

9PL0122XXW
21-13577

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

Location

| | | |
|---|---|-----------------------------------|
| ON 1232 MAIN ST/ STH23 EB 211 FT E OF LOGELIN DR (HOUSE/BUILDING 1232) IN THE CITY OF REEDSBURG IN SAUK COUNTY | Latitude 43.532450236 | Longitude -89.989629611 |
| | X Coordinate 258429.109375 | Y Coordinate 4824288 |
| | Structure Type HOUSE/BUILDING | |

Crash Scene

| | | |
|---|---|---|
| First Harmful Event MOTOR VEH IN TRANSPORT | First Harmful Event Location IN PARKING LANE OR ZONE | |
| Manner of Collision 04 - REAR TO REAR | 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 NON TRAFFICWAY - PARKING LOT | |
| Crash Classification - Location PUBLIC PROPERTY | Crash Classification - Jurisdiction NO SPECIAL JURISDICTION | |
| Tribal Land | Access Control FULL CONTROL | Special Study |
| Within Interchange Area NO | Junction Location NON-JUNCTION | Intersection Type NOT AN INTERSECTION |

Unit Summary

| | | | | | | |
|-------------|---|---|--|--------------------------------|--|--|
| UNIT | 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 0 | Total Trailers 0 | Total HazMat Types 0 | |
| | Insurance? YES | Direction Of Travel EASTBOUND | <input type="checkbox"/> Pre Crash Tire Mark | Speed Limit N/A | Total Lanes | |
| | Most Harmful Event: Collision With PARKED MOTOR VEHICLE | | Special Function NO SPECIAL FUNCTION | | Emergency Motor Vehicle Use NOT APPLICABLE | |
| | Traffic Way PARKING LOT OR PRIVATE PROPERTY | | Traffic Control NO CONTROL | | Traffic Control Inoperative/Missing NO | |
| | Surface Type BLACKTOP (BITUMINOUS) | | Road Curvature STRAIGHT | | Road Grade LEVEL | |
| | Truck Bus or HazMat NO | | | | | |

Vehicle

| | | | | | |
|----------------|---|---------------------------------------|---------------------|---|--|
| VEHICLE | License Plate Number ACY9246 | Plate Type AUT - AUTOMOBILE | St WI | Country of Issuance UNITED STATES | |
| | Vehicle Identification Number JF1GV7E65BG512889 | Make SUBARU | Year 2011 | Model IMPREZA | |
| | Color BLK - BLACK | Body Style SD - SEDAN | | Bus Use | |
| | Initial Contact Point 06 - REAR | Vehicle Damage | | | |
| | Extent Of Damage MINOR DAMAGE | 06 - REAR | | | |



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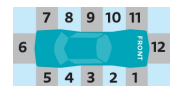
| | | | | |
|---|--|--|--|--|
| UNIT VEHICLE | Towed Due To Damage NOT TOWED | | Vehicle Removed By OPERATOR | |
| | What Driver Was Doing BACKING | | Vehicle Factors | |
| | Driver Prior Action Other | | NOT APPLICABLE | |
| | Driver Actions UNSAFE BACKING | | | |
| 01 | Owner Name JACOB RICHARD TOY | | Owner Address 510 1ST ST LA VALLE, WI 53941 , US | |
| | Sequence Of Events | | | |
| 01 | Event | MOTOR VEH IN TRANSPORT | | |
| | Event | PARKED MOTOR VEHICLE | | |
| | Event | | | |
| | Event | | | |
| UNIT | Policy Holder | | | |
| | Insurance Company UNKNOWN | | Individual JACOB TOY | |
| UNIT INDIVIDUAL | Individual | | | |
| | Driver JACOB RICHARD TOY | | Citations Issued 0 | Sex MALE |
| | | | Date of Birth 10/07/2001 | Race WHITE |
| | Address 510 1ST ST LA VALLE, WI 53941 , US | | Driver License Number T0004360136705 STATE: WISCONSIN COUNTRY: UNITED STATES | |
| 01 001 | Safety Equipment | | On Duty Crash | |
| | | | Safety Equipment | |
| | Row 01 - FRONT ROW | Seat Position 07 - LEFT | 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 UNKNOWN | | |
| Distracted By Action UNKNOWN | | | | |

| | | | | | | | |
|-------------|-------------------|---------------------|--|-----------------|------------------------------------|---------------------------------|--|
| 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 | | | | |

Unit Summary

| | | | | | | | | |
|-------------|-----------|---|--|---|----------------------------|--|---------------------------|--|
| UNIT | 02 | Unit Status LEGALLY PARKED | | Vehicle Operating As Classification D CLASS | | Unit Type AUTOMOBILE | | |
| | | Vehicle Type PASSENGER CAR | | | | | Operating As Endorsements | |
| | | Total Occs 0 | Train/Bus # Recorded | Total # Citations Issued 0 | Total Trailers 0 | Total HazMat Types 0 | | |
| | | Insurance? YES | Direction Of Travel NOT ON ROADWAY | <input type="checkbox"/> Pre Crash Tire Mark | Speed Limit N/A | Total Lanes 1 | | |
| | | Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT | | Special Function NO SPECIAL FUNCTION | | Emergency Motor Vehicle Use NOT APPLICABLE | | |
| | | Traffic Way PARKING LOT OR PRIVATE PROPERTY | | 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 | VEHICLE | Vehicle | | | | |
| | | License Plate Number 705PJP | Plate Type AUT - AUTOMOBILE | St WI | Country of Issuance UNITED STATES | |
| | | Vehicle Identification Number 1B3CC5FB6AN114990 | Make DODGE | Year 2010 | Model AVENGER R/ | |
| | | Color SIL - SILVER (ALUMINUM) | Body Style 4D - 4DR | | Bus Use | |
| | | Initial Contact Point 06 - REAR | Vehicle Damage | | | |
| | | Extent Of Damage MINOR DAMAGE | 06 - REAR | | | |
| | | Towed Due To Damage NOT TOWED | Vehicle Removed By OPERATOR | | | |



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| | | | | |
|----------------------|---|--|---|--|
| UNIT | VEHICLE | 02 | What Driver Was Doing LEGALLY PARKED | Vehicle Factors |
| | | | Driver Prior Action Other | NOT APPLICABLE |
| | | | Driver Actions NO CONTRIBUTING ACTION | |
| | | | Owner Name TRAVIS SCOTT SIMMONS | Owner Address W8259 CEYLON RD MAUSTON, WI 53948 , US |
| UNIT | Sequence Of Events | | | |
| | 01 | Event MOTOR VEH IN TRANSPORT | | |
| | 02 | Event PARKED MOTOR VEHICLE | | |
| | 03 | Event | | |
| | 04 | Event | | |
| Policy Holder | | | | |
| | Insurance Company AMERICAN FAMILY | Individual TRAVIS SIMMONS | | |