

9PL00RFP54  
R21-4617

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

9PL00RFP54

Document Number Override		Primary Crash Document #		Agency Crash Number		Investigating Officer/Deputy <b>W. BOTTEN</b>	
Crash Date <b>04/28/2021</b>		Crash Time <b>01:32 PM</b>		Date Arrived <b>05/01/2021</b>		Time Arrived <b>06:55 AM</b>	
Date Notified <b>04/28/2021</b>		Time Notified <b>01:32 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 checked="" 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 <b>140</b>	
		Additional Information <b>PHOTOS</b>	
		<input checked="" type="checkbox"/> I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.	
<p>OPERATOR OF UNIT 1 WAS BACKING OUT OF A PARKING STALL. OPERATOR OF UNIT 1 STARTED TO TURN TOO SOON AND STRUCK THE PS MIDDLE OF UNIT 2 CAUSING MINOR DAMAGE.</p>			

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Location

ON 501 UTILITY CT 314 FT S OF ZINGA DR (HOUSE/BUILDING 501)  IN THE CITY OF REEDSBURG IN SAUK COUNTY	Latitude <b>43.527952117</b>	Longitude <b>-89.975954946</b>
	X Coordinate <b>259516.234375</b>	Y Coordinate <b>4823749</b>
	Structure Type <b>HOUSE/BUILDING</b>	

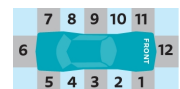
Crash Scene

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>	First Harmful Event Location <b>OFF ROADWAY, LOCATION UNKNOWN</b>	
Manner of Collision <b>OTHER</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>CLOUDY</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>AUTOMOBILE</b>		
	Vehicle Type <b>(SPORT) UTILITY VEHICLE</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 Crash Tire Mark</b>	Speed Limit <b>N/A</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>				

<b>UNIT</b>	<b>VEHICLE</b>	<b>Vehicle</b>			
		License Plate Number <b>ALT2610</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>1FMCU9E71BKB58152</b>	Make <b>FORD</b>	Year <b>2011</b>	Model <b>ESCAPE</b>
		Color <b>BLK - BLACK</b>	Body Style <b>UT - SPORT UTILITY VEHICLE</b>	Bus Use	
		Initial Contact Point <b>11 - LEFT FRONT CORNER</b>	Vehicle Damage <b>11 - LEFT FRONT CORNER</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			
01	01	Owner Name <b>IORELLA L CURO TORRES (608) 495-9387</b>		Owner Address <b>533 ALEXANDER AVE #32 REEDSBURG, WI 53959 , US</b>
<b>Sequence Of Events</b>				
01	01	Event <b>PARKED MOTOR VEHICLE</b>		
02	02	Event		
03	03	Event		
04	04	Event		
<b>Individual</b>				
UNIT INDIVIDUAL	Driver <b>IORELLA L CURO TORRES (608) 495-9387</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>
	Address <b>533 ALEXANDER AVE #32 REEDSBURG, WI 53959 , US</b>		Date of Birth <b>12/28/1995</b>	Race <b>HISPANIC</b>
			Driver License Number <b>C6362529596803</b> STATE: WISCONSIN COUNTRY: UNITED STATES	
<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	
01	001	<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>			
	<b>Non Motorist</b>	Striking Unit #	Location	

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UNIT	INDIVIDUAL	Prior Action			
		Action			
		Action Other	To/From School		
	01	001	<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>LEGALLY PARKED</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>AUTOMOBILE</b>	
		Vehicle Type <b>(SPORT) UTILITY VEHICLE</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"/> <b>Pre Crash Tire Mark</b>	Speed Limit <b>N/A</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>				

UNIT	VEHICLE	<b>Vehicle</b>			
		License Plate Number <b>483MXR</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>5J8TB4H58HL005103</b>	Make <b>ACURA</b>	Year <b>2017</b>	Model <b>RDX</b>
		Color <b>MAR - MAROON (BURGUNDY)</b>	Body Style <b>UT - SPORT UTILITY VEHICLE</b>	Bus Use	
		Initial Contact Point <b>03 - RIGHT SIDE MIDDLE</b>	Vehicle Damage <b>03 - RIGHT SIDE MIDDLE</b>		
		Extent Of Damage <b>MINOR DAMAGE</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	Driver Prior Action Other		Vehicle Factors		
			NOT APPLICABLE		
	Driver Actions NO CONTRIBUTING ACTION				
02	Owner Name MARYBETH BENDALL (608) 345-4230		Owner Address S1799 BUNDY HOLLOW RD LAVALLE, WI 53941 , US		
	<b>Sequence Of Events</b>				
01 02 03 04	Event MOTOR VEH IN TRANSPORT				
	Event				
	Event				
	Event				
UNIT	<b>Policy Holder</b>				
	Insurance Company IMT-INS-CO		Individual MARYBETH BENDALL		
UNIT INDIVIDUAL	<b>Individual</b>				
	Occupant Of Motor Vehicle Not In Transport MARYBETH BENDALL (608) 345-4230		Citations Issued 0	Sex FEMALE	
			Date of Birth 02/22/1962	Race WHITE	
	Address S1799 BUNDY HOLLOW RD LAVALLE, WI 53941 , US		Driver License Number B5345406256206 STATE: WISCONSIN COUNTRY: UNITED STATES		
02 002	<b>Safety Equipment</b>		On Duty Crash		
			Safety Equipment		
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	NONE USED - VEHICLE OCCUPANT		
	Helmet Use		Helmet Compliance		
	Eye Protection		Tint Compliance		
	<b>Injury</b>	Injury Severity NO APPARENT INJURY		Airbag UNKNOWN	
		Ejected UNKNOWN	Ejection Path UNKNOWN		Trapped/Extricated UNKNOWN
Medical Transport NOT TRANSPORTED		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	

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UNIT	INDIVIDUAL		
	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>		
	02	002	