

6TL0D9427W  
21-05623

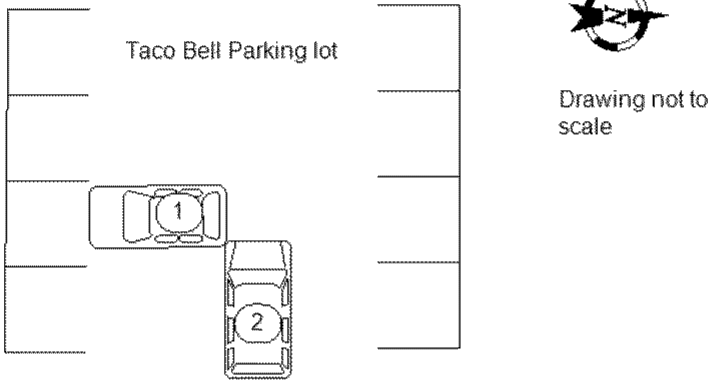
# WISCONSIN MOTOR VEHICLE CRASH REPORT

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 21-05623		Investigating Officer/Deputy DEPUTY A. MEEKER	
Crash Date 06/21/2021		Crash Time 12:16 PM		Date Arrived 06/21/2021		Time Arrived 12:20 PM	
Date Notified 06/21/2021		Time Notified 12:18 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 DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

## Description

Diagram  	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 PULLED INTO A PARKING STALL THEN WAS BACKING INTO ONE AS UNIT 2 WAS APPROACHING. UNIT 1 AND UNIT 2 STRUCK EACH OTHER CAUSING MINOR DAMAGE. UNIT 2 SAYS SHE WAS STOPPED AND HONKED HER HORN BEFORE BEING HIT. MINOR DAMAGE DONE TO BOTH VEHICLES WHICH WERE REMOVED BY OPERATORS.

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## Location

<b>PARKING LOT</b> <b>CTHBD WB LOT 619</b> <b>(FIRE 619)</b>  <b>IN THE VILLAGE OF WEST BARABOO</b> <b>IN SAUK COUNTY</b>	Latitude <b>43.476296925</b>	Longitude <b>-89.769356635</b>
	X Coordinate <b>276020.90625</b>	Y Coordinate <b>4817435</b>
	Structure Type <b>FIRE</b>	

## Crash Scene

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

## Unit Summary

<b>UNIT</b>  <b>01</b>	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>	
	Vehicle Type <b>PASSENGER CAR</b>				Operating As Endorsements	
	Total Occs <b>01</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>YES</b>	Direction Of Travel <b>NOT ON ROADWAY</b>	<input type="checkbox"/> <b>Pre Crash Tire Mark</b>	Speed Limit <b>10</b>	Total Lanes <b>1</b>	
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>PARKING LOT OR PRIVATE PROPERTY</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>					

<b>UNIT</b>  <b>01</b>	<b>VEHICLE</b>  <b>01</b>	<b>Vehicle</b>			
		License Plate Number <b>VZZ128</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>IN</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>19XFC2F66KE032714</b>	Make <b>HONDA</b>	Year <b>2019</b>	Model <b>CIVIC</b>
		Color <b>BLU - BLUE</b>	Body Style <b>SD - SEDAN</b>		Bus Use
		Initial Contact Point <b>08 - LEFT SIDE REAR</b>	Vehicle Damage  <b>07 - LEFT REAR CORNER</b>		
Extent Of Damage <b>MINOR DAMAGE</b>					

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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OPERATOR</b>	
	What Driver Was Doing <b>BACKING</b>	Vehicle Factors	
	Driver Prior Action Other	<b>NOT APPLICABLE</b>	
	Driver Actions <b>UNSAFE BACKING, LOOKED BUT DID NOT SEE</b>		
01 01	Owner Name <b>BELL AMERICAN GROUP (608) 963-2533</b>	Owner Address <b>8930 BASH ST INDIANAPOLIS, IN 46256 1285, US</b>	
	<b>Sequence Of Events</b>		
01 02 03 04	Event <b>MOTOR VEH IN TRANSPORT</b>		
	Event		
	Event		
	Event		
UNIT	<b>Policy Holder</b>		
	Insurance Company <b>ACE-AMERICAN-INS-CO</b>	Organization/Company <b>BELL AMERICAN GROUP</b>	
UNIT INDIVIDUAL	<b>Individual</b>		
	Driver <b>CRAIG D BOSSHARD (608) 963-2533</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>
		Date of Birth [REDACTED]	Race <b>WHITE</b>
	Address <b>S946 CHRISTMAS MOUNTAIN DR WISCONSIN DELLS, WI 53965 , US</b>	Driver License Number [REDACTED] <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01 001	<b>Safety Equipment</b>		On Duty Crash
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #
Hospital		Date of Death	Time of Death
<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>	
Distracted By Action <b>NOT DISTRACTED</b>			

