WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | Document Number Override | Primary Crash Document# Crash Time 07:31 PM Time Notified 07:31 PM it and Run Lane Closu | | Agency Crash Number 20-12172 Date Arrived 10/15/2020 Total Units 03 ure Work Zone | | Investigating Officer/Deputy DEPUTY A. KULAS Time Arrived 07:37 PM | | | |
|-----|---------------------------------|--|----------------------------------|--|------|--|-------|--|------------------------|
| 10F | Crash Date 10/15/2020 | | | | | | | | |
| Ž | Date Notified 10/15/2020 | | | | | Total Injured 02 | 1 - 1 | | |
| 0 | On Emergency Hi | | | | | Trailer or | Towed | | Reporting Threshold |
| 6TL | Government Active | | chool Zone School Bus Related NO | | Tags | | | | |
| | Crash Tyş DT4000 Crash Tyş | | NDARD CRASH |) | | Amended | | | Secondary Crash |

Diagram

Not to scale

Signal

Shady Lane Rd

Reconstruction By

Photos By S STEINHORST

Additional Information NONE, PHOTOS

Crash Date 10/15/2020

Crash Time 07:31 PM

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

UNIT 1 WAS WEST BOUND ON SHADY LN RD. UNIT 1 FAILED TO STOP FOR A STOP SIGN AND PROCEEDED INTO THE INTERSECTION OF CTH BD. UNIT 2 WAS SOUTH BOUND ON CTH BD AND STRUCK UNIT 1 IN A T BONE COLLISION. UNIT 3 WAS EAST BOUND ON SHADY LN RD AND WAS STOPPED FOR A STOP SIGN. UNIT 2 STRUCK UNIT 3. UNIT 1 SPUN AND ENTERED THE SW DITCH AND CAME TO A REST. THE OPERATOR OF UNIT 1 STATED HE MISSED THE STOP SIGN SEVERAL TIMES.

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 10/15/2020

| | Location | | | | | | 1 | |
|---------|--|------------------------------------|--|---------------------------------|-----------------------------|--|-------------------------------|-------------|
| 1 | ON USH12 WB 4 FT N | | | Latitude | 12004 | | Longitude | |
| | OF SHADY LANE RD | | | | 16231 | | -89.78730579 | |
| | IN THE TOWN OF DELTO | N | | X Coordii 274832. | 4375 | | Y Coordinate 4825338 | |
| | | | | I | Structure Type NO STRUCTURE | | | |
| (| Crash Scene 💻 | | | | | | | |
| 1 | First Harmful Event | | | FirstHarr | nful Event Lo | cation | | |
| | MOTOR VEH IN TRANSP | ORT | | ON ROA | DWAY | | | |
| | Manner of Collision | | | Light Cor | dition | | | |
| | 02 - FRONT TO FRONT | | | DARK/U | INLIT | | | |
| | Road Surface Condition(s) | | | Roadway | /Factor(s) | | | |
| | DRY | | | | | | | |
| | Environment Factor(s) | | | | | | | |
| | NONE | | | NONE | | | | |
| | Weather Condition(s) | | | | | | | |
| | CLEAR | | | | | | | |
| | Animal Type | | | | To Trafficway | | | |
| | | | | | CWAY - ON | | | |
| | Crash Classification - Location PUBLIC PROPERTY | n. | | | ssification | | | |
| | Tribal Land | | | Access C | | | Spec | ial Study |
| | | | | NO CON | ITROL | | | , |
| | Within Interchange Area NO | Junction Location INTERSECTION | | Intersection Type FOUR-WAY INTE | RSECTION | | | |
| ĺ | Unit Summary 💻 | | | | | | | |
| | Unit Status | | Vehicle Oper | ating As Classification | n | UnitType | | |
| | IN TRANSIT | | D CLASS | | | AUTOMOI | | |
| 01 | Vehicle Type PASSENGER CAR | | | | | Operating A | s Endorsements | |
| _ | Total Occs | Train/Bus#Recorded | Total#Citatio | and leaved | Total Traile |) re | Total HazMat Ty | nos |
| | 1 | Trail#Bus#Recorded | 1 otal#Citatio | ns issued | 0 | 515 | 0 | hes |
| | Insurance? | Direction Of Travel | | rashTire | Speed Lim | nit | TotalLanes | |
| | YES | WESTBOUND | Special Func | Mark | 45 | | 2 | |
| | Most Harmful Event: Collision MOTOR VEH IN TRANSP | Most Harmful Event: Collision With | | | | Emergency Motor Vehicle Use NOT APPLICABLE | | |
| | recording industry | ORI | NO SPECIA | AL FUNCTION | | | , | |
| | Traffic Way | | Traffic Contro | ol | | Traffic Cont | rol Inoperative/Mi | ssing |
| | Traffic Way TWO-WAY, NOT DIVIDED | | Traffic Contro | ol I | | Traffic Cont | rol Inoperative/Mi | ssing |
| | Traffic Way TWO-WAY, NOT DIVIDED Surface Type |) | Traffic Contro STOP SIGN Road Curvatu | ol i | | Traffic Cont NO Road Grade | rol Inoperative/Mi | ssing |
| | Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOU |) | Traffic Contro | ol i | | Traffic Cont | rol Inoperative/Mi | ssing |
| | Traffic Way TWO-WAY, NOT DIVIDED Surface Type |) | Traffic Contro STOP SIGN Road Curvatu | ol i | | Traffic Cont NO Road Grade | rol Inoperative/Mi | ssing |
| | Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOU Truck Bus or HazMat |) | Traffic Contro STOP SIGN Road Curvatu | ol i | | Traffic Cont NO Road Grade | rol Inoperative/Mi | ssing |
| | Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOU Truck Bus or HazMat NO |) | Traffic Control STOP SIGN Road Curvatu STRAIGHT | ol L Ure | St | Traffic Cont NO Road Grade LEVEL | rol Inoperative/Mi | ssing |
| | Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOU Truck Bus or HazMat NO Vehicle License Plate Number 924JBY | US) | Traffic Control STOP SIGN Road Curvate STRAIGHT Plate Type AUT - AUT | ol L Ure | WI | Traffic Cont NO Road Grade LEVEL Country of Is | rol Inoperative/Mi | ssing |
| | Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOU Truck Bus or HazMat NO Vehicle License Plate Number 924JBY Vehicle Identification No | US) | Traffic Control STOP SIGN Road Curvate STRAIGHT Plate Type AUT - AUT Make | ol L Ure | WI Year | Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST | suance | ssing |
| LO | Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOU) Truck Bus or HazMat NO Vehicle License Plate Number 924JBY Vehicle Identification Nu 4S4BRCCC2E33041 | US) | Plate Type AUT - AUT Make SUBARU | ol L Ure | WI | Traffic Cont NO Road Grade LEVEL Country of is UNITED ST Model OUTBACK | suance | ssing |
| 01 | Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOU) Truck Bus or HazMat NO Vehicle License Plate Number 924JBY Vehicle Identification Nu 4S4BRCCC2E33041 Color | US) | Plate Type AUT - AUT Make SUBARU Body Style | ol i ure | WI Year | Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST | suance | ssing |
| | Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOU) Truck Bus or HazMat NO Vehicle License Plate Number 924JBY Vehicle Identification Not 4S4BRCCC2E33041 Color GRY - GRAY Initial Contact Point | US) | Plate Type AUT - AUT Make SUBARU Body Style | TOMOBILE | WI Year | Traffic Cont NO Road Grade LEVEL Country of is UNITED ST Model OUTBACK | suance | ssing |
| | Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOU) Truck Bus or HazMat NO Vehicle License Plate Number 924JBY Vehicle Identification Not 4S4BRCCC2E33041 Color GRY - GRAY Initial Contact Point | Umber | Plate Type AUT - AUT Make SUBARU Body Style 4H - HATC Vehicle Dam | OMOBILE CHBACK 4 DOOR | WI Year 2014 | Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST Model OUTBACK Bus Use | suance | |
| UNIT 01 | Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOU) Truck Bus or HazMat NO Vehicle License Plate Number 924JBY Vehicle Identification Nu 4S4BRCCC2E33041 Color GRY - GRAY Initial Contact Point | Umber | Plate Type AUT - AUT Make SUBARU Body Style 4H - HATC Vehicle Dam 01 - RIGHT | TOMOBILE | WI Year 2014 | Traffic Contino NO Road Grade LEVEL Country of Is UNITED ST Model OUTBACK Bus Use | suance FATES CONT, 03 - RIGH | IT SIDE |

