

9PL04ZCGGS
R21-05445

**WISCONSIN MOTOR VEHICLE
CRASH REPORT**

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

9PL04ZCGGS

Document Number Override		Primary Crash Document #		Agency Crash Number		Investigating Officer/Deputy K. BLESKE	
Crash Date 05/17/2021		Crash Time 03:15 PM		Date Arrived 05/17/2021		Time Arrived 03:21 PM	
Date Notified 05/17/2021		Time Notified 03:18 PM		Total Units 02		Total Injured 01	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input checked="" 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

Diagram		Reconstruction By REEDSBURG POLICE DEPARTMENT	
		Photos By K. BLESKE #151	
		Additional Information PHOTOS	

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

UNIT 02 WAS TRAVELING WESTBOUND ON K STREET. UNIT 01 WAS TRAVELING NORTHBOUND ON S. PRESTON AVE. UNIT 02 HAD THE RIGHT OF WAY. UNIT 01 FAILED TO STOP AT THE STOP SIGN AND FAILED TO YIELD THE RIGHT OF WAY TO EASTBOUND AND WESTBOUND TRAFFIC. READ FULL REPORT FOR DETAILS.

Location

ON K ST/ CTHK NB 25 FT E OF S PRESTON AVE IN THE CITY OF REEDSBURG IN SAUK COUNTY	Latitude 43.525288644	Longitude -90.022774546
	X Coordinate 255721.84375	Y Coordinate 4823589.5
	Structure Type	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 01 - ANGLE		Light Condition DAYLIGHT	
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 FULL CONTROL	Special Study
Within Interchange Area YES	Junction Location INTERSECTION	Intersection Type FOUR-WAY INTERSECTION	
Closure Type FULL CLOSURE		Reasons for Closure LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS	
Date Initial Lane/Rd Closed 05/17/2021	Time Initial Lane/Rd Closed 03:22 PM	Date Scene Cleared 05/17/2021	
Date All Lanes Open 05/17/2021	Time All Lanes Open 03:58 PM		

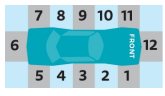
Unit Summary

UNIT	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type TRUCK	
	Vehicle Type UTILITY TRUCK/PICKUP TRUCK	Operating As Endorsements			
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 2	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel NORTHBOUND	<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				
01	Vehicle				
	License Plate Number LB1553		Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 4TAWN72N9YZ643205		Make TOYOTA	Year 2000	Model TACOMA

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UNIT VEHICLE	Color SIL - SILVER (ALUMINUM)	Body Style PK - PICKUP	Bus Use	
	Initial Contact Point 12 - FRONT	Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT		
	Extent Of Damage DISABLING DAMAGE			
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE			Vehicle Removed By
	What Driver Was Doing GOING STRAIGHT			Vehicle Factors
Driver Prior Action Other	NOT APPLICABLE			
UNIT VEHICLE	Driver Actions FAILED TO YIELD RIGHT-OF-WAY, DISREGARDED STOP SIGN			
	Owner Name JOSEPH C BRUCKNER	Owner Address 573 4TH STREET MONTELLO, WI 53949 , US		
01 01	Sequence Of Events			
	01	Event MOTOR VEH IN TRANSPORT		
	02	Event MOTOR VEH IN TRANSPORT		
	03	Event		
04	Event			
	Policy Holder			
	Insurance Company USAA-GENERAL-INDEMNITY-CO	Individual JOSEPH BRUCKNER		
	Individual			
UNIT INDIVIDUAL	Driver JESS C BRUCKNER (608) 494-0607	Citations Issued 2	Sex MALE	
		Date of Birth 04/12/1976	Race WHITE	
	Address 670 E LAKE RD APT. #206 WISCONSIN DELLS, WI 53965 , US	Driver License Number B6254237613206 STATE: WISCONSIN COUNTRY: UNITED STATES		
	Safety Equipment			
	On Duty Crash	Safety Equipment		
Row 01 - FRONT ROW	Seat Position 07 - LEFT	NOT APPLICABLE		
Helmet Use		Helmet Compliance		
Eye Protection		Tint Compliance		
01 001	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 #	

