

9PL00NZLXP
R21-1828

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

9PL00NZLXP

Document Number Override		Primary Crash Document #	Agency Crash Number	Investigating Officer/Deputy J. WILLIAMS	
Crash Date 02/16/2021		Crash Time 11:40 AM	Date Arrived 02/16/2021	Time Arrived 05:24 PM	
Date Notified 02/16/2021		Time Notified 05:22 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 type="checkbox"/> Reportable	Crash Type DT4000 (STANDARD CRASH)			<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

<p>Diagram</p>	Reconstruction By
	Photos By J. WILLIAMS
	Additional Information NONE, PHOTOS

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

UNIT 1 WAS TRAVELING WESTBOUND IN THE OUTSIDE LANE IN FRONT OF 2075 E. MAIN ST. ANOTHER VEHICLE TRAVELING IN THE WESTBOUND INSIDE LANE STOPPED IN THE LANE OF TRAFFIC AND SIGNALLED TO UNIT 2 TO WHO WAS FACING EASTBOUND WAITING TO TURN LEFT INTO THE DRIVEWAY OF 2075 E. MAIN ST. UNIT 2 BEGAN TO MAKE THE LEFT TURN INTO THE DRIVEWAY OF 2075 E. MAIN ST HOWEVER IT DID NOT YIELD TO UNIT 1 IN THE OUTSIDE LANE WHO WAS TRAVELING WESTBOUND. UNIT 1 STRUCK THE REAR PASSENGER SIDE WHEEL AREA ON UNIT 2. DUE TO THE OTHER VEHICLE'S POSITION ON THE ROADWAY WHO WAS FLAGGING UNIT 2 TO MAKE THE TURN, UNIT 2 COULD NOT SEE UNIT 1 TRAVELING.

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Location

ON STH23 WB 369 FT E OF STH23 WB IN THE CITY OF REEDSBURG IN SAUK COUNTY	Latitude 43.532570288	Longitude -89.978612359
	X Coordinate 259319.859375	Y Coordinate 4824269.5
	Structure Type NO STRUCTURE	

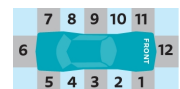
Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 01 - ANGLE	Light Condition DAWN	
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 NON-JUNCTION	Intersection Type NOT AN INTERSECTION

Unit Summary

UNIT 01	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 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 35	Total Lanes 4
	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				

UNIT VEHICLE 01	Vehicle			
	License Plate Number 483CCX	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 2C4RDGBG7HR563739	Make DODGE	Year 2017	Model CARAVAN
	Color MAR - MAROON (BURGUNDY)	Body Style VN - VAN		Bus Use
	Initial Contact Point 01 - RIGHT FRONT CORNER	Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 12 - FRONT		
Extent Of Damage FUNCTIONAL DAMAGE				



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UNIT	VEHICLE	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR		
		What Driver Was Doing GOING STRAIGHT	Vehicle Factors		
		Driver Prior Action Other	NOT APPLICABLE		
		Driver Actions NO CONTRIBUTING ACTION			
01	Owner Name ELIZABETH C MEYER (608) 495-1326	Owner Address E7436A FAIRWAY CT REEDSBURG, WI 53959 , US			
	Sequence Of Events				
01	Event MOTOR VEH IN TRANSPORT				
	Event MOTOR VEH IN TRANSPORT				
	Event				
	Event				
UNIT	Policy Holder				
	Insurance Company AUTO-OWNERS-INS-CO	Individual ELIZABETH MEYER			
UNIT	Individual				
	Driver ELIZABETH C MEYER (608) 495-1326	Citations Issued 0	Sex FEMALE		
		Date of Birth 05/09/1980	Race WHITE		
	Address E7436A FAIRWAY CT REEDSBURG, WI 53959 , US	Driver License Number M6002238066908 STATE: WISCONSIN COUNTRY: UNITED STATES			
01	Safety Equipment	On Duty Crash	Safety Equipment		
		Row 01 - FRONT ROW	Seat Position	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		
Distacted By	Distacted By Source NOT APPLICABLE (NOT DISTRACTED)				
	Distacted By Action NOT DISTRACTED				

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UNIT 01 001	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				

Unit Summary

UNIT 02	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 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 35	Total Lanes 4	
	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					

UNIT 02 VEHICLE	Vehicle					
	License Plate Number ADD9977		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number 1G1AT58H897221622		Make CHEVROLET	Year 2009	Model COBALT	
	Color SIL - SILVER (ALUMINUM)		Body Style 4D - 4DR		Bus Use	
	Initial Contact Point 05 - RIGHT REAR CORNER		Vehicle Damage 04 - RIGHT SIDE REAR, 05 - RIGHT REAR CORNER			
	Extent Of Damage FUNCTIONAL DAMAGE					
Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR				

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UNIT	VEHICLE	What Driver Was Doing LEFT TURN	Vehicle Factors	
		Driver Prior Action Other	NOT APPLICABLE	
02	VEHICLE	Driver Actions FAILED TO YIELD RIGHT-OF-WAY		
		Owner Name BRIAN R CAMPBELL (608) 963-6912	Owner Address E9672 SOUTH AVE WISCONSIN DELLS, WI 53965 , US	
Sequence Of Events				
UNIT	01	Event MOTOR VEH IN TRANSPORT		
	02	Event MOTOR VEH IN TRANSPORT		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company AMERICAN-FAMILY-INS-CO		Individual BRIAN CAMPBELL	
UNIT	Individual			
	INDIVIDUAL	Driver ASHLEY L CAMPBELL (608) 415-8678	Citations Issued 0	Sex FEMALE
		Date of Birth 05/17/2003		Race WHITE
	Address E9672 SOUTH AVE WISCONSIN DELLS, WI 53965 , US		Driver License Number C5140120367704 STATE: WISCONSIN COUNTRY: UNITED STATES	
Safety Equipment				
02	002	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	

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UNIT	INDIVIDUAL		
	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	