

6TL0B4X4NX
20-11606

WISCONSIN MOTOR VEHICLE
CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMENT
1300 LANGE COURT
BARABOO, WI 53913
(608) 356-4895

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Document Number Override		Primary Crash Document#		Agency Crash Number 20-11606		Investigating Officer/Deputy DEPUTY E. KNULL	
Crash Date 09/28/2020		Crash Time 06:44 AM		Date Arrived 09/28/2020		Time Arrived 06:54 AM	
Date Notified 09/28/2020		Time Notified 06:44 AM		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 checked="" 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

Diagram	Reconstruction By
	Photos By
	Additional Information NONE

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

UNIT 1 SB ON USH 12 AND UNIT 2 WAS NB ON USH 12 IN THE CONSTRUCTION ZONE. UNIT 1 OPERATOR ADMITTED TO DOZING OFF WHILE DRIVING. UNIT 1 CROSSED THE CENTERLINE AND STRUCK THE REAR DRIVERS SIDE OF UNIT 2. UNIT 1 CAME TO REST IN THE EAST SIDE DITCH FACING NORTHEAST. UNIT 2 CAME TO REST IN THE MEDIAN FACING NORTH. BOTH VEHICLES SUSTAINED DISABLING DAMAGE AND WERE BOTH REMOVED BY EVERETTES TOWING. NO INJURIES REPORTED BY EITHER PARTY. OPERATOR OF UNIT 1 CITED FOR OWI, OPERATE LEFT OF CENTER AND INATTENTIVE DRIVING.

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UNIT VEHICLE	Color	MAR - MAROON (BURGUNDY)	Body Style	CP - COUPE	Bus Use	
	Initial Contact Point	11 - LEFT FRONT CORNER	Vehicle Damage	11 - LEFT FRONT CORNER, 12 - FRONT		
	Extent Of Damage	DISABLING DAMAGE				
	Towed Due To Damage	TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By	EVERETTS TOWING		
	What Driver Was Doing	GOING STRAIGHT	Vehicle Factors	NOT APPLICABLE		
	Driver Prior Action Other					
UNIT VEHICLE	Driver Actions	FAILED TO KEEP IN DESIGNATED LANE, OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER				
	Owner Name	RHIANA L STOWELL (608) 393-0172	Owner Address	S7262 CAMP LAKE WISCONSIN RD MERRIMAC, WI 53561 , US		
UNIT VEHICLE	Sequence Of Events					
	Event	CROSS CENTERLINE				
	Event	MOTOR VEH IN TRANSPORT				
	Event	DITCH				
UNIT VEHICLE	Event					
	Policy Holder					
UNIT VEHICLE	Insurance Company	ALLSTATE-INS-CO	Individual	RHIANA STOWELL		
	Individual					
UNIT INDIVIDUAL	Driver	XAVIER J JACZYNSKI (608) 393-3668	Citations Issued	3	Sex	MALE
			Date of Birth		Race	WHITE
	Address	S7262 CAMP LAKE WISCONSIN RD MERRIMAC, WI 53561 , US	Driver License Number	STATE: WISCONSIN COUNTRY: UNITED STATES		
UNIT INDIVIDUAL	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	DEPLOYED-FRONT
UNIT INDIVIDUAL	Ejected	NOT EJECTED	Ejection Path	NOT EJECTED/NOT APPLICABLE		Trapped/Extricated
	Medical Transport	NOT TRANSPORTED		EMS Agency Identifier	EMS Run #	

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UNIT 02	VEHICLE	Vehicle			
		License Plate Number ADK9567	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1G1PG5SB3G7196449	Make CHEVROLET	Year 2016	Model CRUZE
		Color WHI - WHITE	Body Style SD - SEDAN	Bus Use	
		Initial Contact Point 08 - LEFT SIDE REAR	Vehicle Damage		
		Extent Of Damage DISABLING DAMAGE	08 - LEFT SIDE REAR		
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By EVERETTS TOWING		
		What Driver Was Doing GOING STRAIGHT	Vehicle Factors		
		Driver Prior Action Other	NOT APPLICABLE		
		Driver Actions NO CONTRIBUTING ACTION			
UNIT 02	VEHICLE	Owner Name AUSTIN P BROZAK (608) 370-4558	Owner Address 7951 STH 188 SAUK CITY, WI 53583 , US		
		Sequence Of Events			
UNIT 01 02 03 04	Event MOTOR VEH IN TRANSPORT				
	Event DITCH				
	Event				
	Event				
UNIT 02	INDIVIDUAL	Policy Holder			
		Insurance Company RURAL-MUTUAL-INS-CO-(ATTN:-CLAIMS-DEPT)	Individual CASSIE BROZAK		
UNIT 02	INDIVIDUAL	Driver CASSIE E BROZAK (608) 477-1139	Citations Issued 0	Sex FEMALE	
			Date of Birth [REDACTED]	Race WHITE	
		Address 7951 STH 188 SAUK CITY, WI 53583 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES		
UNIT 02	INDIVIDUAL	Safety Equipment		On Duty Crash	
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	Safety Equipment SHOULDER & LAP BELT	
		Helmet Use		Helmet Compliance	
		Eye Protection		Tint Compliance	

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02 002	002	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 #		
		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	
02 002	002	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					