

6TL0D0GSGW
21-04989

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 21-04989		Investigating Officer/Deputy DEPUTY S. FINNEGAN	
Crash Date 06/05/2021		Crash Time 04:00 PM		Date Arrived 06/05/2021		Time Arrived 04:26 PM	
Date Notified 06/05/2021		Time Notified 04:18 PM		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 PRIVATE PROPERTY/PARKING LOT				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

<p>Diagram</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 2 WAS LEGALLY PARKED AT HO CHUNK CASINO. U1 BACKED OUT OF ITS PARKING SPOT AND SIDE SWIPED UNIT 2 THEN LEFT THE SCENE WITHOUT CALLING POLICE OR LEAVING A NOTE.

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Location

PARKING LOT CTHBD NB LOT S3214 (HOUSE/BUILDING S3214) IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude	Longitude
	43.528954579	-89.776481073
	X Coordinate	Y Coordinate
	275639.90625	4823302.5
	Structure Type	
	HOUSE/BUILDING	

Crash Scene

First Harmful Event	First Harmful Event Location	
MOTOR VEH IN TRANSPORT	IN PARKING LANE OR ZONE	
Manner of Collision	Light Condition	
06 - SIDESWIPE/OPPOSITE DIRECTION	DAWN	
Road Surface Condition(s)	Roadway Factor(s)	
DRY	NONE	
Environment Factor(s)		
NONE		
Weather Condition(s)		
CLEAR		
Animal Type	Relation To Trafficway	
	NON TRAFFICWAY - PARKING LOT	
Crash Classification - Location	Crash Classification - Jurisdiction	
TRIBAL LAND	INDIAN RESERVATION/TRUST	
Tribal Land	Access Control	Special Study
HO-CHUNK NATION	NO CONTROL	
Within Interchange Area	Junction Location	Intersection Type
NO	NON-JUNCTION	NOT AN INTERSECTION

Unit Summary

UNIT	Unit Status	Vehicle Operating As Classification	Unit Type		
	HIT AND RUN	D CLASS	AUTOMOBILE		
	Vehicle Type	Operating As Endorsements			
	PASSENGER CAR				
	Total Occs	Train/Bus # Recorded	Total # Citations Issued	Total Trailers	Total HazMat Types
	1		0	0	0
	Insurance?	Direction Of Travel	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit	Total Lanes
	UNKNOWN	NORTHBOUND		N/A	0
Most Harmful Event: Collision With	Special Function	Emergency Motor Vehicle Use			
PARKED MOTOR VEHICLE	UNKNOWN	UNKNOWN			
Traffic Way	Traffic Control	Traffic Control Inoperative/Missing			
PARKING LOT OR PRIVATE PROPERTY	NO CONTROL	NO			
Surface Type	Road Curvature	Road Grade			
BLACKTOP (BITUMINOUS)	STRAIGHT	LEVEL			
Truck Bus or HazMat					
NO					

Vehicle

UNIT	VEHICLE	License Plate Number	Plate Type	St	Country of Issuance	
		Vehicle Identification Number	Make	Year	Model	
		Color	Body Style	Bus Use		
		Initial Contact Point	Vehicle Damage			
		99 - UNKNOWN	09 - LEFT SIDE MIDDLE			
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 UNKNOWN		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions UNKNOWN				
01 01	Owner Name		Owner Address		
Sequence Of Events					
01 02 03 04	Event PARKED MOTOR VEHICLE				
	Event				
	Event				
	Event				
Individual					
UNIT INDIVIDUAL	Driver		Citations Issued 0	Sex	
			Date of Birth	Race	
	Address		Driver License Number		
Safety Equipment		On Duty Crash	Safety Equipment		
			NONE USED - VEHICLE OCCUPANT		
01 001	Row 01 - FRONT ROW	Seat Position 07 - LEFT			
	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			
Non Motorist		Striking Unit #	Location		

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UNIT INDIVIDUAL	Prior Action		
	Action		
	Action Other		To/From School
	Drug & Alcohol		
	Suspected Alcohol Use		Suspected Drug Use
	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 NOT OBSERVED		

Unit Summary

UNIT 02	Unit Status LEGALLY PARKED		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type (SPORT) UTILITY VEHICLE				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 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					

UNIT VEHICLE 02	Vehicle					
	License Plate Number CQ81518		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number JF2SKAJC4MH479419		Make SUBARU	Year 2021	Model FORESTER	
	Color RED - RED		Body Style UT - SPORT UTILITY VEHICLE		Bus Use	
	Initial Contact Point 04 - RIGHT SIDE REAR		Vehicle Damage			
	Extent Of Damage MINOR DAMAGE		04 - RIGHT SIDE REAR			
	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR			
	What Driver Was Doing LEGALLY PARKED					

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UNIT VEHICLE	Vehicle Factors			
	Driver Prior Action Other	UNKNOWN		
	Driver Actions NO CONTRIBUTING ACTION			
02	02	<table border="1"> <tr> <td>Owner Name PATRICIA J KELLY (630) 715-7311</td> <td>Owner Address 1855 MAPLE LN ELGIN, IL 60123 , US</td> </tr> </table>	Owner Name PATRICIA J KELLY (630) 715-7311	Owner Address 1855 MAPLE LN ELGIN, IL 60123 , US
Owner Name PATRICIA J KELLY (630) 715-7311	Owner Address 1855 MAPLE LN ELGIN, IL 60123 , US			
Sequence Of Events				
04	01	Event MOTOR VEH IN TRANSPORT		
02	02	Event		
03	03	Event		
04	04	Event		
UNIT	Policy Holder			
	Insurance Company TRAVELERS-CASUALTY-&-SURETY-CO	Individual PATRICIA KELLY		