## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Primary Crash Document   Agency Crash Number   21-00437   DEPUTY J. MACASKILL									
11:40 PM	Document Number Override	Primary Crash E	Document#						
11:40 PM	Crash Date	Crash Time		Date Arri	ved	Time Arrive	d		
On Emergency Hit and Run Lane Closure Work Zone Trailer or Towed Reporting Threshold  Government Property Active School Zone NO Acti	)1/14/2021			01/14/2	021	11:53 PM			
11:41 PM	Jate Notified	Time Notified		TotalUn	ts	Total Injure	<u> </u>	Total Killed	
Government Property Active School Zone NO School Bus Related NO Tags  Reportable DT4000 (STANDARD CRASH)  Crash Type DT4000 (STANDARD CRASH)  Reconstruction By  Reconstruction By  Photos By  County Highway H  Unit 1  Unit 1  Unit 2	1/14/2021	11:41 PM		1					<del>,</del>
Property Active School Zone NO    Reportable   Crash Type DT4000 (STANDARD CRASH)	On Emergency Hit	and Run	Lane Closu	ıre	Work Zone	Traile	r or T	owed	
Reportable DT4000 (STANDARD CRASH)  DT4000 (STANDARD CRASH)  Reconstruction By  Photos By  Additional Information NONE  County Highway H  Unit 1  Unit 2	••••••	Active Sc	hool Zone	1	us Related	Tags			
Unit 1  Unit 1  County Highway H  Unit 1  Unit 2	Reportable		NDARD CRASH	)		Amend	ded		<b>1</b> 1 1 -
Unit 1  Unit 1  Unit 1  Unit 2  Unit 2	escription					•			
	County Highway H		Unit 1	Ž	Unit 2		Ado	litional Infor	mation
					Not Drawn	n to Scale			
Not Drawn to Scale							1		

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Crash Date 01/14/2021

	Location ===									
	ON CTHH NB				Latitude			Longitud	de	
	208 FT E				43.59299	1659		1 -	1694715	
	OF CTHP NB				X Coordin	ato		Y Coord	linato	
	IN THE TOWN OF DELL	ONA			265123.9			483078		
	IN SAUK COUNTY				Structure			1,000.0		
					Suuctaie	ı ype				
	Crash Scene									
	First Harmful Event				FirstHarm	ıful Event Lo	ocation			
	MOTOR VEH IN TRANSI	PORT			ON ROA	DWAY				
	Manner of Collision				Light Cond	dition				
	06 - SIDESWIPE/OPPOS	ITE DIRECTION			DARK/UNLIT					
	Road Surface Condition(s)				Roadway	Factor(s)				
	SNOW, SLUSH, ICE				-					
	Environment Factor(s)									
	WEATHER CONDITIONS	3			NONE					
	Weather Condition(s)									
	SNOW									
	Animal Type				Relation T	o Trafficwa	v			
					l	WAY - O	•			
	Crash Classification - Location			Crash Cla	ssification -	Jurisdiction				
	PUBLIC PROPERTY			NO SPE	CIAL JUR	SDICTION		_		
	TribalLand			Access Co				Special Study		
	Within Interchange Area		Intersection NOT AN	n Type INTERSE	CTION					
	Unit Summary =									
	Unit Status		Vehicle Ope	erating As C	lassification		UnitType			
	IN TRANSIT D CLASS						AUTOMO	BILE		
_	Vehicle Type	I				Operating A	s Endorse	ments		
5	PASSENGER CAR									
	Total Occs	Train/Bus#Recorded	Total#Citat	tions Issued		Total Trail	ers	TotalHaz	:Mat Types	
	1		0			0		0		
	Insurance?	Pre	CrashTire		Speed Lin	nit	TotalLan	es		
⊨	UNKNOWN		Mark		55		2			
LIND	Most Harmful Event: Collisio	Special Fun		TION		Emergency		icle Use		
_	MOTOR VEH IN TRANS		NO SPECIAL FUNC			NOT APP				
	Traffic Way	_	Traffic Cont				Traffic Conf	trol Inopera	tive/Missing	
	TWO-WAY, NOT DIVIDE	NO CONT				NO				
	Surface Type		Road Curva				Road Grade			
	BLACKTOP (BITUMINO	US)	CURVE R	IGHI		LEVEL				
	Truck Bus or HazMat  NO									
	Vehicle				eccecce	· cereces	SEESEN			V ( V ( V
	License Plate Number		Plate Type	<u> </u>		St	Country of Is	suance		200000000
	AHR6518		AUT - AU	JTOMOBIL	Ε	WI	UNITED S	TATES		
	Vehicle Identification Number					Year	Model			
	■ Vehicle Identification N	5 1J4GW58N72C230592				2002	GCH			
5		592	JEEP			2002				
2		592	Body Style	<b>:</b>			Bus Use			
5	<b>a</b> 1J4GW58N72C230	592					Bus Use			
2	Color BLK - BLACK Initial Contact Point	592	Body Style				Bus Use			
	Color BLK - BLACK Initial Contact Point	592	Body Style 4D - 4DR				Bus Use			
UNIT 01	1J4GW58N72C2309   Color		Body Style 4D - 4DR Vehicle Da		AT SCEN	E	Bus Use			

