

9PL00NZLXN

21-1467

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

9PL00NZLXN

Document Number Override		Primary Crash Document #		Agency Crash Number		Investigating Officer/Deputy <b>J. WILLIAMS</b>	
Crash Date <b>02/05/2021</b>		Crash Time <b>11:54 AM</b>		Date Arrived <b>02/05/2021</b>		Time Arrived <b>11:58 AM</b>	
Date Notified <b>02/05/2021</b>		Time Notified <b>11:55 AM</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 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>J. WILLIAMS</b>
	Additional Information <b>NONE, PHOTOS</b>

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

UNIT 1 WAS OPERATING WESTBOUND ON E. MAIN ST AND STOPPED AT THE STOPLIGHT ON E. MAIN ST AT VIKING DR. UNIT 2 WAS FOLLOWING UNIT 1 WESTBOUND AND ATTEMPTED TO STOP HOWEVER COULD NOT DUE TO ICE ON THE ROADWAY. UNIT 2 SLID INTO THE REAR END OF UNIT 1. AFTER COMPLETION OF PAPERWORK, I CONFIRMED THERE WAS A LARGE AMOUNT OF ICE ON THE ROADWAY IN THE LOCATION THE CRASH OCCURRED. UNIT 2 WAS NOT ISSUED A CITATION GIVEN THE CIRCUMSTANCES.

9PL00NZLXN

21-1467

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

## Location

ON STH23 WB 64 FT E OF VIKING DR IN THE CITY OF REEDSBURG IN SAUK COUNTY	Latitude <b>43.532540524</b>	Longitude <b>-89.984421185</b>
	X Coordinate <b>258850.34375</b>	Y Coordinate <b>4824283</b>
	Structure Type <b>NO STRUCTURE</b>	

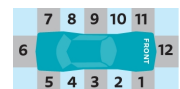
## Crash Scene

First Harmful Event	First Harmful Event Location	
Manner of Collision	Light Condition	
Road Surface Condition(s)	Roadway Factor(s)	
Environment Factor(s)		
Weather Condition(s)		
Animal Type	Relation To Trafficway	
Crash Classification - Location	Crash Classification - Jurisdiction	
Tribal Land	Access Control	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>INTERSECTION</b>	Intersection Type <b>FOUR-WAY 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>PASSENGER CAR</b>	Train/Bus # Recorded			Operating As Endorsements	
	Total Occs <b>1</b>	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>WESTBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>25</b>	Total Lanes <b>4</b>	
	Most Harmful Event: Collision With		Special Function	Emergency Motor Vehicle Use		
	Traffic Way <b>DIVIDED HWY MEDIAN W/BARRIER</b>	Traffic Control <b>TRAFFIC SIGNAL</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>			
	License Plate Number <b>AHU8916</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>1C3CDFB3GD607844</b>	Make <b>DODGE</b>	Year <b>2016</b>	Model <b>DART</b>
	Color <b>GRY - GRAY</b>	Body Style <b>4D - 4DR</b>	Bus Use	
	Initial Contact Point <b>06 - REAR</b>	Vehicle Damage <b>05 - RIGHT REAR CORNER, 06 - REAR, 07 - LEFT REAR CORNER</b>		
Extent Of Damage <b>FUNCTIONAL DAMAGE</b>				



WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>	
	What Driver Was Doing <b>STOP IN TRAFFIC</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
01	Owner Name <b>XAVIER E MELENDEZ DE JESUS</b>		Owner Address <b>2019 VIKING DR REEDSBURG, WI 53959 , US</b>	
	<b>Sequence Of Events</b>			
01 02 03 04	Event			
	Event			
	Event			
	Event			
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>PROGRESSIVE-CLASSIC-INS-CO</b>		Individual <b>XAVIER MELENDEZ DE JESUS</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>XAVIER E MELENDEZ DE JESUS</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
			Date of Birth <b>08/04/1982</b>	Race <b>WHITE</b>
	Address <b>2019 VIKING DR REEDSBURG, WI 53959 , US</b>		Driver License Number <b>M4539458228405 STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01 001	<b>Safety Equipment</b>		On Duty Crash	
			Safety Equipment	
	Row	Seat Position		
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	<b>Injury</b>		Injury Severity	
			Airbag	
	Ejected	Ejection Path		Trapped/Extricated
	Medical Transport		EMS Agency Identifier	EMS Run #
	Hospital		Date of Death	Time of Death
<b>Distracted By</b>		Distracted By Source		
Distracted By Action				

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	Suspected Drug Use	
			Alcohol Test Given	Alcohol Test Type	Alcohol Test Results		
			Drug Test Given	Drug Test Type	Drug Test Results		
			Drug Type				
			Individual Condition				

