

WISCONSIN MOTOR VEHICLE
CRASH REPORT

9PL010TWTM

Document Number Override		Primary Crash Document #		Agency Crash Number		Investigating Officer/Deputy J. WILLIAMS	
Crash Date 12/20/2021		Crash Time 05:28 PM		Date Arrived 12/20/2021		Time Arrived 05:33 PM	
Date Notified 12/20/2021		Time Notified 05:30 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

<p>Diagram</p> <p style="text-align: center;">not to scale</p> <p style="text-align: center;">8th St</p> <p style="text-align: center;">N. Dewey Ave</p>	Reconstruction By
	Photos By J.WILLIAMS
	Additional Information NONE, PHOTOS

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

UNIT 1 WAS OPERATING EASTBOUND ON 8TH ST AND APPROACHED THE FOUR WAY STOP INTERSECTION OF 8TH ST AND N. DEWEY AVE. UNIT 1 ADVISED SHE CAME TO A STOP THEN WENT TO PROCEED STRAIGHT WHEN SHE RAN INTO THE PASSENGER SIDE OF UNIT 2. UNIT 1 ADVISED SHE STOPPED BUT COULDN'T REMEMBER IF SHE CHECKED HER SURROUNDINGS AND SHE COULDN'T TELL ME IF UNIT 2 STOPPED AT THE STOP SIGN. UNIT 2 ADVISED SHE WAS SOUTHBOUND ON N. DEWEY AVE AND CAME TO A STOP AT THE INTERSECTION. UNIT 2 ADVISED SHE STOPPED TO WAIT FOR CROSSING TRAFFIC AND WHEN SHE PROCEEDED TO CROSS THE INTERSECTION SOUTHBOUND, UNIT 1 RAN INTO THE SIDE OF HER. UNIT 2 COULD NOT CONFIRM IF UNIT 1 STOPPED AT THE STOP SIGN OR NOT INDICATING TO ME SHE WAS ALSO NOT FULLY PAYING ATTENTION TO HER SURROUNDINGS LIKE UNIT 1. GIVEN THE LOCATION OF THE CRASH AND UNIT 2 BEING MOSTLY ACROSS THE INTERSECTION WHEN THE COLLISION OCCURRED, I BELIEVE UNIT 1 LIKELY FAILED TO YIELD THE RIGHT OF WAY HOWEVER I CANNOT SAY FOR CERTAIN GIVEN THE STATEMENTS PROVIDED BY EACH.

Location

ON N DEWEY AVE 13 FT S OF 8TH ST IN THE CITY OF REEDSBURG IN SAUK COUNTY	Latitude 43.539674053	Longitude -89.99460381
	X Coordinate 258056.078125	Y Coordinate 4825105
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 01 - ANGLE	Light Condition DARK/LIGHTED	
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 INTERSECTION-RELATED	Intersection Type FOUR-WAY 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 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 STOP SIGN		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)	Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO				

Vehicle

UNIT	VEHICLE	License Plate Number 364ZLR	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
		Vehicle Identification Number WAUCFAFR4DA038058	Make AUDI	Year 2013	Model A5	
		Color BLK - BLACK	Body Style CP - COUPE		Bus Use	
		Initial Contact Point 11 - LEFT FRONT CORNER	Vehicle Damage 01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT			
		Extent Of Damage FUNCTIONAL DAMAGE				



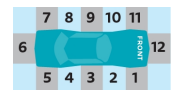
UNIT	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR		
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions UNKNOWN				
01	01	Owner Name CAROL ANNE KRUEGER (608) 524-2481		Owner Address 943 6TH ST REEDSBURG, WI 53959 , US	
		Sequence Of Events			
UNIT	01	Event MOTOR VEH IN TRANSPORT			
		Event MOTOR VEH IN TRANSPORT			
		Event			
		Event			
UNIT	01	Policy Holder			
		Insurance Company AUTO-OWNERS-INS-CO	Individual CAROL KRUEGER		
UNIT	01	Individual			
		Driver CAROL ANNE KRUEGER (608) 524-2481	Citations Issued 0	Sex FEMALE	
			Date of Birth 06/14/1951	Race	
		Address 943 6TH ST REEDSBURG, WI 53959 , US	Driver License Number K6261015171406 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			
Distracted By Action UNKNOWN					

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					

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 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0		
		Insurance? YES	Direction Of Travel SOUTHBOUND	<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 NON-EMERGENCY, NON-TRANSPORT	
		Traffic Way TWO-WAY, NOT DIVIDED			Traffic Control STOP SIGN		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 AKB7395	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES		
		Vehicle Identification Number 1G4HP57218U200405	Make BUICK	Year 2008	Model LUCERNE		
		Color MAR - MAROON (BURGUNDY)	Body Style SD - SEDAN		Bus Use		
		Initial Contact Point 03 - RIGHT SIDE MIDDLE	Vehicle Damage 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 04 - RIGHT SIDE REAR				
		Extent Of Damage FUNCTIONAL DAMAGE					
		Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR				



UNIT VEHICLE	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions UNKNOWN			
	Owner Name JASLYN MAE BLEVINS (608) 393-9242		Owner Address 2220 MYRTLE ST REEDSBURG, WI 53959 , US	
UNIT 02	Sequence Of Events			
	01	Event MOTOR VEH IN TRANSPORT		
	02	Event MOTOR VEH IN TRANSPORT		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company GEICO-GENERAL-INS-CO		Individual JASLYN BLEVINS	
UNIT INDIVIDUAL	Individual			
	Driver JASLYN MAE BLEVINS (608) 393-9242		Citations Issued 0	Sex FEMALE
	Address 2220 MYRTLE ST REEDSBURG, WI 53959 , US		Date of Birth 08/03/1996	Race WHITE
			Driver License Number B4154339678309 STATE: WISCONSIN COUNTRY: UNITED STATES	
UNIT 002	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 NOT APPLICABLE (NOT DISTRACTED)	
Distracted By Action NOT DISTRACTED				
Non Motorist		Striking Unit #	Location	

UNIT	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	002	