### 6TL0BJ1GKX

21-00437

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Crash Date 01/14/2021

333333		Towed Due To Damage NOT TOWED		I	/ehicle Removed By DPERATOR				
2000000000		What Driver Was Doing			/ehicle Factors				
20000000		NEGOTIATING CURVE			JNKNOWN				
00988990		Driver Prior Action Other		`	Manual Ma				
5555555		Driver Actions SPEED TOO FAST/COND		L					
<b>=</b>	VEHICLE								
LIND	I								
(0)(0)(0)	•								
200000000000000000000000000000000000000		OwnerName SERGIO HAY			Owner Address S944 CHRISTMAS MOL	INTAIN RO			
2	5	(805) 305-3650			WISCONSIN DELLS, WI		S		
(0)(0)(0)									
ASM(SH24)		Sequence Of Events							
20030303	9	MOTOR VEH IN TRANSPO	ORT						
######################################	8	Event							
Seesan	03	Event							
- Statement	0	Event							
estatate es	8	Event							
3000000		ndividual							
Section (1)		Driver SERGIO HAY			Citations Issued  0		Sex MALE		
2900000	3	(805) 305-3650			Date of Birth		Race HISPANIC		
N	ΔD	Address			Driver License Number		HISPANIC		
רו	INDIVIDUAL	S944 CHRISTMAS MOUN WISCONSIN DELLS, WI 5							
\$100000		, , , , , , , , , , , , , , , , , , , ,	,						
ACULTO IN	ر د	On Duty ety Equipment	Crash		Safety Equipment				
200000000000000000000000000000000000000		Row	SeatPo	esition	SHOULDER & LAP BELT	•			
Westernam .		01 - FRONT ROW	07 - LE						
2000		HelmetUse			Heimet Compliance				
Summ		Eye Protection			Tint Compliance				
_	_	Injury Severity			Airbag				
2	8	<b>injury</b> <sub>no ap</sub>	PARENT I		NON DEPLOYED				
00000000		Ejected NOT EJECTED	Ejection Pa	ith CTED/NOT APPL	ICABLE		Trapped/Extricated NOT TRAPPED		
Special		Medical Transport			EMS Agency Identifier		EMS Run#		
in the second		NOT TRANSPORTED  Hospital			Date of Death		Time of Death		
iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii		·					7.00		
agaztewa:		Distracted By UNKNO	ed By Source <b>DWN</b>	•					
WHEELST WATER		Distracted By Action UNKNOWN							
Stretowysty		Non Motorist	Unit#	Location					
8	-19-409-5568	concerns cocce commence test exertises existincis							

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Crash Date 01/14/2021

1										
		Prior Action								
TIND	INDIVIDUAL	Action Other								To/From School
		Sus	pected Alcohol U	se	Suspected Drug Use					
		Drug & Alcohol No			NO					
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Ty	pe			Alcohol Tes	st Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug <sup>2</sup>	Test Results			
10	100	Drug Type				•				
		Individual Condition								
		NOT OBSERVED								
	Uni	t Summary 💳								
		Status 'RANSIT			Vehicle Operating As Clas  D CLASS	sification	1	Unit Type AUTOMO	D11 E	
		cle Type			D CEAGO				As Endorser	nents
02		SENGER CAR						` `		
	Tota 1	lOccs	Train/Bus#Re	1	Total#Citations Issued  0		Total Traile	ers	Total Hazi	Mat Types
T	Insu YES	rance?	Direction Of Tra	1	Pre CrashTire Mark		Speed Lim	nit	TotalLane	es
TNU TNU	MO.	tHarmful Event: Collision Wi TOR VEH IN TRANSPOR			Special Function NO SPECIAL FUNCTION	ON	•	NOT APP		
		fic Way D-WAY, NOT DIVIDED		1	Traffic Control NO CONTROL			Traffic Con	trol inoperat	tive/Missing
	Surf	асе Туре			Road Curvature			Road Grad	9	
		CKTOP (BITUMINOUS)			CURVE LEFT			LEVEL		
	NO NO	k Bus or HazMat								
	1	Vehicle								
		License Plate Number 684 <b>PFJ</b>			Plate Type AUT - AUTOMOBILE		St WI	Country of Is UNITED S		
05	22	Vehicle Identification Number JHLRD186X1C044763			Make HONDA		Year 2001	Model CR V		
		Color BLU - BLUE			Body Style 4D - 4DR			Bus Use		
	ш	Initial Contact Point			Vehicle Damage					
LIND	걸	10 - LEFT SIDE FRON	Г			. = 40	LEET OIL			
5	VEHICLE	Extent Of Damage FUNCTIONAL DAMAG	<b>E</b>		09 - LEFT SIDE MIDD	LE, 10	- LEF I SIL	JE FKUNT		
		Towed Due To Damage NOT TOWED			Vehicle Removed By OPERATOR					
		What Driver Was Doing NEGOTIATING CURVE								