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 10/15/2020

| | | Towed Due To Damage TOWED DUE TO DISABLI | NG DAMAGE | Vehicle Removed By BILLS TOWING | | | | |
|------|--------------|---|--|--|--|--|--|--|
| | | What Driver Was Doing GOING STRAIGHT | | Vehicle Factors | | | | |
| | | Driver Prior Action Other | | NOT APPLICABLE | | | | |
| UNIT | VEHICLE | Driver Actions DISREGARDED STOP SIG | | | | | | |
| 10 | -01 | OwnerName BRIAN T ZAGER (920) 284-1669 | | Owner Address 1600 MEADOWBREEZE CIR NEENAH, WI 54956 , US | | | | |
| | | Sequence Of Events | | | | | | |
| | 5 | Event MOTOR VEH IN TRANSPO | ORT | | | | | |
| | 02 | Event | | | | | | |
| | 03 | Event | | | | | | |
| | 770 | Event | | | | | | |
| _ | | Policy Holder | | | | | | |
| INN | | Insurance Company CARY WILDER INS | | Individual BRIAN ZAGER | | | | |
| | | 1 | | I | | | | |
| | | | VIII. | | | | | |
| | | Individual | | | | | | |
| | | Driver | | Citations ssued | Sex | | | |
| | | Driver BENJAMIN B ZAGER | | | | | | |
| E | | Driver | | Citations Issued | Sex | | | |
| TINO | INDIVIDUAL | Driver BENJAMIN B ZAGER | | Citations Issued | Sex MALE Race WHITE | | | |
| TINO | INDIVIDUAL | Driver BENJAMIN B ZAGER (920) 268-7242 Address 1600 MEADOWBREEZE C NEENAH, WI 54956 , US | CIR | Citations issued 1 Date of Birth Driver License Number | Sex MALE Race WHITE | | | |
| LIND | INDIVIDUAL | Driver BENJAMIN B ZAGER (920) 268-7242 Address 1600 MEADOWBREEZE C NEENAH, WI 54956 , US | CIR | Citations issued 1 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN | Sex MALE Race WHITE | | | |
| TINO | INDIVIDUAL | Driver BENJAMIN B ZAGER (920) 268-7242 Address 1600 MEADOWBREEZE C NEENAH, WI 54956 , US Tety Equipment Row | Crash Seat Position | Citations issued 1 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment | Sex MALE Race WHITE | | | |
| TINO | INDIVIDUAL | Driver BENJAMIN B ZAGER (920) 268-7242 Address 1600 MEADOWBREEZE C NEENAH, WI 54956 , US Fety Equipment Row 01 - FRONT ROW | Crash Seat Position | Citations issued 1 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT | Sex MALE Race WHITE | | | |
| | g INDIVIDUAL | Driver BENJAMIN B ZAGER (920) 268-7242 Address 1600 MEADOWBREEZE C NEENAH, WI 54956 , US On Duty On Duty On Duty Helmet Use Eye Protection | Crash Seat Position 07 - LEFT | Citations issued 1 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance | Sex MALE Race WHITE | | | |
| | INDIVIDUAL | Driver BENJAMIN B ZAGER (920) 268-7242 Address 1600 MEADOWBREEZE C NEENAH, WI 54956 , US On Duty Fety Equipment Row 01 - FRONT ROW HelmetUse Eye Protection Injury Se | Crash Seat Position 07 - LEFT | Citations issued 1 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance | Sex MALE Race WHITE IITED STATES | | | |
| | g INDIVIDUAL | Driver BENJAMIN B ZAGER (920) 268-7242 Address 1600 MEADOWBREEZE C NEENAH, WI 54956 , US On Duty On Duty On Duty Helmet Use Eye Protection | Crash Seat Position 07 - LEFT | Citations issued 1 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag DEPLOYED-CURTAIN | Sex MALE Race WHITE | | | |
| | g INDIVIDUAL | Driver BENJAMIN B ZAGER (920) 268-7242 Address 1600 MEADOWBREEZE C NEENAH, WI 54956 , US On Duty Tety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Suspe Ejected | Seat Position 07 - LEFT EVERTLY EXECUTED MINOR INJURY Ejection Path | Citations issued 1 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag DEPLOYED-CURTAIN | Sex MALE Race WHITE IITED STATES | | | |
| | g INDIVIDUAL | Driver BENJAMIN B ZAGER (920) 268-7242 Address 1600 MEADOWBREEZE C NEENAH, WI 54956 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Se SUSPE Ejected NOT EJECTED Medical Transport | Seat Position 07 - LEFT EVERTLY EXECUTED MINOR INJURY Ejection Path | Citations issued 1 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag DEPLOYED-CURTAIN PLICABLE EMS Agency Identifier | Sex MALE Race WHITE IITED STATES Trapped/Extricated NOT TRAPPED | | | |
| | g INDIVIDUAL | Driver BENJAMIN B ZAGER (920) 268-7242 Address 1600 MEADOWBREEZE C NEENAH, WI 54956 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Se SUSPE Ejected NOT EJECTED Medical Transport EMS GROUND Hospital ST CLARE HOSP | Seat Position 07 - LEFT EVERTLY EXECUTED MINOR INJURY Ejection Path NOT EJECTED/NOT API | Citations issued 1 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag DEPLOYED-CURTAIN PLICABLE EMS Agency Identifier 6000123 Date of Death | Sex MALE Race WHITE IITED STATES Trapped/Extricated NOT TRAPPED EMS Run# | | | |
| | g INDIVIDUAL | Driver BENJAMIN B ZAGER (920) 268-7242 Address 1600 MEADOWBREEZE CONEENAH, WI 54956 , US On Duty On Duty | Seat Position 07 - LEFT EVERTLY EXECUTED MINOR INJURY Ejection Path NOT EJECTED/NOT API | Citations issued 1 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag DEPLOYED-CURTAIN PLICABLE EMS Agency Identifier 6000123 Date of Death | Sex MALE Race WHITE IITED STATES Trapped/Extricated NOT TRAPPED EMS Run# | | | |

