

9PL04ZCGGW  
R21-7352

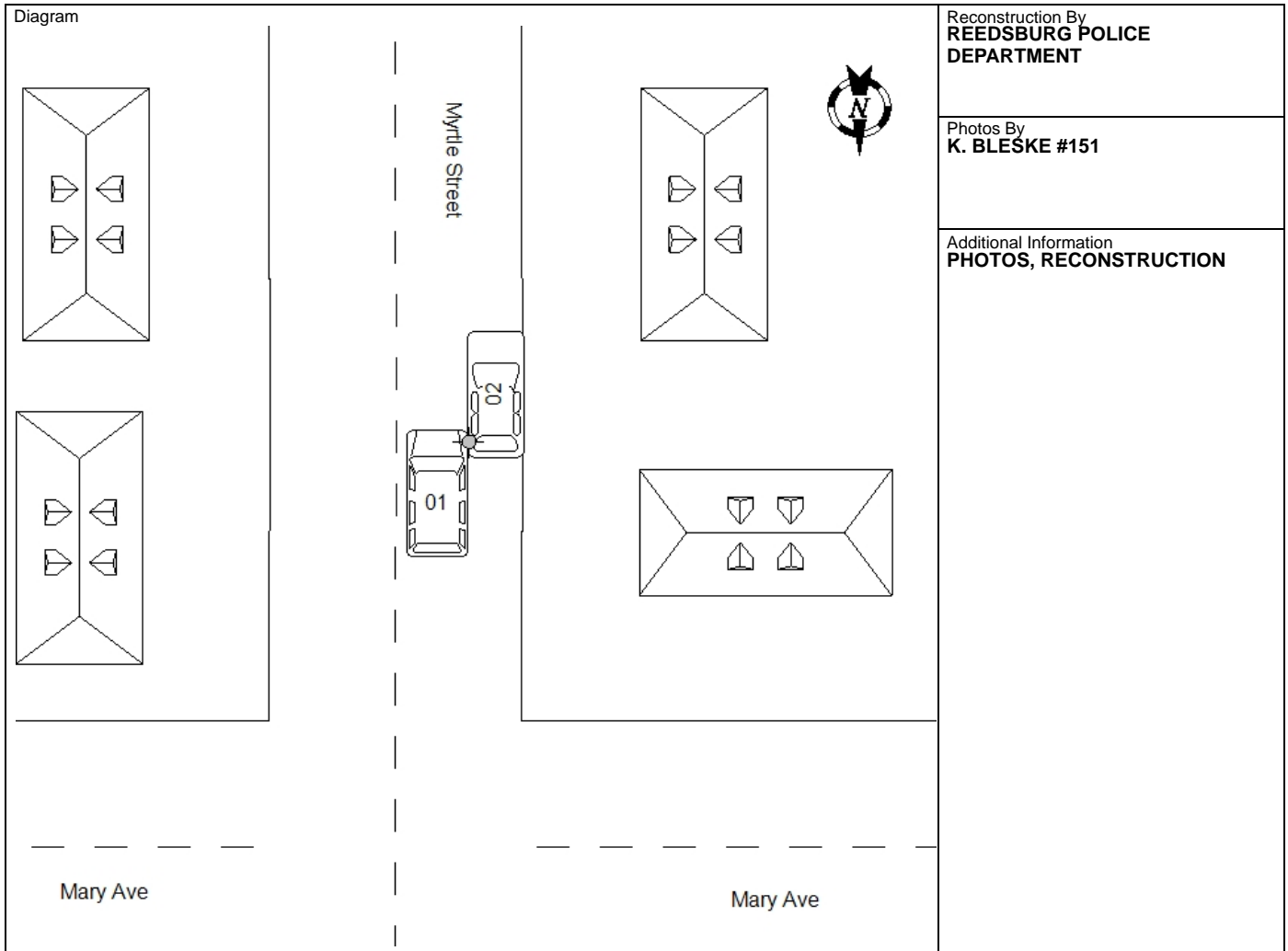
WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

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Document Number Override		Primary Crash Document #		Agency Crash Number		Investigating Officer/Deputy <b>K. BLESKE</b>		
Crash Date <b>07/04/2021</b>		Crash Time <b>08:00 PM</b>		Date Arrived <b>07/05/2021</b>		Time Arrived <b>06:36 PM</b>		
Date Notified <b>07/05/2021</b>		Time Notified <b>06:36 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



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

UNIT 02 WAS LEGALLY PARKED ON THE ROADWAY FACING SOUTHBOUND ON MYRTLE STREET. UNIT 01 WAS TRAVELING SOUTHBOUND ON MYRTLE STREET. UNIT 01 STATED THAT THEY HAD MECHANICAL ISSUES AND WERE UNABLE TO CONTROL THE VEHICLE IN ORDER TO AVOID THE CRASH. UNIT 01 STRUCK UNIT 02. REFER TO FULL REPORT FOR DETAILS.