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				Vehicle	e Factors				
		Driver Prior Action Other		TON	APPLICABLE				
		Duli con Antione							
	111	Driver Actions NO CONTRIBUTING ACTI	ON						
⊨	VEHICLE								
N	Ĭ								
_	3								
		OwnerName ANNA IWONA PROCHOW	ςKΔ		wner Address 417 BIRCHWOOD RD				
05	8	(608) 434-7252	·		ISCONSIN DELLS, WI 53965 , US	<b>S</b>			
		Sequence Of Events	***************************************	l					
		Event							
	8	MOTOR VEH IN TRANSPO	)KI						
	8	Event							
		Event							
	8	Lydik							
	•	Event							
	2								
⊨		Policy Holder							
N		Insurance Company	120.00		vidual				
_		STATE-FARM-GENERAL-	INS-CU	ANI	NA PROCHOWSKA				
		Individual		T C to		0			
		Driver ANNA IWONA PROCHOW	SKA	0	itions Issued	Sex FEMALE			
	₹	(608) 434-7252			e of Birth	Race			
⊨	INDIVIDUA			-		WHITE			
E N	F	Address S417 BIRCHWOOD RD		Driv	ver License Number				
	Z	WISCONSIN DELLS, WI 5	3965 , US	STA	ATE: WISCONSIN COUNTRY: UNIT	FED STATES			
		On Duty	Crash	Safe	ety Equipment				
	Sai	ety Equipment							
		Row EBONT BOW	Seat Position	SH	OULDER & LAP BELT				
		01 - FRONT ROW HelmetUse	07 - LEFT	Holi	met Compliance				
		Tiomorosc		1,,,,,,	inci odnipiano				
		Eye Protection			Tint Compliance				
				A:-					
05	805	Injury Severity  Injury NO APPARENT INJURY			ag N DEPLOYED				
		Ejected	Ejection Path			Trapped/Extricated			
		NOT EJECTED	NOT EJECTED/NOT AF	PPLICAE	BLE	NOT TRAPPED			
		Medical Transport		EM	S Agency Identifier	EMS Run#			
		NOT TRANSPORTED				Time of Deads			
		Hospital		Date	e of Death	Time of Death			
		I Distracte	ed By Source			<u> </u>			
		Distracted By NOT A	PPLICABLE (NOT DIST	RACTED	D)				
		Distracted By Action NOT DISTRACTED							
		Striking	Unit# Location						
		Non Motorist	5111.7						

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	Prior Action					
	Action					
MAL						
2						
	Action Other					To/From School
	Suspected Alcohol &	Jse	Suspected Drug Use			
	Alcohol Test Given	Alcohol Test Type			Alcohol Test Results	
	Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results		
005	Drug Type					
	Individual Condition					
	APPEARED NORMAL					
	002 E INDIVIDUAL	Action Other  Drug & Alcohol  Alcohol Test Given TEST NOT GIVEN  Drug Test Given TEST NOT GIVEN  Drug Type  Individual Condition	Action Other  Drug & Alcoho Suspected Alcohol Use NO Alcohol Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Type Individual Condition	Action Other    Drug & Alcohol   Suspected Alcohol Use   No	Action Other    Drug & Alcoho    Suspected Alcohol Use   No   Suspected Drug Use   No   No   No   No   No   No   No   N	Action Other    Drug & Alcohol   Suspected Alcohol Use   No