

9PL013B00H
R21-7559

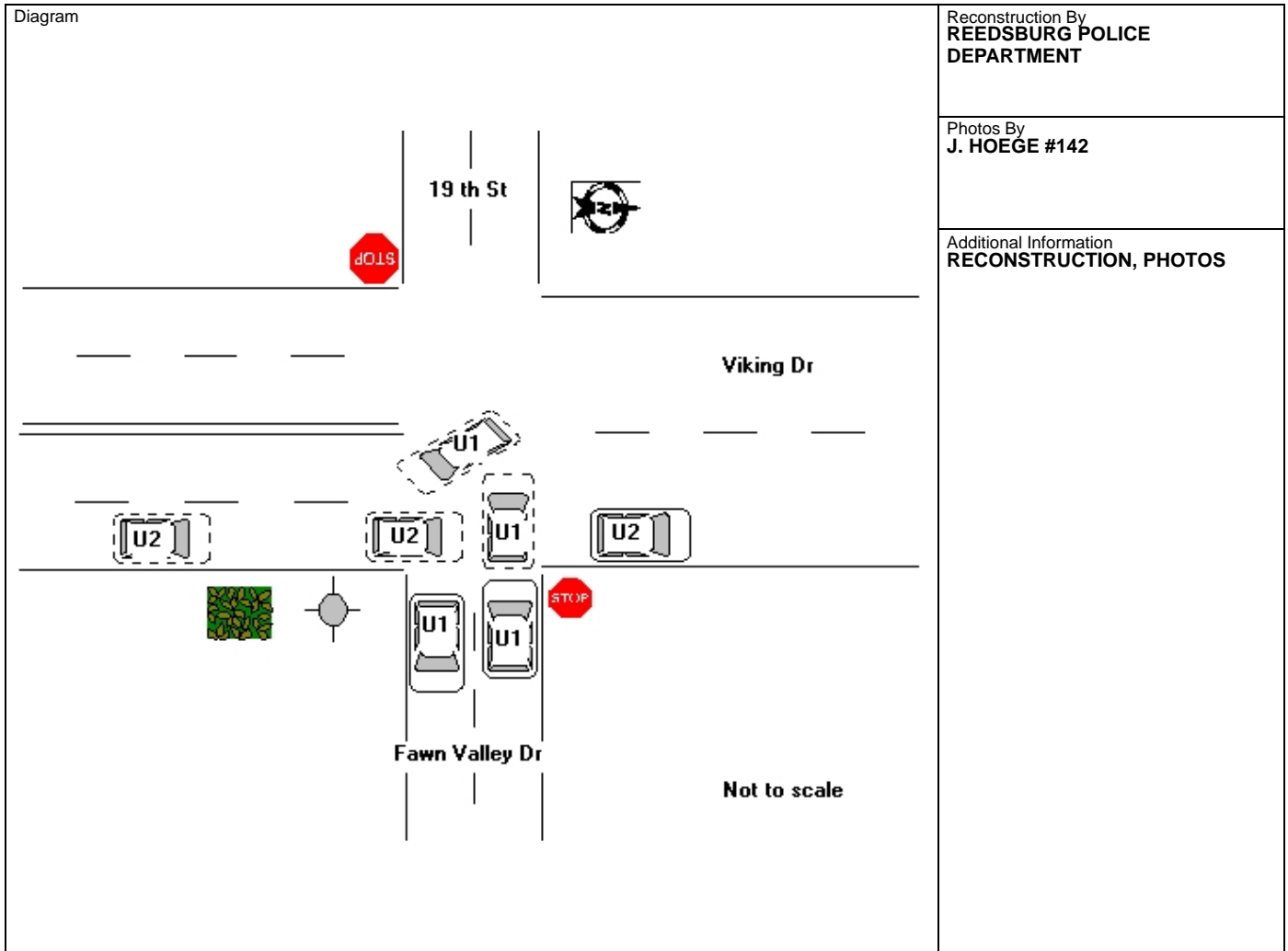
WISCONSIN MOTOR VEHICLE CRASH REPORT

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

9PL013B00H

Document Number Override		Primary Crash Document #	Agency Crash Number	Investigating Officer/Deputy J. HOEGE	
Crash Date 07/11/2021		Crash Time 10:14 AM	Date Arrived 07/11/2021	Time Arrived 10:17 AM	
Date Notified 07/11/2021		Time Notified 10:15 AM	Total Units 02	Total Injured 02	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



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

U1 WAS STOPPED AT A STOP SIGN WHILE U2 WAS TRAVELING NORTHBOUND. U1 DID NOT SEE U2 AND PROCEEDED FROM A STOPPED POSITION INTO THE NORTHBOUND LANE. U2 STRUCK U1. MINOR INJURIES REPORTED, PHOTOS AND STATEMENTS OBTAINED. SEE R21-7559 FOR FULL DETAILS.