**Unit Summary**

UNIT	02	Unit Status	Vehicle Operating As Classification	Unit Type		
		<b>IN TRANSIT</b>	<b>D CLASS</b>	<b>TRUCK</b>		
		Vehicle Type	Operating As Endorsements			
		<b>STRAIGHT TRUCK (INSERT TRUCK)</b>				
		Total Occs	Train/Bus # Recorded	Total # Citations Issued	Total Trailers	Total HazMat Types
		<b>1</b>		<b>0</b>	<b>0</b>	<b>0</b>
		Insurance?	Direction Of Travel	<input type="checkbox"/> <b>Pre Crash Tire Mark</b>	Speed Limit	Total Lanes
		<b>YES</b>	<b>WESTBOUND</b>		<b>25</b>	<b>4</b>
Most Harmful Event: Collision With		Special Function	Emergency Motor Vehicle Use			
Traffic Way		Traffic Control	Traffic Control Inoperative/Missing			
<b>DIVIDED HWY MEDIAN W/BARRIER</b>		<b>TRAFFIC SIGNAL</b>	<b>NO</b>			
Surface Type		Road Curvature	Road Grade			
<b>BLACKTOP (BITUMINOUS)</b>		<b>STRAIGHT</b>	<b>LEVEL</b>			
Truck Bus or HazMat						
<b>TRUCK OR TRUCK COMBINATION &gt; 10,000LBS GVWR/GCWR</b>						

UNIT	VEHICLE	02	<b>Vehicle</b>			
			License Plate Number	Plate Type	St	Country of Issuance
			<b>2658016</b>	<b>APO - APPORTIONED</b>	<b>IN</b>	<b>UNITED STATES</b>
			Vehicle Identification Number	Make	Year	Model
			<b>3ALACXFC4JDJS1438</b>	<b>FREIGHTLINER CORP</b>	<b>2018</b>	
			Color	Body Style	Bus Use	
<b>WHI - WHITE</b>	<b>2D - 2DR</b>					
Initial Contact Point	Vehicle Damage					
<b>12 - FRONT</b>	<b>01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT</b>					
Extent Of Damage	Vehicle Removed By					
<b>FUNCTIONAL DAMAGE</b>	<b>OPERATOR</b>					
Towed Due To Damage						
<b>NOT TOWED</b>						

9PL00NZLXN

21-1467

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

UNIT VEHICLE	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>FAILURE TO CONTROL</b>			
	Owner Name <b>RYDER TRANSPORTATION SERVICES</b>		Owner Address , ,	
UNIT 01	<b>Sequence Of Events</b>			
	Event			
	Event			
	Event			
	Event			
UNIT 02	<b>Policy Holder</b>			
	Insurance Company <b>AMERICAN-GUARANTEE-&amp;-LIABILITY-INS-CO</b>		Organization/Company <b>RYDER TRANSPORTATION SERVICES</b>	
	<b>Individual</b>			
UNIT INDIVIDUAL	Driver <b>LYNN A TURNER (608) 963-7300</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
	Address <b>S3082 SOUTHSLOPE DR REEDSBURG, WI 53959 , US</b>		Date of Birth <b>11/11/1965</b>	Race <b>WHITE</b>
			Driver License Number <b>T6565216541102 STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
UNIT 02 002	<b>Safety Equipment</b>		On Duty Crash	
	Row <b>01 - FRONT ROW</b>		Seat Position	
	Helmet Use		Safety Equipment	
	Eye Protection		Helmet Compliance	
	<b>Injury</b>		Injury Severity	
	Ejected		Airbag	
	Ejection Path		Trapped/Extricated	
	Medical Transport		EMS Agency Identifier	
	Hospital		EMS Run #	
	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				

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT	INDIVIDUAL	Prior Action				
		Action				
		Action Other			To/From School	
	02	002	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use	Suspected Drug Use
			Alcohol Test Given	Alcohol Test Type	Alcohol Test Results	
			Drug Test Given	Drug Test Type	Drug Test Results	
			Drug Type			
			Individual Condition			
	UNIT	TRUCK BUS	<b>Carrier</b>			
			<input checked="" type="checkbox"/> Use Vehicle Owner Same as Carrier	Source <b>VEHICLE-SIDE</b>		
Name <b>RYDER TRANSPORTATION SERVICES USDOT# 113939</b>			Address , ,			
GVWR			Vehicle Configuration <b>VEHICLE 10,000 LBS OR LESS PLACARDED FOR HAZ</b>	Cargo Body Type		
US DOT # <b>113939</b>			Carrier Type	Permitted Load		
<input type="checkbox"/> OS/OW Load			WI Permit Number	<input type="checkbox"/> Permitted Vehicle On Permitted Route	<input type="checkbox"/> Escort Vehicle Required By Permit	<input type="checkbox"/> Escort Vehicle Present
Measured Height	Measured Length	Measured Width	Measured Weight			