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 10/15/2020

| | | Non Motorist | Striking Unit# | Location | | | | |
|--|--|---|--|-----------------------------|--|---|---|--|
| | | Prior Action | | | | | | |
| <u> </u> | | | | | | | | |
| | | Action | | | | | | |
| | | | | | | | | |
| <u>. </u> | 5 | | | | | | | |
| UNIT | INDIVIDUAL | | | | | | | |
| _ | ā | | | | | | | |
| | = | | | | | | | |
| | | | | | | | | |
| | | Action Other | | | | | | To/From School |
| | | | Suspected Alcoho | ol I lea | Suspected Drug Use | | | |
| | 1 | Suspected Alcohol Us Drug & Alcohol NO | | oi Ose | NO | | | |
| | | Alcohol Test Given | <u> </u> | Alcohol Test Typ | e | | Alcohol Te | est Results |
| | | TEST NOT GIVEN | | | | | | |
| | | Drug Test Given TEST NOT GIVEN | | Drug Test Type | | Drug Test Re | sults | |
| _ | н | Drug Type | | | | | | |
| 01 | 00 | | | | | | | |
| | | Individual Condition | | | | | | |
| | | APPEARED NORM | 4.0.1 | | | | | |
| | | APPEARED NORM | IAL | | | | | |
| | • | Violations | TRIBURE REPORTED BY BURE REPORTED | | | · & & & & & & & & & & & & & & & & & & & | · K K K K K K K K K K K K K K K K K K K | . Namamamamamamamamamamamamamamamamamamam |
| | 5 | UTC Number BG021141 | Issue To? 5 | Statute Number 346.46(1) | Description FAIL/STOP AT STOR | SIGN | | |
| | | 1 8 GU/3343 | | | | | | |
| • | | | 1001 | | 174270101 770101 | | | |
| 1 | | t Summary ■ | 001 | | | | HnitTyne | |
| | Unit | | | | /ehicle Operating As Class | | Unit Type AUTOM | DBILE |
| | Unit IN T Vehi | t Summary Status RANSIT | | | /ehicle Operating As Class | | AUTOMO | DBILE As Endorsements |
| 05 | Unit IN T Vehi PAS | t Summary Status RANSIT icle Type SSENGER CAR | | | /ehicle Operating As Class D CLASS | ification | AUTOM(Operating | As Endorsements |
| | Unit IN T Vehi PAS Tota | t Summary Status RANSIT | Train/Bus# | Recorded 1 | /ehicle Operating As Class D CLASS Total # Citations Issued | ification | AUTOMO | As Endorsements Total HazMat Types |
| | Unit IN T Vehi PAS Tota 1 | t Summary Status RANSIT icle Type SSENGER CAR | | Recorded | /ehicle Operating As Class O CLASS Total # Citations Issued | Total | AUTOM(Operating | As Endorsements |
| IT 02 | Unit IN T Vehi PAS Tota 1 Insu YES | t Summary Status RANSIT icle Type SSENGER CAR I Occs | Train/Bus# Direction Of SOUTHBO | Recorded 7 | /ehicle Operating As Class D CLASS Fotal # Citations Issued D Pre CrashTire Mark | Total | AUTOMO Operating Trailers | As Endorsements Total HazMat Types 0 Total Lanes 4 |
| IT 02 | Unit IN T Vehi PAS Tota 1 Insu YES Mos | t Summary Status RANSIT icle Type SSENGER CAR IOccs rance? Status | Train/Bus# Direction Of SOUTHBO | Recorded 7 | /ehicle Operating As Class O CLASS Fotal # Citations Issued O Pre CrashTire | Total 0 Speed | AUTOMO Operating Trailers Limit Emergence | As Endorsements Total HazMat Types 0 Total Lanes |
| NIT 02 | Unit IN T Vehi PAS Tota 1 Insu YES Mos | t Summary Status RANSIT icle Type SSENGER CAR I Occs | Train/Bus# Direction Of SOUTHBO | Recorded 7 Travel DUND 5 | /ehicle Operating As Class D CLASS Fotal # Citations Issued D Pre CrashTire Mark Special Function | Total 0 Speed | AUTOMO Operating Trailers d Limit Emergence NOT API | As Endorsements Total HazMat Types Total Lanes 4 Cy Motor Vehicle Use |
| NIT 02 | Unit IN T Vehi PAS Tota 1 Insu YES MOS MO | t Summary Status RANSIT icle Type SSENGER CAR IOccs rance? St Harmful Event: Collision | Train/Bus# Direction Of SOUTHBO | Recorded 7 Travel DUND 5 | /ehicle Operating As Class O CLASS Fotal # Citations Issued O Pre CrashTire Mark Special Function NO SPECIAL FUNCTIO | Total 0 Speed | AUTOMO Operating Trailers d Limit Emergence NOT API | As Endorsements Total HazMatTypes 0 Total Lanes 4 sy Motor Vehicle Use PLICABLE |
| NIT 02 | Unit IN T Vehi PAS Tota 1 Insu YES MO Traft TWO Surf. | t Summary Status FRANSIT icle Type SSENGER CAR I Occs rance? It Harmful Event: Collision TOR VEH IN TRANS fic Way D-WAY, NOT DIVIDIT ace Type | Train/Bus# Direction Of SOUTHBO on With SPORT | Recorded 7 | /ehicle Operating As Class O CLASS Fotal # Citations Issued For Crash Tire Mark Special Function NO SPECIAL FUNCTIO Fraffic Control NO CONTROL Road Curvature | Total 0 Speed | AUTOMO Operating Trailers Limit Emergence NOT API Traffic Co NO Road Grad | As Endorsements Total HazMat Types 0 Total Lanes 4 Sy Motor Vehicle Use PLICABLE introl Inoperative/Missing |
| NIT 02 | Unit IN T Vehi PAS Tota 1 Insu YES MOO Traff TWO Surfield BLA | t Summary Status FRANSIT icle Type SSENGER CAR HOccs France? St Harmful Event: Collision TOR VEH IN TRANS FIG Way D-WAY, NOT DIVIDI ace Type ACKTOP (BITUMING | Train/Bus# Direction Of SOUTHBO on With SPORT | Recorded 7 | /ehicle Operating As Class O CLASS Fotal # Citations Issued For Crash Tire Mark Special Function NO SPECIAL FUNCTIO Fraffic Control NO CONTROL | Total 0 Speed | AUTOMO Operating Trailers Limit Emergence NOT API Traffic Co NO | As Endorsements Total HazMat Types 0 Total Lanes 4 Sy Motor Vehicle Use PLICABLE introl Inoperative/Missing |