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## Location

ON MYRTLE ST 181 FT N OF 8TH ST IN THE CITY OF REEDSBURG IN SAUK COUNTY	Latitude <b>43.540170708</b>	Longitude <b>-90.002622513</b>
	X Coordinate <b>257410.171875</b>	Y Coordinate <b>4825183.5</b>
	Structure Type	

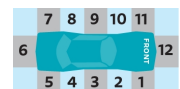
## Crash Scene

First Harmful Event <b>PARKED MOTOR VEHICLE</b>	First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>07 - SIDESWIPE/SAME DIRECTION</b>	Light Condition <b>DUSK</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>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>	Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land	Access Control <b>FULL 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

UNIT 01	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>4</b>	Train/Bus # Recorded	Total # Citations Issued <b>1</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>YES</b>	Direction Of Travel <b>SOUTHBOUND</b>	<input type="checkbox"/> <b>Pre CrashTire Mark</b>	Speed Limit <b>25</b>	Total Lanes <b>2</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>TWO-WAY, NOT DIVIDED</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>UPHILL</b>		
	Truck Bus or HazMat <b>NO</b>				

UNIT 01 VEHICLE	<b>Vehicle</b>			
	License Plate Number <b>ACJ4258</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>JA4MS31X08Z010537</b>	Make <b>MITSUBISHI</b>	Year <b>2008</b>	Model <b>OUTLANDER</b>
	Color <b>BLK - BLACK</b>	Body Style <b>4D - 4DR</b>	Bus Use	
	Initial Contact Point <b>01 - RIGHT FRONT CORNER</b>	Vehicle Damage <b>01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT</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>OWNER</b>	
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors  <b>UNKNOWN</b>	
	Driver Prior Action Other			
	Driver Actions <b>OTHER CONTRIBUTING ACTION</b>			
01 01	Owner Name <b>ASHLEY RODRIGUEZ-VELEZ (608) 408-0428</b>		Owner Address <b>401 N. WALNUT STREET APT 401 REEDSBURG, WI 53959 , US</b>	
	<b>Sequence Of Events</b>			
01 02 03 04	Event <b>PARKED MOTOR VEHICLE</b>			
	Event			
	Event			
	Event			
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>ALLSTATE-INS-CO</b>		Individual <b>ASHLEY RODRIGUEZ-VELEZ</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>EDWIN N CARDENAS (847) 890-0215</b>		Citations Issued <b>1</b>	Sex <b>MALE</b>
	Address <b>620 MAPLE CT MOUNT PROSPECT, IL 60056 , US</b>		Date of Birth <b>03/16/1995</b>	Race <b>HISPANIC</b>
			Driver License Number <b>C63521495078 STATE: ILLINOIS COUNTRY: UNITED STATES</b>	
01 001	<b>Safety Equipment</b>		On Duty Crash	
	Row <b>01 - FRONT ROW</b>		Seat Position <b>07 - LEFT</b>	
	Helmet Use		Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
	Eye Protection		Helmet Compliance	
	Injury <b>NO APPARENT INJURY</b>		Airbag <b>NON DEPLOYED</b>	
	Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	
Medical Transport <b>NOT TRANSPORTED</b>		Trapped/Extricated <b>NOT TRAPPED</b>		
Hospital		EMS Agency Identifier		
Date of Death		EMS Run #		
Time of Death		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>		
Distracted By Action <b>NOT DISTRACTED</b>				

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT	INDIVIDUAL	<b>Non Motorist</b>		Striking Unit #	Location		
		Prior Action					
		Action					
		Action Other				To/From School	
01	001	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>YES</b>	Suspected Drug Use <b>YES</b>		
		Alcohol Test Given <b>TEST GIVEN</b>		Alcohol Test Type <b>BLOOD</b>		Alcohol Test Results <b>PENDING</b>	
		Drug Test Given <b>TEST GIVEN</b>		Drug Test Type <b>BLOOD</b>		Drug Test Results <b>PENDING</b>	
		Drug Type					
		Individual Condition <b>UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL</b>					
		<b>Individual</b>					
		Passenger <b>JABRIEL E RODRIGUEZ</b> <b>(608) 408-0428</b>			Citations Issued <b>0</b>	Sex <b>MALE</b>	
					Date of Birth <b>08/14/2014</b>	Race <b>HISPANIC</b>	
		Address <b>401 N. WALNUT STREET APT. 401</b> <b>REEDSBURG, WI 53959 , US</b>			Driver License Number		
		01	002	<b>Safety Equipment</b>		On Duty Crash	
				Safety Equipment <b>SHOULDER &amp; LAP BELT</b>			
Row <b>02 - SECOND ROW</b>	Seat Position <b>08 - MIDDLE</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			
UNIT	INDIVIDUAL	<b>Distracted By</b>		Distracted By Source			
		Distracted By Action					
		<b>Non Motorist</b>		Striking Unit #	Location		

