

9PL014K13P
R21-8283

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

9PL014K13P

Document Number Override		Primary Crash Document #		Agency Crash Number		Investigating Officer/Deputy R. WOLF	
Crash Date 07/29/2021		Crash Time 04:55 PM		Date Arrived 07/29/2021		Time Arrived 05:02 PM	
Date Notified 07/29/2021		Time Notified 04:55 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 PRIVATE PROPERTY/PARKING LOT				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

<p>Diagram</p>	Reconstruction By
	Photos By SGT WOLF
	Additional Information PHOTOS

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

UNIT ONE WAS WESTBOUND THROUGHT THE PARKING LOT. UNIT TWO WAS SOUTHBOUND THOUGHT THE PARKING LOT. UNIT ONE STRUCK UNIT TWO IN THE LEFT FRONT TIRE. NEITHER OPERATOR WAS INJURED. NOTHING FURTHER.

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Location

PARKING LOT STH23 WB LOT 100 (OTHER 100) IN THE CITY OF REEDSBURG IN SAUK COUNTY	Latitude 43.533582963	Longitude -89.981466014
	X Coordinate 259093.296875	Y Coordinate 4824390.5
	Structure Type OTHER	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location UNKNOWN	
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 NON TRAFFICWAY - PARKING LOT	
Crash Classification - Location PRIVATE PROPERTY	Crash Classification - Jurisdiction PRIVATE PROPERTY	
Tribal Land	Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location UNKNOWN	Intersection Type NOT AN INTERSECTION

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 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit N/A	Total Lanes 0	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function	Emergency Motor Vehicle Use NOT APPLICABLE		
	Traffic Way PARKING LOT OR PRIVATE PROPERTY		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

UNIT	VEHICLE	License Plate Number 583WJY	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
		Vehicle Identification Number 1FMCU9DG1CKA82029	Make FORD	Year 2012	Model ESCAPE	
		Color GLD - GOLD	Body Style UT - SPORT UTILITY VEHICLE		Bus Use	
		Initial Contact Point 01 - RIGHT FRONT CORNER	Vehicle Damage 01 - RIGHT FRONT CORNER, 12 - FRONT			
		Extent Of Damage MINOR DAMAGE				



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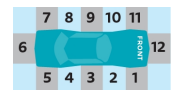
UNIT	Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER		
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions				
01	01	Owner Name DORIS MARIE SCHARA (608) 415-9491		Owner Address 107 SARA LN APT 10 MAUSTON, WI 53948 , US	
		Sequence Of Events			
UNIT	01	Event MOTOR VEH IN TRANSPORT			
		Event MOTOR VEH IN TRANSPORT			
		Event			
		Event			
UNIT	01	Policy Holder			
		Insurance Company GEICO-CASUALTY-CO	Individual DORIS SCHARA		
UNIT	01	Individual			
		Driver DORIS MARIE SCHARA (608) 415-9491	Citations Issued 0	Sex FEMALE	
		Address 107 SARA LN APT 10 MAUSTON, WI 53948 , US	Date of Birth 09/21/1963	Race WHITE	
		Driver License Number S6001736384106 STATE: WISCONSIN COUNTRY: UNITED STATES			
UNIT	01	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	
UNIT	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 #
		Hospital		Date of Death	Time of Death
		Distracted By			
Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		Distracted By Action NOT DISTRACTED			

UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location	
		Prior Action				
	Action					
	Action Other				To/From School	
	01	001	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 (SPORT) UTILITY VEHICLE		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 <input type="checkbox"/> Tire Mark	Speed Limit N/A	Total Lanes
		Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function	Emergency Motor Vehicle Use	
		Traffic Way PARKING LOT OR PRIVATE PROPERTY		Traffic Control NO CONTROL	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 344UHV	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number JTEES42A492146945	Make TOYOTA	Year 2009	Model HIGHLANDER
		Color WHI - WHITE	Body Style LL - CARRYALL		Bus Use
		Initial Contact Point 10 - LEFT SIDE FRONT	Vehicle Damage		
		Extent Of Damage FUNCTIONAL DAMAGE	10 - LEFT SIDE FRONT		
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By		



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UNIT VEHICLE	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions			
	Owner Name SHERRY LYNN ALLOWAY (608) 588-4026		Owner Address E4590 SHERWOOD DR SPRING GREEN, WI 53588 , 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 ALLMERICA-FINANCIAL-BENEFIT-INS-CO		Individual SHERRY ALLOWAY	
UNIT INDIVIDUAL	Individual			
	Driver SHERRY LYNN ALLOWAY (608) 588-4026		Citations Issued 0	Sex FEMALE
	Address E4590 SHERWOOD DR SPRING GREEN, WI 53588 , US		Date of Birth 02/11/1963	Race WHITE
			Driver License Number A4007926355107 STATE: WISCONSIN COUNTRY: UNITED STATES	
UNIT 02	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	