| NIT 02 | Unit IN T Vehi PAS Tota 1 Insu YES MOO Traff TWO Surfield BLA | t Summary Status FRANSIT icle Type SSENGER CAR I Occs rance? It Harmful Event: Collision TOR VEH IN TRANS fic Way D-WAY, NOT DIVIDIT ace Type | Train/Bus# Direction Of SOUTHBO on With SPORT | Recorded 7 | /ehicle Operating As Class O CLASS Fotal # Citations Issued For Crash Tire Mark Special Function NO SPECIAL FUNCTIO Fraffic Control NO CONTROL Road Curvature | Total 0 Speed | AUTOMO Operating Trailers Limit Emergence NOT API Traffic Co NO Road Grad | As Endorsements Total HazMat Types 0 Total Lanes 4 Sy Motor Vehicle Use PLICABLE introl Inoperative/Missing |
| NIT 02 | Unit IN T Vehi PAS Tota 1 Insu YES Mos MO Traff TWO Surf-BLA | t Summary Status FRANSIT icle Type SSENGER CAR HOccs France? St Harmful Event: Collision TOR VEH IN TRANS FIG Way D-WAY, NOT DIVIDI ace Type ACKTOP (BITUMING | Train/Bus# Direction Of SOUTHBO on With SPORT | Recorded 7 | /ehicle Operating As Class O CLASS Fotal # Citations Issued For Crash Tire Mark Special Function NO SPECIAL FUNCTIO Fraffic Control NO CONTROL Road Curvature | Total 0 Speed | AUTOMO Operating Trailers Limit Emergence NOT API Traffic Co NO Road Grad | As Endorsements Total HazMat Types 0 Total Lanes 4 Sy Motor Vehicle Use PLICABLE introl Inoperative/Missing |
| NIT 02 | Unit IN T Vehi PAS Tota 1 Insu YES Mos MO Traff TWO Surf-BLA | Status RANSIT Icle Type SSENGER CAR I Occs Tance? Status TOR VEH IN TRANS II COMMANDE TOR VEH IN TRANS II COMMAND TOR VEH I COMMAND TOR VEH | Train/Bus# Direction Of SOUTHBOON With SPORT ED | Recorded 7 | /ehicle Operating As Class O CLASS Fotal # Citations Issued O Pre CrashTire Mark Special Function NO SPECIAL FUNCTION Fraffic Control NO CONTROL Road Curvature STRAIGHT Plate Type | Total 0 Speed | AUTOMO Operating Trailers Limit Emergence NOT API Traffic Co NO Road Grad | As Endorsements Total HazMatTypes 0 Total Lanes 4 Sy Motor Vehicle Use PLICABLE Introl Inoperative/Missing de |
| NIT 02 | Unit IN T Vehi PAS Tota 1 Insu YES Mos MO Traff TWO Surf-BLA | Status Status FRANSIT Icle Type SSENGER CAR I Occs I Cocs | Train/Bus# Direction Of SOUTHBOON With SPORT ED DUS) | Recorded 7 | /ehicle Operating As Class O CLASS Fotal # Citations Issued O Pre CrashTire Mark Special Function NO SPECIAL FUNCTION Fraffic Control NO CONTROL Road Curvature STRAIGHT Plate Type AUT - AUTOMOBILE | Total 0 Speed 555 | AUTOMO Operating Trailers Emergence NOT API Traffic Co. NO Road Grac LEVEL Country of UNITED S | As Endorsements Total HazMatTypes 0 Total Lanes 4 sy Motor Vehicle Use PLICABLE ntrol Inoperative/Missing de |
| NIT 02 | Unit IN T Vehi PAS Tota 1 Insu YES Mos MO Traff TWO Surf. BLA Truc | Status Status FRANSIT Icle Type SSENGER CAR I Occs I Occs I Harmful Event: Collision TOR VEH IN TRANS IIIC WAY D-WAY, NOT DIVIDION ACKTOP (BITUMING Ick Bus or HazMat Vehicle License Plate Number 432WLB Vehicle Identification | Train/Bus# Direction Of SOUTHBO ON With SPORT ED DUS) | Recorded 7 | /ehicle Operating As Class O CLASS Fotal # Citations Issued O Pre CrashTire Mark Special Function NO SPECIAL FUNCTION Fraffic Control NO CONTROL Road Curvature STRAIGHT Plate Type AUT - AUTOMOBILE Make | Total 0 Speed 555 | AUTOMO Operating Trailers Emergence NOT API Traffic Co. NO Road Grac LEVEL Country of UNITED S Model | As Endorsements Total HazMatTypes 0 Total Lanes 4 sy Motor Vehicle Use PLICABLE ntrol Inoperative/Missing de |
| UNIT 02 | Unit IN T Vehi PAS Tota 1 Insu YES Mos MO Traff TWO Surf-BLA | Status Status FRANSIT Icle Type SSENGER CAR I Occs I Cocs | Train/Bus# Direction Of SOUTHBO ON With SPORT ED DUS) | Recorded () Travel DUND | /ehicle Operating As Class O CLASS Fotal # Citations Issued O Pre CrashTire Mark Special Function NO SPECIAL FUNCTION Fraffic Control NO CONTROL Road Curvature STRAIGHT Plate Type AUT - AUTOMOBILE | Total 0 Speed 555 | AUTOMO Operating Trailers Emergence NOT API Traffic Co. NO Road Grac LEVEL Country of UNITED S | As Endorsements Total HazMatTypes 0 Total Lanes 4 sy Motor Vehicle Use PLICABLE ntrol Inoperative/Missing de |
| UNIT 02 | Unit IN T Vehi PAS Tota 1 Insu YES Mos MO Traff TWO Surf. BLA Truc | t Summary Status FRANSIT ICIE Type SSENGER CAR IOCCS FRANCE TOCK TOR VEH IN TRANS IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII | Train/Bus# Direction Of SOUTHBO ON With SPORT ED DUS) | Recorded 7 | /ehicle Operating As Class O CLASS Fotal # Citations Issued O Pre CrashTire | Total 0 Speed 55 N | AUTOMO Operating Trailers Emergence NOT API Traffic Co NO Road Grac LEVEL Country of UNITED S Model ROGUE | As Endorsements Total HazMatTypes 0 Total Lanes 4 sy Motor Vehicle Use PLICABLE ntrol Inoperative/Missing de |
| UNIT 02 | Unit IN T Vehi PAS Tota 1 Insu YES Mos MO Traff TWO Surf. BLA Truc | t Summary Status FRANSIT ICIE Type SSENGER CAR IOCCS FRANCE TOCK TOR VEH IN TRANS ICIE Type ACKTOP (BITUMING IK Bus or HazMat Vehicle License Plate Number 432WLB Vehicle Identification 5N1AT2MVXHC80 Color | Train/Bus# Direction Of SOUTHBO ON With SPORT ED DUS) | Recorded 7 | /ehicle Operating As Class O CLASS Fotal # Citations Issued O Pre CrashTire | Total 0 Speed 55 N | AUTOMO Operating Trailers Emergence NOT API Traffic Co NO Road Grac LEVEL Country of UNITED S Model ROGUE | As Endorsements Total HazMatTypes 0 Total Lanes 4 sy Motor Vehicle Use PLICABLE ntrol Inoperative/Missing de |