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Location

ON VIKING DR/ CTHH NB 29 FT N OF FAWN VALLEY DR IN THE CITY OF REEDSBURG IN SAUK COUNTY	Latitude 43.547112103	Longitude -89.984517343
	X Coordinate 258900.703125	Y Coordinate 4825902
	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 NO CONTROL	Special Study
Within Interchange Area NO	Junction Location INTERSECTION	Intersection Type FOUR-WAY INTERSECTION	
Closure Type CLOSURE-ONE DIRECTION		Reasons for Closure LAW ENFORCEMENT, FIRE/EMS	
Date Initial Lane/Rd Closed 07/11/2021	Time Initial Lane/Rd Closed 10:14 AM	Date Scene Cleared 07/11/2021	
Date All Lanes Open 07/11/2021	Time All Lanes Open 10:35 AM		

Unit Summary

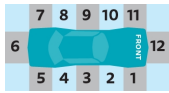
UNIT	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE		
	Vehicle Type PASSENGER CAR	Operating As Endorsements				
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 1	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre CrashTire 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					
	01	License Plate Number 513JCE	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
Vehicle Identification Number 4T1BG22K41U831960		Make TOYOTA	Year 2001	Model CAMRY CE/L		

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UNIT VEHICLE	Color WHI - WHITE	Body Style 4D - 4DR	Bus Use
	Initial Contact Point 08 - LEFT SIDE REAR	Vehicle Damage 07 - LEFT REAR CORNER, 08 - LEFT SIDE REAR, 09 - LEFT SIDE MIDDLE	
	Extent Of Damage DISABLING DAMAGE		
	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR	
	What Driver Was Doing ENTERING TRAFFIC LANE	Vehicle Factors NOT APPLICABLE	
	Driver Prior Action Other		
UNIT VEHICLE	Driver Actions FAILED TO YIELD RIGHT-OF-WAY, LOOKED BUT DID NOT SEE		
	Owner Name JOAN ALAINE SCHULTZ (608) 524-8772	Owner Address E6843 FAWN VALLEY DR REEDSBURG, WI 53959 , US	
UNIT 01	Sequence Of Events		
	01	Event MOTOR VEH IN TRANSPORT	
	02	Event MOTOR VEH IN TRANSPORT	
	03	Event MOTOR VEH IN TRANSPORT	
	04	Event MOTOR VEH IN TRANSPORT	
UNIT	Policy Holder		
	Insurance Company ACUITY,-A-MUTUAL-INSURANCE-CO	Individual JOAN SCHULTZ	
UNIT INDIVIDUAL	Individual		
	Driver JOAN ALAINE SCHULTZ (608) 524-8772	Citations Issued 1	Sex FEMALE
		Date of Birth 07/11/1941	Race WHITE
	Address E6843 FAWN VALLEY DR REEDSBURG, WI 53959 , US	Driver License Number S4324814175101 STATE: WISCONSIN COUNTRY: UNITED STATES	
UNIT 01	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	
	Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
001	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #

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UNIT	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						
Violations						
01	001	01	UTC Number AL859834	Issue To? 001	Statute Number 346.18(3)	Description FAIL/YIELD RIGHT/WAY FROM STOP SIGN (RESULTING BODILY HARM)

Unit Summary

UNIT	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type (SPORT) UTILITY VEHICLE				Operating As Endorsements	
	Total Occs 3	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 35	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 NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					
	Vehicle					
	License Plate Number ADX5826			Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES

02

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02	UNIT VEHICLE	Vehicle Identification Number KNMAT2MV8FP587061	Make NISSAN	Year 2015	Model ROGUE	
		Color BLK - BLACK	Body Style 4D - 4DR	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				
02	UNIT VEHICLE	Driver Actions NO CONTRIBUTING ACTION				
		Owner Name SONJA L KRUSCHKE (608) 963-1561	Owner Address S223 LYNDON RD WISCONSIN DELLS, WI 53965 , US			
Sequence Of Events						
01	Event	MOTOR VEH IN TRANSPORT				
02	Event	MOTOR VEH IN TRANSPORT				
03	Event	MOTOR VEH IN TRANSPORT				
04	Event	MOTOR VEH IN TRANSPORT				
02	UNIT	Policy Holder				
		Insurance Company MT-MORRIS-MUTUAL-INS-CO	Individual SONJA KRUSCHKE			
02	UNIT INDIVIDUAL	Individual				
		Driver SONJA L KRUSCHKE (608) 963-1561	Citations Issued 0	Sex FEMALE		
			Date of Birth 08/14/1969	Race WHITE		
		Address S223 LYNDON RD WISCONSIN DELLS, WI 53965 , US	Driver License Number K6207906979407 STATE: WISCONSIN COUNTRY: UNITED STATES			
02	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 SUSPECTED MINOR INJURY	Airbag DEPLOYED-COMBINATION			
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED		

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UNIT	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				
UNIT	Individual			
	Passenger NATHAN ROGER KRUSCHKE (608) 963-1561		Citations Issued 0	Sex MALE
	Address S223 LYNDON RD WISCONSIN DELLS, WI 53965 , US		Date of Birth 05/07/2003	Race WHITE
			Driver License Number K6206360316700 STATE: WISCONSIN COUNTRY: UNITED STATES	
	Safety Equipment	On Duty Crash	Safety Equipment	
	Row 02 - SECOND ROW	Seat Position 10 - UNKNOWN SE	SHOULDER & LAP BELT	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	Injury	Injury Severity NO APPARENT INJURY	Airbag DEPLOYED-COMBINATION	
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED
Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #	

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UNIT	Hospital		Date of Death		Time of Death		
	Distracted By		Distracted By Source				
	Distracted By Action						
	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		
02	003	Drug Type					
		Individual Condition APPEARED NORMAL					
		Individual					
		Passenger REBECCA L KRUSCHKE (608) 963-1561		Citations Issued 0		Sex FEMALE	
		Address S223 LYNDON RD WISCONSIN DELLS, WI 53965 , US		Date of Birth 03/14/2006		Race WHITE	
		Driver License Number					
		Safety Equipment		On Duty Crash		Safety Equipment	
		Row 01 - FRONT ROW		Seat Position 09 - RIGHT		SHOULDER & LAP BELT	
		Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
02	004	Injury		Injury Severity SUSPECTED MINOR INJURY		Airbag DEPLOYED-COMBINATION	
		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	

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UNIT	Distracted By		Distracted By Source		
	Distracted By Action				
	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				
02	004	Individual Condition			
		APPEARED NORMAL			