

9PL013B00M  
R21-10179

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

REEDSBURG POLICE DEPARTMENT  
200 SOUTH PARK STREET  
REEDSBURG, WI 53959  
(608) 524-2376

9PL013B00M

Document Number Override		Primary Crash Document #		Agency Crash Number <b>R21-10179</b>		Investigating Officer/Deputy <b>J. HOEGE</b>	
Crash Date <b>09/21/2021</b>		Crash Time <b>03:26 PM</b>		Date Arrived <b>09/21/2021</b>		Time Arrived <b>03:26 PM</b>	
Date Notified <b>09/21/2021</b>		Time Notified <b>03:26 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 checked="" type="checkbox"/> Active School Zone		School Bus Related <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type <b>PRIVATE PROPERTY/PARKING LOT</b>				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

<p>Diagram</p>	Reconstruction By
	Photos By <b>C. GALLAGHER #157</b>
	Additional Information <b>PHOTOS</b>

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

UNIT 2 WAS IN MOTION TRAVELING NORTHBOUND THROUGH THE PARKING LOT. UNIT 1 WAS LEAVING A PARKED POSITION WHEN UNIT 1 STRUCK UNIT 2. UNIT 1 AND UNIT 2 SUSTAINED DAMAGE. NO INJURIES REPORTED.

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Location

<b>PARKING LOT</b> <b>STH23 EB LOT 1100</b> <b>(HOUSE/BUILDING 1100)</b>  <b>IN THE CITY OF REEDSBURG</b> <b>IN SAUK COUNTY</b>	Latitude <b>43.5224699</b>	Longitude <b>-90.019764945</b>
	X Coordinate <b>255953.703125</b>	Y Coordinate <b>4823267.5</b>
	Structure Type <b>HOUSE/BUILDING</b>	

Crash Scene

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>	First Harmful Event Location <b>IN PARKING LANE OR ZONE</b>	
Manner of Collision <b>03 - FRONT 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

<b>UNIT</b>	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>TRUCK</b>		
	Vehicle Type <b>UTILITY TRUCK/PICKUP TRUCK</b>			Operating As Endorsements	
	Total Occs <b>5</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>N/A</b>	Total Lanes
	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>01</b>			
		License Plate Number <b>859862</b>	Plate Type <b>LTK - LIGHT TRUCK</b>	St <b>WA</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>2HJYK16568H540168</b>	Make <b>HONDA</b>	Year <b>2008</b>	Model <b>RIDGELINE</b>
		Color <b>BLK - BLACK</b>	Body Style <b>PK - PICKUP</b>		Bus Use
		Initial Contact Point <b>12 - FRONT</b>	Vehicle Damage <b>01 - RIGHT FRONT CORNER, 12 - FRONT</b>		
Extent Of Damage <b>MINOR DAMAGE</b>					



UNIT	VEHICLE	Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OPERATOR</b>			
		What Driver Was Doing <b>LEAVING A PARKED POSITION</b>	Vehicle Factors			
		Driver Prior Action Other	<b>NOT APPLICABLE</b>			
		Driver Actions <b>LOOKED BUT DID NOT SEE</b>				
01	01	Owner Name <b>JOEL P ZIMMERMAN (608) 697-4943</b>	Owner Address <b>S3380 GOLF COURSE RD REEDSBURG, WI 53959 , US</b>			
		<b>Sequence Of Events</b>				
UNIT	INDIVIDUAL	Event <b>MOTOR VEH IN TRANSPORT</b>				
		Event				
		Event				
		Event				
01	001	<b>Policy Holder</b>				
		Insurance Company <b>SECURA-INS-CO</b>	Individual <b>JOEL ZIMMERMAN</b>			
01	001	<b>Individual</b>				
		Driver <b>RYAN MATTHEW HERRITZ (608) 697-4943</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>		
		Address <b>E9273 OAKLEAF LN WISCONSIN DELLS, WI 53965 , US</b>	Date of Birth <b>07/02/2005</b>	Race <b>WHITE</b>		
			Driver License Number <b>H6327330524202 STATE: WISCONSIN COUNTRY: UNITED STATES</b>			
01	001	<b>Safety Equipment</b>		On Duty Crash		
				Safety Equipment		
		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>	
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>				

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

<b>UNIT</b>	<b>INDIVIDUAL</b>	<b>Non Motorist</b>		Striking Unit #	Location		
		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>					
		<b>UNIT</b>	<b>INDIVIDUAL</b>	<b>Individual</b>			
Passenger <b>TREVOR JOHN MICK</b> <b>(608) 963-9876</b>				Citations Issued <b>0</b>	Sex <b>MALE</b>		
				Date of Birth <b>06/11/2005</b>	Race <b>WHITE</b>		
Address <b>238 S JAMES AVE</b> <b>REEDSBURG, WI 53959 , US</b>				Driver License Number <b>M2008100521106</b> <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>			
<b>Safety Equipment</b>				On Duty Crash	Safety Equipment		
Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</b>			<b>SHOULDER &amp; LAP BELT</b>			
Helmet Use				Helmet Compliance			
Eye Protection				Tint Compliance			
<b>UNIT</b>	<b>INDIVIDUAL</b>			<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			
		Distracted By Action					
		<b>Non Motorist</b>		Striking Unit #	Location		