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 10/15/2020

| | | _ | | | | | | |
|------|----------|--|------------------------------|---|-----------------------|--|--|--|
| UNIT | VEHICLE | Extent Of Damage DISABLING DAMAGE | | Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT | | | | |
| | | Towed Due To Damage TOWED DUE TO DISABLI | NG DAMAGE | Vehicle Removed By CRAIGS TOWING | | | | |
| | | What Driver Was Doing GOING STRAIGHT Driver Prior Action Other | | Vehicle Factors | | | | |
| | | | | NOT APPLICABLE | | | | |
| INI | VEHICLE | Driver Actions NO CONTRIBUTING ACT | ON | | | | | |
| 05 | 02 | Owner Name ZACHARY CARL EBERT (608) 963-7622 | | Owner Address 519 NARAGANSETT AVE BARABOO, WI 53913, US | | | | |
| | | Sequence Of Events | | | | | | |
| | 5 | MOTOR VEH IN TRANSPO | ORT | | | | | |
| | 8 | MOTOR VEH IN TRANSPO | ORT | | | | | |
| | 63 | Event | | | | | | |
| | 8 | Event | | | | | | |
| ╵┈ | | Policy Holder | | | | | | |
| | | Insurance Company | | Individual | | | | |
| > | | PROGRESSIVE-CASUALTY-INS-CO | | ZACHARY EBERT | | | | |
| | | Individual | | | | | | |
| | | Driver ZACHARY CARL EBERT | | Citations Issued | Sex MALE | | | |
| | DIVIDUAL | (608) 963-7622 | | Date of Birth | Race | | | |
| ╘ | ŏ | | | | WHITE | | | |
| S | ã | Address 519 NARAGANSETT AVE | | Driver License Number | | | | |
| | 2 | BARABOO, WI 53913 , US | | STATE: WISCONSIN COUNTRY: UNITED STATES | | | | |
| | | On Duty | Crash | Safety Equipment | | | | |
| | 3a) | fety Equipment | T | CHOW DED S LAB DELT | | | | |
| | | Row 01 - FRONT ROW | SeatPosition 07 - LEFT | SHOULDER & LAP BELT | | | | |
| | | Helmet Use | | Helmet Compliance | | | | |
| | | Eye Protection | | Tint Compliance | | | | |
| 03 | 005 | Injury Se | everity CTED MINOR INJURY | Airbag DEPLOYED-FRONT | | | | |
| | | Ejected | Ejection Path | NI CARLE | Trapped/Extricated | | | |
| 1 | | I NOT EJECTED | NOT EJECTED/NOT API | FLICABLE | INULIKAPPED | | | |
| | | Medical Transport | | | NOT TRAPPED EMS Run# | | | |
| | | Medical Transport EMS GROUND Hospital | NOT EJECTED/NOT APP | EMS Agency Identifier 6000123 Date of Death | | | | |

