

6TL0D6N013
21-04218

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 21-04218		Investigating Officer/Deputy DEPUTY B. STODDARD	
Crash Date 05/17/2021		Crash Time 07:28 AM		Date Arrived 05/17/2021		Time Arrived 07:31 AM	
Date Notified 05/17/2021		Time Notified 07:28 AM		Total Units 02		Total Injured 02	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>	Reconstruction By
	Photos By B STODDARD
	Additional Information PHOTOS

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

UNIT 1 WAS BACKING SOUTH OUT OF A PARKING STALL. UNIT 2 WAS EASTBOUND IN THE PARKING LOT. UNIT 1 AND UNIT 2 COLLIDED AS UNIT 1 WAS BACKING. UNIT 2 STRUCK UNIT 1 IN THE REAR PASSENGER SIDE TIRE/FENDER AREA.

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Location

PARKING LOT CTHBD SB LOT 1875 (HOUSE/BUILDING 1875) IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY	Latitude 43.495984218	Longitude -89.780288686
	X Coordinate 275209.78125	Y Coordinate 4819651
	Structure Type HOUSE/BUILDING	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location OUTSIDE RIGHT-OF-WAY (TRAFFICWAY)	
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 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 N/A	Total Lanes	
	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 01	Vehicle			
		License Plate Number 325YPH	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 2G1WG5E37C1319905	Make CHEVROLET	Year 2012	Model IMPALA LT
		Color GLD - GOLD	Body Style 4D - 4DR		Bus Use
		Initial Contact Point 04 - RIGHT SIDE REAR	Vehicle Damage 04 - RIGHT SIDE REAR, 05 - RIGHT REAR CORNER		
Extent Of Damage DISABLING 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 NO CONTRIBUTING ACTION		
01	01	Owner Name JENNIFER LYNN STEINMETZ (608) 547-9485	Owner Address S374 GERKEN LN ELROY, WI 53929 , US
Sequence Of Events			
01	01	Event MOTOR VEH IN TRANSPORT	
02	02	Event	
03	03	Event	
04	04	Event	
Policy Holder			
UNIT		Insurance Company MT-MORRIS-MUTUAL-INS-CO	Individual JENNIFER STEINMETZ
Individual			
UNIT INDIVIDUAL	01	Driver BROOKLYNN MIKAYLA STEINMETZ (608) 853-0508	Citations Issued 0
			Sex FEMALE
			Date of Birth [REDACTED]
		Race WHITE	
	Address 1875 W PINE UNIT 510 BARABOO, WI 53913 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
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	
01	001	Injury Severity Injury POSSIBLE 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 UNKNOWN		

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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 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 EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit N/A	Total Lanes	
	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 VEHICLE 02 02	Vehicle				
	License Plate Number ADK7279		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1G1JC52F157116762		Make CHEVROLET	Year 2005	Model CAVALIER
	Color ONG - ORANGE		Body Style 4D - 4DR		Bus Use
	Initial Contact Point 01 - RIGHT FRONT CORNER		Vehicle Damage		
	Extent Of Damage FUNCTIONAL DAMAGE		01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT		
	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR		

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UNIT VEHICLE	What Driver Was Doing GOING STRAIGHT	Vehicle Factors		
	Driver Prior Action Other	NOT APPLICABLE		
	Driver Actions NO CONTRIBUTING ACTION			
	Owner Name MICHELE A GIBBS (608) 566-7447	Owner Address 1875 W PINE ST # 422 BARABOO, WI 53913 , US		
UNIT VEHICLE	Sequence Of Events			
	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
UNIT VEHICLE	Event			
	Event			
	Event			
	Event			
UNIT INDIVIDUAL	Policy Holder			
	Insurance Company ERIE-INS-CO	Individual MICHELE GIBBS		
	Individual			
	Driver MICHELE A GIBBS (608) 566-7447	Citations Issued 0	Sex FEMALE	
UNIT INDIVIDUAL		Date of Birth [REDACTED]	Race WHITE	
	Address 1875 W PINE ST # 422 BARABOO, WI 53913 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
	Safety Equipment			
	On Duty Crash	Safety Equipment SHOULDER & LAP BELT		
UNIT INDIVIDUAL	Row 01 - FRONT ROW	Seat Position 07 - LEFT		
	Helmet Use	Helmet Compliance		
	Eye Protection	Tint Compliance		
	Injury	Injury Severity POSSIBLE INJURY	Airbag NON DEPLOYED	
UNIT INDIVIDUAL	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
UNIT INDIVIDUAL	Distracted By Action UNKNOWN			
	Non Motorist			
	Striking Unit #	Location		

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UNIT	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	002		