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT	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>			
	<b>Individual</b>			
	UNIT	Passenger <b>HUNTER JASON GARRETT ZIMMERMAN (608) 415-2177</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>
		Date of Birth <b>09/28/2005</b>	Race <b>WHITE</b>	
Address <b>S1184 TOWN HALL RD LYNDON STATION, WI 53944 , US</b>		Driver License Number <b>Z5653300534809 STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
<b>Safety Equipment</b>		On Duty Crash	Safety Equipment	
Row <b>02 - SECOND ROW</b>		Seat Position <b>07 - LEFT</b>	<b>SHOULDER &amp; LAP BELT</b>	
Helmet Use		Helmet Compliance		
Eye Protection		Tint Compliance		
UNIT		<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
	Hospital		Date of Death	Time of Death
	<b>Distracted By</b>	Distracted By Source		
	Distracted By Action			
	<b>Non Motorist</b>	Striking Unit #	Location	
	Prior Action			

UNIT	INDIVIDUAL	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>			
		<b>Individual</b>			
		Passenger <b>DAKOTA F-J FRY</b> <b>(608) 495-0696</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>	
		Address <b>614 LAUREL ST</b> <b>REEDSBURG, WI 53959 , US</b>	Date of Birth <b>08/08/2005</b>		
	Race <b>WHITE</b>				
UNIT	INDIVIDUAL	Driver License Number			
		<b>Safety Equipment</b>	On Duty Crash	Safety Equipment	
		Row <b>02 - SECOND ROW</b>	Seat Position <b>08 - MIDDLE</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>	
		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		
Distracted By Action					
<b>Non Motorist</b>	Striking Unit #	Location			
Prior Action					

UNIT	INDIVIDUAL	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>						
		<b>Individual</b>						
		Passenger <b>CLAYTON ALLEN FULLER</b> <b>(608) 581-0047</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>				
		Date of Birth <b>10/31/2004</b>	Race <b>WHITE</b>					
Address <b>S1397A COUNTY ROAD K</b> <b>REEDSBRUG, WI 53959 , US</b>	Driver License Number <b>F4601010439105</b> <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>							
UNIT	INDIVIDUAL	<b>Safety Equipment</b>	On Duty Crash	Safety Equipment				
		Row <b>02 - SECOND ROW</b>	Seat Position <b>09 - RIGHT</b>	<b>SHOULDER &amp; LAP BELT</b>				
		Helmet Use		Helmet Compliance				
		Eye Protection		Tint Compliance				
		UNIT	INDIVIDUAL	<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			
		Distracted By Action						
<b>Non Motorist</b>	Striking Unit #	Location						
Prior Action								

UNIT	INDIVIDUAL	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**

UNIT	02	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>YES</b>	Direction Of Travel <b>NOT ON ROADWAY</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>N/A</b>	Total Lanes
		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	<b>Vehicle</b>			
		License Plate Number <b>AGM7818</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>1G1PC5SBXE7375306</b>	Make <b>CHEVROLET</b>	Year <b>2014</b>	Model <b>CRUZE</b>
		Color <b>RED - RED</b>	Body Style <b>4D - 4DR</b>	Bus Use	
		Initial Contact Point <b>07 - LEFT REAR CORNER</b>	Vehicle Damage <b>05 - RIGHT REAR CORNER, 06 - REAR, 07 - LEFT REAR CORNER, 08 - LEFT SIDE REAR, 09 - LEFT SIDE MIDDLE</b>		
		Extent Of Damage <b>FUNCTIONAL DAMAGE</b>			
		Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OPERATOR</b>		
		What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors <b>NOT APPLICABLE</b>		
		Driver Prior Action Other			



UNIT VEHICLE	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
	02	02	Owner Name <b>GAIL L WILHELM (608) 408-0370</b>	
			Owner Address <b>31 JAZ CIR REEDSBRUG, WI 53959 , US</b>	
	<b>Sequence Of Events</b>			
UNIT 01	Event <b>MOTOR VEH IN TRANSPORT</b>			
	UNIT 02	Event		
		Event		
	UNIT 03	Event		
Event				
UNIT 04	<b>Policy Holder</b>			
	Insurance Company <b>AMERICAN-FAMILY-INS-CO</b>		Individual <b>GAIL WILHELM</b>	
	<b>Individual</b>			
	UNIT INDIVIDUAL	Driver <b>KATELYN MARIE WILHELM (608) 408-0294</b>	Citations Issued <b>0</b>	Sex <b>FEMALE</b>
		Date of Birth <b>04/30/2004</b>	Race <b>WHITE</b>	
UNIT INDIVIDUAL	Address <b>31 JAZ CIR REEDSBRUG, WI 53959 , US</b>		Driver License Number <b>W4455130465007 STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
	<b>Safety Equipment</b>			
UNIT 02	On Duty Crash		Safety Equipment	
	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>		Airbag	
	Injury Severity <b>NO APPARENT INJURY</b>		<b>NON DEPLOYED</b>	
UNIT 006	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
UNIT 006	<b>Distracted By</b>			
	Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>			
	Distracted By Action <b>NOT DISTRACTED</b>			
UNIT 006	<b>Non Motorist</b>			
	Striking Unit #	Location		
Prior Action				

UNIT	INDIVIDUAL	Action				
		Action Other		To/From School		
	02	006	<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>			