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| ı | | | | | | | | | | |
|----------|-------------|-------------------------------------|-----------------------------------|----------------------|--------------------------------------|-------------|--------------|--|--------------|----------------|
| | | Distracted By | Distracted By Sourc NOT APPLICABL | e .E (NOT DISTRA: | CTED) | | | | | |
| | | Distracted By Action NOT DISTRACTED | | | | | | | | |
| | | Non Motorist | Striking Unit# | Location | | | | | | |
| | | Prior Action | | | | | | | | |
| | 4 | Action | | | | | | | | |
| TINO | INDIVIDUAL | | | | | | | | | |
| | | Action Other | | | | | | | | To/From School |
| | i | Drug & Alcohol | Suspected Alcohol t | Jse | Suspected Drug Use NO | | | | | |
| | | Alcohol Test Given TEST NOT GIVEN | | Alcohol Test Type | | | | Alcohol Tes | t Results | |
| | | Drug Test Given TEST NOT GIVEN | | Drug Test Type | | Drug Te | st Results | | | |
| 05 | 002 | Drug Type | | | | | | | | |
| | | Individual Condition | | | | | | | | |
| | | APPEARED NORM | IAL | | | | | | | |
| • | Uni | Summary • | | | | | | | | |
| | Unit | Status | | | ehicle Operating As Class | ification | | UnitType | | |
| | | Cle Type | | D | CLASS | | | TRUCK Operating A | e Endorson | oonte |
| 03 | UTI | LITY TRUCK/PICKU | JP TRUCK | | | | Fotal Traile | | | |
| | 1 ota | lOccs | rain/Bus#Re | ocorded 1 | otal#Citations Issued | | | ers | Total Hazñ | nat rypes |
| L | Insu YES | rance? | Direction Of Tr | | Pre CrashTire Mark | Speed Limit | | mit Total Lanes | | s |
| N | | tHarmfulEvent: Collision | | | Special Function NO SPECIAL FUNCTION | | | Emergency Motor Vehicle Use NOT APPLICABLE | | |
| | | ic Way D-WAY, NOT DIVIDE | ≣D | | Traffic Control STOP SIGN | | | Traffic Control Inoperative/Missing NO | | |
| | | ace Type | \!: o \ | | oad Curvature | | | Road Grade |) | |
| | | k Bus or HazMat | JUS) | | TRAIGHT | | | LEVEL | | |
| | NO | | | | | | | | | |
| | 1 | Vehicle | | | | cececee | | | | |
| | | License Plate Number PK3975 | r | I | Plate Type LTK - LIGHT TRUCK | | it VI | Country of Is UNITED S | | |
| <u>«</u> | | Vehicle Identification | Number | | Vake | | ear | Model | | |
| 03 | 8 | 1GCUYEED6LZ139 | 9553 | | CHEVROLET | 2 | 020 | SLV | | |
| | | Color RED - RED | | I | Body Style PK - PICKUP | | | Bus Use | | |
| | | Initial Contact Point 12 - FRONT | | | | | | | | |

