

6TL0C22Z0W

24-12809

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 24-12809	Investigating Officer/Deputy DEPUTY A. WILCOX	
Crash Date 11/18/2024		Crash Time 08:06 AM	Date Arrived 11/18/2024	Time Arrived 08:21 AM	
Date Notified 11/18/2024		Time Notified 08:08 AM	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 A. WILCOX
	Additional Information PHOTOS

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

ON 11/18/2024, I WAS DISPATCHED TO NACHREINER AVE AND CHERRY STREET IN THE VILLAGE OF PLAIN FOR A TRAFFIC CRASH. UNIT 1 OPERATOR WAS PARKED IN A PARKING STALL AND BACKED UP INTO UNIT 2, WHO WAS TRAVELING N/B ON NACHREINER AVENUE. UNIT 1 OPERATOR STATED SHE WAS IN A HURRY AND DID NOT SEE UNIT 2 WHEN UNIT 1 BACKED UP. BOTH UNIT 1 AND 2 OPERATORS WERE ABLE TO DRIVE AWAY. UNIT 1 OPERATOR WAS ISSUED AND EXPLAINED A CITATION FOR UNSAFE BACKING.

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Location

ON NACHREINER AVE 131 FT N OF CHERRY ST IN THE VILLAGE OF PLAIN IN SAUK COUNTY	Latitude 43.27634853	Longitude -90.049138325
	X Coordinate 252579.265625	Y Coordinate 4796019
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 05 - REAR TO SIDE	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLOUDY		
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 (SPORT) UTILITY VEHICLE	Operating As Endorsements			
	Total Occs 2	Train/Bus # Recorded	Total # Citations Issued 1	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel EASTBOUND	<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 STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO				

UNIT 01 VEHICLE	Vehicle			
	License Plate Number AFM1542	Plate Type AUT	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1FMJK2AT5KEA15484	Make FORD	Year 2019	Model EXPEDITION
	Color RED - RED	Body Style UT - SPORT UTILITY VEHICLE		Bus Use
	Initial Contact Point 07 - LEFT REAR CORNER	Vehicle Damage 07 - LEFT REAR 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 BACKING		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions 106,124			
01 01	Owner Name JASON FABER (608) 570-0425		Owner Address E3459 MCCARVILLE RD PLAIN, WI 53577 , US	
	Sequence Of Events			
01 01	01	Event MOTOR VEH IN TRANSPORT		
	02	Event		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company RURAL-MUTUAL-INS-CO-(ATTN:-CLAIMS-DEPT)		INDIVIDUAL HEATHER FABER	
UNIT INDIVIDUAL	Individual			
	DRIVER HEATHER FABER (608) 570-0425		Citations Issued 1	Sex FEMALE
	Address E3459 MCCARVILLE RD PLAIN, WI 53577 , US		Date of Birth	Race WHITE
	Driver License Number 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				

WISCONSIN MOTOR VEHICLE CRASH REPORT

UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
		Action Other				To/From School	
01	001	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					
		Individual					
		PASSENGER BRIAN FABER			Citations Issued 0	Sex MALE	
					Date of Birth	Race WHITE	
		Address E3873 GARVEY RD PLAIN, WI 53577 , US			Driver License Number		
		01	002	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			
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			
Distracted By Action							
Non Motorist		Striking Unit #	Location				

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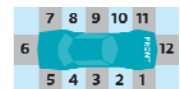
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UNIT	INDIVIDUAL	Prior Action			
		Action			
		Action Other			To/From School
	01	002	Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use NO
			Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	Alcohol Test Results
			Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results
			Drug Type		
			Individual Condition APPEARED NORMAL		
	01	001	Violations		
			UTC Number BC936729	Issue To? 001	Statute Number 346.87

Unit Summary

UNIT	02	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE		
		Vehicle Type (SPORT) UTILITY VEHICLE	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 NORTHBOUND	<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 STRAIGHT	Road Grade LEVEL	
		Truck Bus or HazMat NO				

UNIT	02	Vehicle			
		License Plate Number AFR7166	Plate Type AUT	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1GNSKHKC3KR125394	Make CHEV	Year 2019	Model SUBURBAN
		Color WHI - WHITE	Body Style UT - SPORT UTILITY VEHICLE		Bus Use
		Initial Contact Point 09 - LEFT SIDE MIDDLE	Vehicle Damage 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 STOP IN TRAFFIC		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions 123				
02	Owner Name PAMELA BURINGA (608) 604-2646		Owner Address 6807 LEACHES CROSSING RD AVOCA, WI 53506 , US		
	Sequence Of Events				
01 02 03 04	Event MOTOR VEH IN TRANSPORT				
	Event				
	Event				
	Event				
UNIT	Policy Holder				
	Insurance Company FEDERAL-INS-CO		ORGANIZATION/COMPANY FEINER CONSTRUCTION LLC		
UNIT INDIVIDUAL	Individual				
	DRIVER PAMELA BURINGA (608) 604-2646		Citations Issued 0	Sex FEMALE	
	Address 6807 LEACHES CROSSING RD AVOCA, WI 53506 , US		Date of Birth	Race WHITE	
	Driver License Number		STATE: WISCONSIN COUNTRY: UNITED STATES		
02 003	Safety Equipment		On Duty Crash		
	Safety Equipment		SHOULDER & LAP BELT		
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	Helmet Compliance		
	Helmet Use		Tint Compliance		
	Eye Protection		Airbag NON DEPLOYED		
	Injury		Injury Severity NO APPARENT INJURY	Trapped/Extricated NOT TRAPPED	
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		EMS Agency Identifier	
Medical Transport NOT TRANSPORTED		EMS Run #		Date of Death	
Hospital		Time of Death		Distracted By	
Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		Distracted By Action NOT DISTRACTED			

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UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
02	003	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					
		Individual					
		PASSENGER HOLLAND FEINER		Citations Issued 0	Sex FEMALE		
				Date of Birth	Race BLACK/AFRICAN AMERICAN		
Address 628 WINDSTED STREET SPRING GREEN, WI 53588 , US		Driver License Number					
02	004	Safety Equipment		On Duty Crash	Safety Equipment		
		Row 02 - SECOND ROW	Seat Position 07 - LEFT	CHILD RESTRAINT SYSTEM - FORWARD FACING			
		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			
		Distracted By Action					
UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		

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UNIT	INDIVIDUAL			
	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	004		