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UNIT INDIVIDUAL          01 001	<b>Non Motorist</b>		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other			To/From School	
	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use NO	Suspected Drug Use NO	
	Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type	Alcohol Test Results	
	Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type	Drug Test Results	
	Drug Type				
	Individual Condition <b>APPEARED NORMAL</b>				

**Unit Summary**

UNIT 02	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>	
	Vehicle Type <b>(SPORT) UTILITY VEHICLE</b>				Operating As Endorsements	
	Total Occs <b>01</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>YES</b>	Direction Of Travel <b>NOT ON ROADWAY</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>10</b>	Total Lanes <b>01</b>	
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>PARKING LOT OR PRIVATE PROPERTY</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>					

UNIT VEHICLE 02 02	<b>Vehicle</b>				
	License Plate Number <b>763ZXJ</b>		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>5J6RW2H55HL029354</b>		Make <b>HONDA</b>	Year <b>2017</b>	Model <b>CRV</b>
	Color <b>GRN - GREEN</b>		Body Style <b>UT - SPORT UTILITY VEHICLE</b>		Bus Use
	Initial Contact Point <b>11 - LEFT FRONT CORNER</b>		Vehicle Damage		
	Extent Of Damage <b>MINOR DAMAGE</b>		<b>11 - LEFT FRONT CORNER</b>		
	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>		

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UNIT VEHICLE	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors		
	Driver Prior Action Other		<b>NOT APPLICABLE</b>		
	Driver Actions <b>NO CONTRIBUTING ACTION</b>				
	Owner Name <b>JULIE A KASTELITZ (608) 347-0783</b>		Owner Address <b>431 BILLINGS AVE PRAIRIE DU SAC, WI 53578 , US</b>		
UNIT VEHICLE	<b>Sequence Of Events</b>				
	Event	<b>MOTOR VEH IN TRANSPORT</b>			
	Event				
	Event				
UNIT VEHICLE	<b>Policy Holder</b>				
	Insurance Company <b>AMERICAN-FAMILY-INS-CO</b>		Individual <b>JULIE KASTELITZ</b>		
	<b>Individual</b>				
	Driver <b>CAMDYN EMMA KASTELITZ (608) 347-0783</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>	
		Date of Birth [REDACTED]	Race		
Address <b>431 BILLINGS AVE PRAIRIE DU SAC, WI 53578 , US</b>		Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>			
UNIT INDIVIDUAL	<b>Safety Equipment</b>		On Duty Crash		
	Safety Equipment		<b>SHOULDER &amp; LAP BELT</b>		
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>			
	Helmet Use		Helmet Compliance		
Eye Protection		Tint Compliance			
UNIT INDIVIDUAL	<b>Injury</b>		Injury Severity		
	<b>NO APPARENT INJURY</b>		<b>NON DEPLOYED</b>		
	Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>	
	Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier		
Hospital		Date of Death			
Time of Death					
<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>			
<b>Distracted By Action</b>		<b>NOT DISTRACTED</b>			
<b>Non Motorist</b>		Striking Unit #		Location	

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<b>UNIT</b>	Prior Action		
	Action		
	Action Other		To/From School
	<b>Drug &amp; Alcohol</b>		
	Suspected Alcohol Use	Suspected Drug Use	
	NO	NO	
	Alcohol Test Given	Alcohol Test Type	Alcohol Test Results
	TEST NOT GIVEN		
	Drug Test Given	Drug Test Type	Drug Test Results
	TEST NOT GIVEN		
<b>02</b>	Drug Type		
	Individual Condition		
	APPEARED NORMAL		