UNIT	Hospital		Date of Death		Time of Death	
	Distracted By		Distracted By Source			
	Distracted By Action		UNKNOWN			
	Non Motorist		Striking Unit #		Location	
	Prior Action					
	Action					
	Action Other					
	To/From School					
	Drug & Alcohol		Suspected Alcohol Use		Suspected Drug Use	
			NO		NO	
	Alcohol Test Given		Alcohol Test Type		Alcohol Test Results	
	TEST NOT GIVEN					
	Drug Test Given		Drug Test Type		Drug Test Results	
	TEST NOT GIVEN					
	Drug Type					
Individual Condition						
APPEARED NORMAL						
Violations						
UTC Number		Issue To?	Statute Number	Description		
01 001 BB824387		001	346.46(1)	FAIL/STOP AT STOP SIGN		
02 001 BB824388		001	347.48(2m)(c)	OPERATOR FAIL/HAVE PASSENGER/SEATBELTED		

Unit Summary

UNIT	Unit Status		Vehicle Operating As Classification		Unit Type	
	IN TRANSIT		D CLASS		AUTOMOBILE	
	Vehicle Type				Operating As Endorsements	
	(SPORT) UTILITY VEHICLE					
	Total Occs	Train/Bus # Recorded	Total # Citations Issued	Total Trailers	Total HazMat Types	
	1		0	0	0	
	Insurance?	Direction Of Travel	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit	Total Lanes	
	YES	WESTBOUND		25	2	
	Most Harmful Event: Collision With			Special Function		Emergency Motor Vehicle Use
	MOTOR VEH IN TRANSPORT			NO SPECIAL FUNCTION		NOT APPLICABLE
Traffic Way			Traffic Control		Traffic Control Inoperative/Missing	
TWO-WAY, NOT DIVIDED			NO CONTROL		NO	
Surface Type			Road Curvature		Road Grade	
BLACKTOP (BITUMINOUS)			STRAIGHT		LEVEL	
Truck Bus or HazMat						
NO						

Vehicle

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02	UNIT	License Plate Number 955YGD	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
		Vehicle Identification Number 2FMDK4KC9EBA84492	Make FORD	Year 2014	Model EDGE	
02	VEHICLE	Color GRY - GRAY	Body Style 4D - 4DR	Bus Use		
		Initial Contact Point 09 - LEFT SIDE MIDDLE	Vehicle Damage 09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER			
02	VEHICLE	Extent Of Damage DISABLING DAMAGE				
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By			
02	VEHICLE	What Driver Was Doing GOING STRAIGHT	Vehicle Factors			
		Driver Prior Action Other	NOT APPLICABLE			
02	VEHICLE	Driver Actions NO CONTRIBUTING ACTION				
		Owner Name CONNIE R LEHMAN	Owner Address S4263 MEYER RD REEDSBURG, WI 53959 , US			
Sequence Of Events						
02	UNIT	01	Event MOTOR VEH IN TRANSPORT			
		02	Event MOTOR VEH IN TRANSPORT			
		03	Event			
		04	Event			
02	UNIT	Policy Holder				
		Insurance Company STATE-FARM-GENERAL-INS-CO	Individual CONNIE LEHMAN			
02	INDIVIDUAL	Individual				
		Driver KURT L LEHMAN (608) 434-4484	Citations Issued 0	Sex MALE		
		Date of Birth 01/31/1978	Race WHITE			
Address E2759 MARSHALL RD CAZENOVIA, WI 53924 , US		Driver License Number L5505127803101 STATE: WISCONSIN COUNTRY: UNITED STATES				
02	UNIT	Safety Equipment		On Duty Crash		
		Safety Equipment SHOULDER & LAP BELT				
		Row 01 - FRONT ROW	Seat Position 07 - LEFT			
		Helmet Use		Helmet Compliance		
Eye Protection		Tint Compliance				
02	UNIT	Injury		Airbag		
		POSSIBLE INJURY		DEPLOYED-COMBINATION		

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UNIT INDIVIDUAL 02 002	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
	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		