

6TL0D5DZ1V
24-05713

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 24-05713	Investigating Officer/Deputy DEPUTY J. HUNTER	
Crash Date 06/02/2024		Crash Time 03:10 PM	Date Arrived 06/02/2024	Time Arrived 03:17 PM	
Date Notified 06/02/2024		Time Notified 03:12 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 DEPUTY HUNTER
	Additional Information PHOTOS

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

UNIT 1 WAS SOUTHBOUND ON 9TH AVE, APPROACHING THE L SHAPED TURN TO TRAVEL EASTBOUND ON 9TH AVE. UNIT 2 WAS WESTBOUND ON 9TH AVE, APPROACHING THE L TURN TO TRAVEL NORTH ON 9TH AVE. UNIT 1 "CUT" THE CORNER, ENTERING THE WESTBOUND TRAFFIC LANE WHILE ENTERING THE TURN. OPERATOR OF UNIT 1 DID NOT SEE UNIT 2, AND UNIT 1 STRUCK UNIT 2. OPERATOR OF UNIT 2 ATTEMPTED TO GET AS CLOSE TO THE CURB TO THE RIGHT AS POSSIBLE, BUT WAS UNABLE TO AVOID THE COLLISION, DUE TO HAVING NOWHERE TO GO. OPERATOR OF UNIT 1 ADVISED THE REASON FOR HER LANE DEVIATION AND COLLISION WAS NOT BEING ABLE TO SEE AROUND HER DRIVER'S SIDE MIRROR.

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Location

ON BERKLEY BLVD 1004 FT W OF 9TH AVE IN THE CITY OF BARABOO IN SAUK COUNTY	Latitude 43.475888736	Longitude -89.758165545
	X Coordinate 276924.53125	Y Coordinate 4817359.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 02 - FRONT TO FRONT	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 TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
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 2	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel SOUTHBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 25	Total Lanes 2
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT	Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE		
	Traffic Way TWO-WAY, NOT DIVIDED	Traffic Control NO CONTROL	Traffic Control Inoperative/Missing NO		
	Surface Type BLACKTOP (BITUMINOUS)	Road Curvature CURVE LEFT	Road Grade LEVEL		
	Truck Bus or HazMat NO				

UNIT 01 VEHICLE	Vehicle			
	License Plate Number 879MJL	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 3C4PDDBG3DT657761	Make DODGE	Year 2013	Model JOURNEY
	Color SIL - SILVER (ALUMINUM)	Body Style UT - SPORT UTILITY VEHICLE	Bus Use	
	Initial Contact Point 11 - LEFT FRONT CORNER	Vehicle Damage 11 - LEFT FRONT CORNER		
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 NEGOTIATING CURVE		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions FAILURE TO CONTROL, WRONG SIDE OR WRONG WAY, FAILED TO KEEP IN DESIGNATED LANE, OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER				
01	01	Owner Name HELEN CHRISTISON (608) 963-5289		Owner Address 750 W PINE ST # 114 BARABOO, WI 53913 , US	
		Sequence Of Events			
UNIT VEHICLE	01	Event MOTOR VEH IN TRANSPORT			
	02	Event			
	03	Event			
	04	Event			
UNIT	Policy Holder				
	Insurance Company ALLSTATE-INS-CO		Individual HELEN CHRISTISON		
UNIT INDIVIDUAL	Individual				
	Driver HELEN CHRISTISON (608) 963-5289		Citations Issued 2	Sex FEMALE	
	Address 750 W PINE ST # 114 BARABOO, WI 53913 , US		Date of Birth	Race WHITE	
			Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
01	001	Safety Equipment		On Duty Crash	
				Safety Equipment 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 UNKNOWN			
Distracted By Action UNKNOWN					

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UNIT	INDIVIDUAL	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					
	Violations					
01	01	UTC Number BG110285	Issue To? 001	Statute Number 346.13(1)	Description UNSAFE LANE DEVIATION	
		UTC Number BG110286	Issue To? 001	Statute Number 346.57(2)	Description FAILURE TO KEEP VEHICLE UNDER CONTROL	

Unit Summary

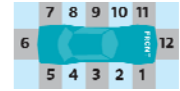
UNIT	02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE							
		Vehicle Type PASSENGER CAR				Operating As Endorsements							
		Total Occs 2		Train/Bus # Recorded		Total # Citations Issued 0		Total Trailers 0		Total HazMat Types 0			
		Insurance? YES		Direction Of Travel WESTBOUND		<input type="checkbox"/> Pre Crash Tire Mark		Speed Limit 25		Total Lanes 2			
		Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT				Special Function NO SPECIAL FUNCTION				Emergency Motor Vehicle Use NOT APPLICABLE			
		Traffic Way TWO-WAY, NOT DIVIDED				Traffic Control NO CONTROL				Traffic Control Inoperative/Missing NO			
		Surface Type BLACKTOP (BITUMINOUS)				Road Curvature CURVE RIGHT				Road Grade LEVEL			
		Truck Bus or HazMat NO											
		Vehicle											
		02	02	License Plate Number 786JGW			Plate Type AUT - AUTOMOBILE		St WI		Country of Issuance UNITED STATES		
Vehicle Identification Number 3KPA25AB9KE249936				Make KIA MOTORS CORPORAT		Year 2019		Model RIO					
Color RED - RED				Body Style HB - HATCHBACK				Bus Use					

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UNIT VEHICLE	Initial Contact Point 01 - RIGHT FRONT CORNER		Vehicle Damage 01 - RIGHT FRONT CORNER	
	Extent Of Damage MINOR DAMAGE			
	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
UNIT VEHICLE	Driver Actions NO CONTRIBUTING ACTION			
	Owner Name JANE CHATELAIN (608) 408-6689		Owner Address 532 SPRING CREEK CIR BARABOO, WI 53913 , US	
UNIT VEHICLE	Sequence Of Events			
	01	Event MOTOR VEH IN TRANSPORT		
	02	Event		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company AMERICAN-FAMILY-CONNECT-INS-CO		Individual JANE CHATELAIN	
UNIT INDIVIDUAL	Individual			
	Driver CLAUDE CHATELAIN (608) 408-6689		Citations Issued 0	Sex MALE
	Address 532 SPRING CREEK CIR BARABOO, WI 53913 , US		Date of Birth	Race
	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
UNIT INDIVIDUAL	Safety Equipment		On Duty Crash	
	Safety Equipment		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	

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UNIT	INDIVIDUAL	Distracted By Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
		Distracted By Action NOT DISTRACTED		
		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		
02	002	Individual Condition APPEARED NORMAL		
		Individual		
		Passenger JANE CHATELAIN (608) 356-8968	Citations Issued 0 Sex FEMALE	
			Date of Birth Race	
		Address 532 SPRING CREEK CIR BARABOO, WI 53913 , US	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 Use	Helmet Compliance	
		Eye Protection	Tint Compliance	
		02	003	Injury
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			

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UNIT	Distracted By Action				
	Non Motorist	Striking Unit #	Location		
		Prior Action			
	INDIVIDUAL	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	
	02	003	Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results
			Drug Type		
			Individual Condition APPEARED NORMAL		