

6TL0DBC3B8
20-12717

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 20-12717		Investigating Officer/Deputy DEPUTY C. GALLAGHER	
Crash Date 11/01/2020		Crash Time 10:15 PM		Date Arrived 11/01/2020		Time Arrived 10:45 PM	
Date Notified 11/01/2020		Time Notified 10:20 PM		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

<p>Diagram</p> <p>Parking lot at 501 Windsted St</p> <p>Not 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 WAS BACKING UP IN A PARKING LOT. UNIT 1 BACKED INTO THE BACK PASSENGER SIDE BUMPER OF UNIT 2 CAUSING DAMAGE. UNIT 2 WAS PARKED LEGALLY IN THE PARKING LOT WITH NO ONE IN THE VEHICLE.

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Location

ON E HOXIE ST 314 FT E OF S WINSTED ST/ STH23 EB IN THE VILLAGE OF SPRING GREEN IN SAUK COUNTY	Latitude	Longitude
	43.172057675	-90.062832211
	X Coordinate	Y Coordinate
	251043.5625	4784477
Structure Type		

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location IN PARKING LANE OR ZONE	
Manner of Collision 04 - REAR TO REAR	Light Condition DARK/LIGHTED	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLEAR		
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 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit	Total Lanes
	Most Harmful Event: Collision With PARKED MOTOR VEHICLE	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 VEHICLE 01	License Plate Number AJN8590	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 5NPET46C79H438181	Make HYUNDAI	Year 2009	Model SONATA GLS
	Color GRY - GRAY	Body Style 4D - 4DR		Bus Use
	Initial Contact Point 06 - REAR	Vehicle Damage		
	Extent Of Damage MINOR DAMAGE	06 - REAR		

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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 NO CONTRIBUTING ACTION		
01 01	Owner Name NICOLE M AMES (608) 604-6773	Owner Address 105 SHARON ST # 2 ARENA, WI 53503 , US	
	Sequence Of Events		
01 02 03 04	Event MOTOR VEH IN TRANSPORT		
	Event PARKED MOTOR VEHICLE		
	Event		
	Event		
UNIT	Policy Holder		
	Insurance Company PROGRESSIVE-CLASSIC-INS-CO	Individual NICOLE AMES	
UNIT INDIVIDUAL	Individual		
	Driver TEGAN MARIE RILEE KIENITZ (608) 604-6773	Citations Issued 0	Sex FEMALE
		Date of Birth [REDACTED]	Race WHITE
	Address 105 SHARON ST # 2 ARENA, WI 53503 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
01 001	Safety Equipment		On Duty Crash
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	Safety Equipment 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			

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UNIT INDIVIDUAL 01 001	Non Motorist		Striking Unit #	Location	
	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				

Unit Summary

UNIT 02	Unit Status LEGALLY PARKED		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR				Operating As Endorsements	
	Total Occs 0	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel NOT ON ROADWAY	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit	Total Lanes	
	Most Harmful Event: Collision With PARKED MOTOR VEHICLE		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 VEHICLE 02 02	Vehicle				
	License Plate Number AFC7627		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 2G1WG5EK0B1282346		Make CHEVROLET	Year 2011	Model IMP
	Color BLK - BLACK		Body Style 4D - 4DR		Bus Use
	Initial Contact Point 05 - RIGHT REAR CORNER		Vehicle Damage		
	Extent Of Damage FUNCTIONAL DAMAGE		05 - RIGHT REAR CORNER		
	Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER		

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UNIT	VEHICLE	What Driver Was Doing LEGALLY PARKED	Vehicle Factors
		Driver Prior Action Other	NOT APPLICABLE
02	02	Driver Actions NO CONTRIBUTING ACTION	
		Owner Name STACY L PLETZER (608) 475-0759	Owner Address 28946 OAK ST SEXTONVILLE, WI 53584 , US
Sequence Of Events			
UNIT	VEHICLE	01	Event PARKED MOTOR VEHICLE
		02	Event
		03	Event
		04	Event
Policy Holder			
UNIT	VEHICLE	Insurance Company AMERICAN-FAMILY-INS-CO	Individual STACY PLETZER