Crash Date 10/15/2020
Crash Time 07:31 PM

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 10/15/2020

| ╽ _┖ | Щ | | | Vehicle Damage | |
|----------------|--------------|--|--|---|---|
| INN | <u>≅</u> | Extent Of Damage | | 01 - RIGHT FRONT CORNER, 11 - LEF | T EDON'T CODNED 42 - EDON'T |
| ⊃ | VEHIC | FUNCTIONAL DAMAGE | | or-mon connen, rr-le | THORT CORRER, 12 - TRORT |
| | | Towed Due To Damage | | Vehicle Removed By | |
| | | NOT TOWED | | OWNER | |
| | | What Driver Was Doing | | Vehicle Factors | |
| | | STOP IN TRAFFIC | | NOT APPLICABLE | |
| | | Driver Prior Action Other | | HOT ATTERDADEL | |
| | | Driver Actions | | | |
| ١. | ш | NO CONTRIBUTING ACTIO | N | | |
| | VEHICLE | | | | |
| > | Ü | | | | |
| | | | | | |
| | | OwnerName | | Owner Address | |
| ន | 8 | ALLEN J SZYMANSKI (608) 963-5416 | | 809 BASCOM HILL DR BARABOO, WI 53913 , US | |
| | | (000)000 0110 | | DAMA255, W. 555 15 , 55 | |
| | | | | | |
| | | Sequence Of Events | | | |
| | 5 | MOTOR VEH IN TRANSPOR | ₹T | | |
| | 8 | Event | | | |
| | | Event | | | |
| | 8 | LYBIR | | | |
| | 8 | Event | | | |
| | | | | | |
| | | Politavi Holdar | | | |
| ¥ | | Policy Holder | | Tindividual | |
| UNIT | | Policy Holder Insurance Company SCHWARTZ INS | | Individual ALLEN SZYMANSKI | |
| UNIT | | Insurance Company SCHWARTZ INS | | ALLEN SZYMANSKI | |
| TIND | | Insurance Company | | ALLEN SZYMANSKI | Sex |
| TINO | 3 | Insurance Company SCHWARTZ INS Individual Driver ALLEN J SZYMANSKI | | ALLEN SZYMANSKI | |
| TINO | 3 | Insurance Company SCHWARTZ INS Individual Driver | | ALLEN SZYMANSKI Citations issued | Sex MALE Race |
| | 3 | Insurance Company SCHWARTZ INS Individual Driver ALLEN J SZYMANSKI (608) 963-5416 | | ALLEN SZYMANSKI Citations issued O Date of Birth | Sex MALE |
| UNIT | | Insurance Company SCHWARTZ INS Individual Driver ALLEN J SZYMANSKI (608) 963-5416 | | ALLEN SZYMANSKI Citations Issued 0 | Sex MALE Race |
| | 3 | Insurance Company SCHWARTZ INS Individual Driver ALLEN J SZYMANSKI (608) 963-5416 | | ALLEN SZYMANSKI Citations issued O Date of Birth | Sex MALE Race WHITE |
| | DIVIDUAL | Insurance Company SCHWARTZ INS Individual Driver ALLEN J SZYMANSKI (608) 963-5416 Address 809 BASCOM HILL DR | | ALLEN SZYMANSKI Citations issued Date of Birth Drivert icense Number | Sex MALE Race WHITE |
| | INDIVIDUAL | Insurance Company SCHWARTZ INS Individual Driver ALLEN J SZYMANSKI (608) 963-5416 Address 809 BASCOM HILL DR BARABOO, WI 53913 , US | rash | ALLEN SZYMANSKI Citations issued Date of Birth Drivert icense Number | Sex MALE Race WHITE |
| | INDIVIDUAL | Insurance Company SCHWARTZ INS Individual Driver ALLEN J SZYMANSKI (608) 963-5416 Address 809 BASCOM HILL DR BARABOO, WI 53913 , US | | ALLEN SZYMANSKI Citations Issued Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UNI Safety Equipment | Sex MALE Race WHITE |
| | INDIVIDUAL | Insurance Company SCHWARTZ INS Individual Driver ALLEN J SZYMANSKI (608) 963-5416 Address 809 BASCOM HILL DR BARABOO, WI 53913 , US Tety Equipment Row | Seat Position | ALLEN SZYMANSKI Citations Issued Date of Birth Drivert Icense Number STATE: WISCONSIN COUNTRY: UNI | Sex MALE Race WHITE |
| | INDIVIDUAL | Insurance Company SCHWARTZ INS Individual Driver ALLEN J SZYMANSKI (608) 963-5416 Address 809 BASCOM HILL DR BARABOO, WI 53913 , US Fety Equipment Row 01 - FRONT ROW | | Citations issued Date of Birth Drivert icense Number STATE: WISCONSIN COUNTRY: UNI Safety Equipment SHOULDER & LAP BELT | Sex MALE Race WHITE |
| | INDIVIDUAL | Insurance Company SCHWARTZ INS Individual Driver ALLEN J SZYMANSKI (608) 963-5416 Address 809 BASCOM HILL DR BARABOO, WI 53913 , US Tety Equipment Row | Seat Position | ALLEN SZYMANSKI Citations Issued Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UNI Safety Equipment | Sex MALE Race WHITE |
