

6TL0D942CC  
24-14129

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 <b>24-14129</b>		Investigating Officer/Deputy <b>DEPUTY M. PETERSON</b>	
Crash Date <b>12/27/2024</b>		Crash Time <b>12:00 PM</b>		Date Arrived <b>12/27/2024</b>		Time Arrived <b>07:13 PM</b>	
Date Notified <b>12/27/2024</b>		Time Notified <b>05:06 PM</b>		Total Units <b>02</b>		Total Injured <b>00</b>	Total Killed <b>00</b>
<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 <b>NO</b>		Tags	
<input type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram 	Reconstruction By
	Photos By
	Additional Information <b>NONE</b>

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

UNIT ONE WAS BACKING OUT OF A PARKING STALL IN A SOUTH EAST DIRECTION. DIRECTLY ACROSS, TO THE EAST, WAS UNIT TWO. UNIT ONE DID NOT SEE UNIT TWO AND ENDED UP COLLIDING REAR BUMPER TO REAR BUMPER. BOTH VEHICLES SUSTAINED MINOR DAMAGE AND WERE DRIVEN FROM THE SCENE. UNIT ONE REPORTED NO INJURIES AND WAS WEARING HER SEAT BELT. UNIT TWO WAS UNOCCUPIED AND WAS LEGALLY PARKED IN A PARKING STALL.

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## Location

ON CHRISTMAS MOUNTAIN RD 0.30 MI E OF COON BLUFF RD IN THE TOWN OF DELLONA IN SAUK COUNTY	Latitude <b>43.610071694</b>	Longitude <b>-89.86336803</b>
	X Coordinate <b>268929.09375</b>	Y Coordinate <b>4832550</b>
	Structure Type <b>NO STRUCTURE</b>	

## Crash Scene

First Harmful Event <b>PARKED MOTOR VEHICLE</b>	First Harmful Event Location <b>IN PARKING LANE OR ZONE</b>	
Manner of Collision <b>04 - REAR TO REAR</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>CLEAR</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

UNIT 01	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>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>NO</b>	Direction Of Travel <b>NOT ON ROADWAY</b>	<input type="checkbox"/> <b>Pre CrashTire Mark</b>	Speed Limit <b>05</b>	Total Lanes <b>0</b>
	Most Harmful Event: Collision With <b>PARKED MOTOR VEHICLE</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 01 VEHICLE	<b>Vehicle</b>			
	License Plate Number <b>AMA4130</b>	Plate Type <b>AUT</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>KNDMB233X96276936</b>	Make <b>KIA</b>	Year <b>2009</b>	Model <b>SEDONA</b>
	Color <b>BLU - BLUE</b>	Body Style <b>VN - VAN</b>		Bus Use
	Initial Contact Point <b>06 - REAR</b>	Vehicle Damage <b>06 - REAR</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>NO CONTRIBUTING ACTION</b>			
01 01	Owner Name <b>AMANDA KOZOYED</b>		Owner Address <b>1598 16TH CT ARKDALE, WI 54613 , US</b>	
	<b>Sequence Of Events</b>			
01 01 02 03 04	Event <b>PARKED MOTOR VEHICLE</b>			
	Event			
	Event			
	Event			
UNIT INDIVIDUAL	DRIVER <b>AMANDA KOZOYED</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>
	Address <b>1598 16TH CT ARKDALE, WI 54613 , US</b>		Date of Birth	Race <b>WHITE</b>
	On Duty Crash		Safety Equipment	
	Driver License Number		<b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01 001	Row <b>01 - FRONT ROW</b>		Seat Position <b>07 - LEFT</b>	<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>
01 001	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>				
<b>Non Motorist</b>		Striking Unit #	Location	

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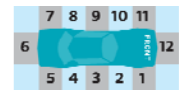
<b>UNIT</b>	<b>INDIVIDUAL</b>	Prior Action			
		Action			
		Action Other			To/From School
		<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>	
		Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type		Alcohol Test Results
		Drug Test Given <b>TEST NOT GIVEN</b>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

## Unit Summary

<b>UNIT</b>	<b>02</b>	Unit Status <b>LEGALLY PARKED</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>0</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>05</b>	Total Lanes <b>0</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>				

## Vehicle

<b>UNIT</b>	<b>VEHICLE</b>	<b>02</b>	<b>02</b>	License Plate Number <b>688AA2</b>	Plate Type <b>AUT</b>	St <b>MN</b>	Country of Issuance <b>UNITED STATES</b>
				Vehicle Identification Number <b>JM3KFBXY6P0175630</b>	Make <b>MAZD</b>	Year <b>2023</b>	Model <b>CX-5</b>
				Color <b>RED - RED</b>	Body Style		Bus Use
				Initial Contact Point <b>07 - LEFT REAR CORNER</b>	Vehicle Damage		
				Extent Of Damage <b>MINOR DAMAGE</b>	<b>07 - LEFT REAR CORNER</b>		
				Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OPERATOR</b>		
				What Driver Was Doing <b>LEGALLY PARKED</b>			



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UNIT	VEHICLE	Vehicle Factors	
		Driver Prior Action Other	NOT APPLICABLE
02	02	Driver Actions NO CONTRIBUTING ACTION	
		Owner Name ERIC LARSON	Owner Address 5721 125TH LN N HUGO, MN 55038 1503, US
<b>Sequence Of Events</b>			
UNIT	01	Event MOTOR VEH IN TRANSPORT	
	02	Event	
	03	Event	
	04	Event	
<b>Policy Holder</b>			
		Insurance Company STATE-FARM-CLASSIC-INS-CO	INDIVIDUAL ERIC LARSON