROPERTY/PARKING LOT		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram  <p style="text-align: center;">NOT DRAWN TO SCALE</p>	Reconstruction By
	Photos By
	Additional Information NONE

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

UNIT 1 AND 2 WERE PARKED ACROSS FROM EACH OTHER AND WERE GOING TO BACK OUT TO LEAVE. UNIT 2 BACKED OUT AND THEN UNIT 1 BACKED OUT NOT REALIZING UNIT 2 WAS BEHIND HIM AND HE BACKED INTO THE PASSENGER SIDE FRONT DOOR. UNIT 2 DRIVER STATED HE EVEN TRIED TO WARN UNIT 1 DRIVER BY BEEPING HIS HORN BUT UNIT 1 DRIVER DIDN'T HEAR IT.

Location

PARKING LOT STH136 EB LOT 615 (HOUSE/BUILDING 615) IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY	Latitude 43.474021171	Longitude -89.770613956
	X Coordinate 275910.78125	Y Coordinate 4817185.5
	Structure Type HOUSE/BUILDING	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location IN PARKING LANE OR ZONE	
Manner of Collision 05 - REAR TO SIDE	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLOUDY		
Animal Type	Relation To Trafficway NON TRAFFICWAY - PARKING LOT	
Crash Classification - Location PRIVATE PROPERTY	Crash Classification - Jurisdiction PRIVATE PROPERTY	
Tribal Land	Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION

Unit Summary

UNIT 01	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE		
	Vehicle Type PASSENGER CAR				Operating As Endorsements		
	Total Occs 2	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0		
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit N/A	Total Lanes 0		
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE		
	Traffic Way PARKING LOT OR PRIVATE PROPERTY		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 01 VEHICLE	Vehicle					
		License Plate Number 615WCA		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
Vehicle Identification Number 1G4HD572X8U142173		Make BUICK	Year 2008	Model NO DATA FO			
Color WHI - WHITE		Body Style 4D - 4DR		Bus Use			
Initial Contact Point 06 - REAR		Vehicle Damage 06 - REAR					
Extent Of Damage MINOR DAMAGE							

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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 FAILED TO YIELD RIGHT-OF-WAY, UNSAFE BACKING				
01	01	Owner Name ROBERT L BERES (608) 493-2300		Owner Address S7748 ALLBRITE DR MERRIMAC, WI 53561 , US	
		Sequence Of Events			
UNIT INDIVIDUAL	01	Event MOTOR VEH IN TRANSPORT			
		Event			
		Event			
		Event			
01	001	Policy Holder			
		Insurance Company 1ST-AUTO-&-CASUALTY-INS-CO		Individual ROBERT BERES	
01	001	Individual			
		Driver ROBERT L BERES (608) 493-2300		Citations Issued 0	Sex MALE
		Address S7748 ALLBRITE DR MERRIMAC, WI 53561 , US		Date of Birth	Race WHITE
		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
01	001	Safety Equipment		Safety Equipment	
		On Duty Crash		SHOULDER & LAP BELT	
		Row 01 - FRONT ROW	Seat Position 07 - LEFT		
		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					

WISCONSIN MOTOR VEHICLE CRASH REPORT

UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
		Action Other				To/From School	
01	001	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 KAY J BERES (608) 493-2300			Citations Issued 0	Sex FEMALE	
		Address S7748 ALLBRITE DR MERRIMAC, WI 53561 , US			Date of Birth	Race WHITE	
		Driver License Number			STATE: WISCONSIN COUNTRY: UNITED STATES		
		Safety Equipment		On Duty Crash	Safety Equipment SHOULDER & LAP BELT		
Row 01 - FRONT ROW		Seat Position 09 - RIGHT	Helmet Compliance				
Eye Protection		Tint Compliance					
01	002	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				

WISCONSIN MOTOR VEHICLE
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UNIT	INDIVIDUAL	Prior Action			
		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		

Unit Summary

UNIT	02	Unit Status IN TRANSIT	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 Crash Tire Mark	Speed Limit N/A	Total Lanes 0
		Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE	
		Traffic Way PARKING LOT OR PRIVATE PROPERTY		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	VEHICLE	License Plate Number AGE3022	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
			Vehicle Identification Number 5NPEB4AC4BH034982	Make HYUNDAI	Year 2011	Model SONATA
			Color BLK - BLACK	Body Style SD - SEDAN	Bus Use	
			Initial Contact Point 03 - RIGHT SIDE MIDDLE	Vehicle Damage		
			Extent Of Damage MINOR DAMAGE	03 - RIGHT SIDE MIDDLE		
			Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR		
			What Driver Was Doing GOING STRAIGHT			

WISCONSIN MOTOR VEHICLE CRASH REPORT

UNIT VEHICLE	Driver Prior Action Other		Vehicle Factors	
			NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
02	Owner Name BRYAN GIRARD FRENZ (608) 630-7799		Owner Address 804 S BLUE MOUNDS ST # 3 MOUNT HOREB, WI 53572 , US	
	Sequence Of Events			
01 02 03 04	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
	Event			
UNIT	Policy Holder			
	Insurance Company AMERICAN-FAMILY-INS-CO		Individual BRYAN FRENZ	
UNIT INDIVIDUAL	Individual			
	Driver BRYAN GIRARD FRENZ (608) 630-7799		Citations Issued 0	Sex MALE
	Address 804 S BLUE MOUNDS ST # 3 MOUNT HOREB, WI 53572 , US		Date of Birth	Race
			Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
02 003	Safety Equipment		On Duty Crash	
			Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	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	

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT	INDIVIDUAL		
	Prior Action		
	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		
	02	003	