

9PL013B00D
R21-1715

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

9PL013B00D

Document Number Override		Primary Crash Document #	Agency Crash Number	Investigating Officer/Deputy J. HOEGE	
Crash Date 02/13/2021		Crash Time 12:06 PM	Date Arrived 02/13/2021	Time Arrived 12:06 PM	
Date Notified 02/13/2021		Time Notified 12:06 PM	Total Units 01	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 PRIVATE PROPERTY/PARKING LOT		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

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

Location

PARKING LOT STH23 WB LOT 2075 (OTHER 2075) IN THE CITY OF REEDSBURG IN SAUK COUNTY	Latitude 43.533075268	Longitude -89.977682003
	X Coordinate 259397.046875	Y Coordinate 4824323
	Structure Type OTHER	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location OFF ROADWAY, LOCATION UNKNOWN	
Manner of Collision OTHER	Light Condition DAYLIGHT	
Road Surface Condition(s) SNOW, ICE	Roadway Factor(s) ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)	
Environment Factor(s) WEATHER CONDITIONS		
Weather Condition(s) CLOUDY, SNOW, BLOWING SNOW		
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 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 (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 CrashTire Mark	Speed Limit 05	Total Lanes 2	
	Most Harmful Event: Collision With OTHER POST, POLE OR SUPPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way PARKING LOT OR PRIVATE PROPERTY		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	

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Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT	Road Grade LEVEL	
Truck Bus or HazMat NO				
Vehicle				
UNIT VEHICLE 01	License Plate Number AAL1732	Plate Type AUT - AUTOMOBILE	St WI	
	Country of Issuance UNITED STATES	Year 2014	Model MKX AWD	
	Vehicle Identification Number 2LMDJ8JK2EBL16597	Make LINCOLN	Body Style LL - CARRYALL	Bus Use
	Color BLK - BLACK	Initial Contact Point 11 - LEFT FRONT CORNER		
	Extent Of Damage DISABLING DAMAGE	Vehicle Damage 10 - LEFT SIDE FRONT		
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By		
	What Driver Was Doing NEGOTIATING CURVE	Vehicle Factors		
	Driver Prior Action Other	NOT APPLICABLE		
	Driver Actions OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER, SWERVED OR AVOIDED DUE TO WIND, SLIPPERY SURFACE, MOTOR VEHICLE, OBJECT, NON-MOTORIST IN ROADWAY, ETC., LOOKED BUT DID NOT SEE			
	Owner Name WADE DOYLE PETERSON (608) 397-0251	Owner Address S3714 S BENT TREE DR BARABOO, WI 53913 , US		
Sequence Of Events				
01	Event MOTOR VEH IN TRANSPORT			
02	Event MOTOR VEH IN TRANSPORT			
03	Event MOTOR VEH IN TRANSPORT			
04	Event OTHER POST, POLE OR SUPPORT			
Policy Holder				
Insurance Company		Individual WADE PETERSON		
Individual				
UNIT INDIVIDUAL	Driver GABRIELLE ROSE PETERSON	Citations Issued 0	Sex FEMALE	
		Date of Birth 12/21/1999	Race WHITE	
	Address S3714 S BENT TREE DR BARABOO, WI 53913 , US	Driver License Number P3622969996100 STATE: WISCONSIN COUNTRY: UNITED STATES		
	Safety Equipment SHOULDER & LAP BELT		On Duty Crash	
Safety Equipment		Row 01 - FRONT ROW	Seat Position 07 - LEFT	

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01	001	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 OTHER DISTRACTION (ANIMAL, FOOD, GROOMING)				
				Distracted By Action OTHER ACTION (LOOKING AWAY FROM TASK ETC)				
		Non Motorist		Striking Unit #		Location		
				Prior Action				
UNIT	INDIVIDUAL	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				
		01	001					