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT	INDIVIDUAL	Prior Action			
		Action			
		Action Other	To/From School		
01	002	<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>JASIALY E RODRIGUEZ</b>	Citations Issued <b>0</b>	Sex <b>FEMALE</b>	
			Date of Birth <b>02/12/2013</b>	Race <b>HISPANIC</b>	
		Address <b>401 N. WALNUT SREET APT. 401 REEDSBURG, WI 53959 , US</b>		Driver License Number	
		<b>Safety Equipment</b>	On Duty Crash	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
Row <b>02 - SECOND ROW</b>	Seat Position <b>09 - RIGHT</b>				
Helmet Use		Helmet Compliance			
Eye Protection		Tint Compliance			
01	003	<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					

WISCONSIN MOTOR VEHICLE  
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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>JONZIEL J RODRIGUEZ</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>	
			Date of Birth <b>11/21/2016</b>	Race <b>HISPANIC</b>	
Address <b>401 N. WALNUT STREET APT 401 REEDSBURG, WI 53959 , US</b>	Driver License Number				
UNIT	INDIVIDUAL	<b>Safety Equipment</b>	On Duty Crash	Safety Equipment	
		Row <b>02 - SECOND ROW</b>	Seat Position <b>07 - LEFT</b>	<b>CHILD RESTRAINT SYSTEM - FORWARD FACING</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					

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UNIT	INDIVIDUAL	Action				
		Action Other			To/From School	
	01	004	<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>			
	01	01	<b>Violations</b>			
			UTC Number <b>AP278386</b>	Issue To? <b>001</b>	Statute Number <b>346.63(1)(a)</b>	Description <b>OWI (1ST W/PASSENGER &lt; 16 YRS OLD)</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>PASSENGER CAR</b>				Operating As Endorsements		
	Total Occs <b>0</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>SOUTHBOUND</b>	<input type="checkbox"/> <b>Pre Crash Tire Mark</b>		Speed Limit <b>25</b>	Total Lanes <b>2</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>TWO-WAY, NOT DIVIDED</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>UPHILL</b>		
	Truck Bus or HazMat <b>NO</b>							

UNIT	02	<b>Vehicle</b>						
		License Plate Number <b>ALZ1865</b>		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>		
		Vehicle Identification Number <b>KL5JD56Z87K596393</b>		Make <b>SUZUKI</b>	Year <b>2007</b>	Model <b>FORENZA</b>		
		Color <b>BLK - BLACK</b>		Body Style <b>4D - 4DR</b>		Bus Use		
		Initial Contact Point <b>08 - LEFT SIDE REAR</b>		Vehicle Damage <b>08 - LEFT SIDE REAR, 09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT</b>				
		Extent Of Damage <b>DISABLING DAMAGE</b>		Vehicle Removed By <b>OPERATOR</b>				
Towed Due To Damage <b>NOT TOWED</b>								

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<b>UNIT</b>	<b>VEHICLE</b>	What Driver Was Doing <b>LEGALLY PARKED</b>	Vehicle Factors
		Driver Prior Action Other	<b>NOT APPLICABLE</b>
		Driver Actions <b>NO CONTRIBUTING ACTION</b>	
		Owner Name <b>CAITLYN M LUKE (608) 415-2050</b>	Owner Address <b>730 CLARK STREET REEDSBURG, WI 53959 , US</b>
<b>Sequence Of Events</b>			
<b>UNIT</b>	<b>VEHICLE</b>	01	Event <b>PARKED MOTOR VEHICLE</b>
		02	Event <b>MOTOR VEH IN TRANSPORT</b>
		03	Event
		04	Event
<b>Policy Holder</b>			
<b>UNIT</b>	<b>VEHICLE</b>	Insurance Company <b>STATE-FARM-GENERAL-INS-CO</b>	Individual <b>CAITLYN LUKE</b>