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| TNU | S INDIVIDUAL | Insurance Company SCHWARTZ INS Individual Driver ALLEN J SZYMANSKI (608) 963-5416 Address 809 BASCOM HILL DR BARABOO, WI 53913 , US Fety Equipment Row 01 - FRONT ROW Helmet Use | Seat Position 07 - LEFT | Citations issued Date of Birth Drivert icense Number STATE: WISCONSIN COUNTRY: UNI Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance | Sex MALE Race WHITE |
| | INDIVIDUAL | Insurance Company SCHWARTZ INS Individual Driver ALLEN J SZYMANSKI (608) 963-5416 Address 809 BASCOM HILL DR BARABOO, WI 53913 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection | Seat Position 07 - LEFT | Citations issued Date of Birth Drivert icense Number STATE: WISCONSIN COUNTRY: UNI Safety Equipment SHOULDER & LAP BELT Helmet Compliance | Sex MALE Race WHITE |
| TNU | S INDIVIDUAL | Insurance Company SCHWARTZ INS Individual Driver ALLEN J SZYMANSKI (608) 963-5416 Address 809 BASCOM HILL DR BARABOO, WI 53913 , US Tety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Sevento No APPA Ejected Eigenteen | Seat Position 07 - LEFT erity ARENT INJURY jection Path | ALLEN SZYMANSKI Citations Issued Date of Birth Drivert icense Number STATE: WISCONSIN COUNTRY: UNI Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED | Sex MALE Race WHITE TED STATES |
| TNU | S INDIVIDUAL | Insurance Company SCHWARTZ INS Individual Driver ALLEN J SZYMANSKI (608) 963-5416 Address 809 BASCOM HILL DR BARABOO, WI 53913 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Sevential Section Injury Sevential Section Ejected NOT EJECTED | Seat Position 07 - LEFT enity ARENT INJURY | ALLEN SZYMANSKI Citations Issued Date of Birth Drivert icense Number STATE: WISCONSIN COUNTRY: UNI Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag NON DEPLOYED | Sex MALE Race WHITE TED STATES Trapped/Extricated NOT TRAPPED |
| TNU | S INDIVIDUAL | Insurance Company SCHWARTZ INS Individual Driver ALLEN J SZYMANSKI (608) 963-5416 Address 809 BASCOM HILL DR BARABOO, WI 53913 , US Foty Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Sevents of the Company Injury Sevents of the Company Modern Apple | Seat Position 07 - LEFT erity ARENT INJURY jection Path | ALLEN SZYMANSKI Citations Issued Date of Birth Drivert icense Number STATE: WISCONSIN COUNTRY: UNI Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED | Sex MALE Race WHITE TED STATES |
| TNU | S INDIVIDUAL | Insurance Company SCHWARTZ INS Individual Driver ALLEN J SZYMANSKI (608) 963-5416 Address 809 BASCOM HILL DR BARABOO, WI 53913 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Sevential Section Injury Sevential Section Ejected NOT EJECTED | Seat Position 07 - LEFT erity ARENT INJURY jection Path | ALLEN SZYMANSKI Citations Issued Date of Birth Drivert icense Number STATE: WISCONSIN COUNTRY: UNI Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag NON DEPLOYED | Sex MALE Race WHITE TED STATES Trapped/Extricated NOT TRAPPED |

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 10/15/2020

| | | Distracted By NOT APPLICABL | E (NOT DISTRAC | CTED) | | | |
|------|--------|-------------------------------------|-------------------|--------------------------|-------------------|----------------------|-----------------------|
| | | Distracted By Action NOT DISTRACTED | | | | | |
| | | Non Motorist Striking Unit# | Location | | | | |
| | | Prior Action | | | | | |
| | | Action | | | | | |
| | 4 | | | | | | |
| UNIT | 3 | | | | | | |
| 5 | NEWENE | | | | | | |
| | _ | | | | | | |
| | | Action Other | | | | | To/From School |
| | | | | | | | TOTAL TOTAL CONSCIONA |
| | I | Drug & Alcohol NO | Jse Jse | 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 | | |
| 03 | 003 | Drug Type | 1 | | | | |
| | | | | | | | |
| | | Individual Condition | | | | | |
| | | APPEARED NORMAL | | | | | |