# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 02/13/2021

Crash Time 11:30 AM

Document Number Over	ide Primary Crash		Agency Crash Number 21-01291		ng Officer/Deputy C. FRANK	,	
Crash Date 02/13/2021	Crash Time 11:30 AM		Date Arrived 02/13/2021		Time Arrived 01:21 PM		
Date Notified 02/13/2021	Time Notified 01:06 PM		Total Units 01	Total Injure	ed Total Kille	led	
On Emergency	Hit and Run	Lane Closur		<b></b>	er or Towed	Reporting Threshold	
Government Property	Acuve S	chool Zone	School Bus Related NO	Tags			
Reportable	Crash Type DT4000 (ST	ANDARD CRASH)		Amen	ded	Secondary Crash	
Description =					Dogganstructio	on Div	
Diagram					Reconstruction	n By	
					Photos By		
					Additional Info	ormation	
					NOINE		
i, a sworn law ent				a in this report.			
SLIDE OFF. NO DAMAGE	AND NO INJURIES. BELT	BROKE CAUSING NEI	ED FOR TOW.				

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	Location <b>—</b>								
	ON CTHC WB 0.41 MIS				Latitude 43.345148317		1 -	Longitude -89,927752711	
	OF ORCHARD RD		-		X Coordinate		Y Coord		
	IN SAUK COUNTY			262697.65625			4803307.5		
					Structure Type NO STRUCTURE				
	Crash Scene								
	FirstHarmfulEvent				FirstHarn	nful Event Lo	ocation		
	DITCH				ON ROADWAY				
	Manner of Collision			Light Condition					
		EHICLE IN TRANSPORT		DAYLIGHT  Roadway Factor's)					
	Road Surface Condition(s)  SNOW, SLUSH, ICE			Roadway Factor(s)					
	Environment Factor(s)								
	WEATHER CONDITIONS	3		ROAD SURF			SURFACE CONDITION (WET, ICY, SNOW, SLUSH,		
	Weather Condition(s)					-·- <b>,</b>			
	CLOUDY, SNOW								
	AnimalType			Relation To Trafficway TRAFFICWAY - ON ROAD					
	Crash Classification - Location			Crash Classification - Jurisdiction					
	PUBLIC PROPERTY			NO SPE	CIAL JUR	SDICTION			
	Tribal Land				Access Control Special Study NO CONTROL			Special Study	
	Within Interchange Area NO	Junction Location NON-JUNCTION		Intersection	on Type INTERSE	CTION			
	Unit Summary =								
	Unit Status		Vehicle Ope	erating As C	lassification	3	UnitType		
	IN TRANSIT		D CLASS		AUTOMOBILE				
7	Vehicle Type				Operating As Endorsements				
0	(SPORT) UTILITY VEHIC		17 ( 180)	<u> </u>		∃ Total Traile		lilers	
	Total Occs Train/Bus#Recorded 1		0	Total # Citations Issued  0		0		0	
	Insurance?			Pre CrashTire Speed Lin Mark 55		imit Total Lanes			
LINO	Most Harmful Event: Collision With			Special Function				Emergency Motor Vehicle Use	
$\supset$	DITCH	NO SPEC	NO SPECIAL FUNCT		TION		NOT APPLICABLE		
	Traffic Way	Traffic Conf	Traffic Control			Traffic Control Inoperative/Missing			
	TWO-WAY, NOT DIVIDE	D	NO CONTROL				NO		
	Surface Type	:10\		Road Curvature			Road Grade DOWNHILL		
	BLACKTOP (BITUMINO) Truck Bus or HazMat		CORVER	CURVE RIGHT			DOWNHILL		
	NO								
	Vehicle		~ K & K K & K K & K & K & K & K & K		· eeeeeeeee	SSSSSSSS			
	License Plate Number	Plate Type	Plate Type St		St	Country of Issuance			
	AGU8787				Wi	UNITED STATES			
	Vehicle Identification Number 1C4NJDBB8CD612484		l l	Make JEEP		Year	Model COMPASS SP		
	Color		JEEP         2012         COMPASS SP           Body Style         Bus Use						
	ONG - ORANGE	1 .	LL - CARRYALL						
_	Initial Contact Point			Vehicle Damage					
LIND	00 - NON-COLLISION  Extent Of Damage  DISABLING DAMAGE			00 - NO DAMAGE					
_	DISABLING DAMAGE								

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	*******	Towed Due To Damage		Vehicle Removed By				
		TOWED DUE TO DISABLING DAMAGE		EVERETTS TOWING				
		What Driver Was Doing		Vehicle Factors				
		NEGOTIATING CURVE		NOT APPLICABLE				
		Driver Prior Action Other						
		Driver Actions						
	ш	SPEED TOO FAST/COND, I	FAILURE TO CONTROL					
<b>—</b>	VEHICLE							
IND	Ħ							
_	Щ							
		OwnerName		Owner Address				
	5	REBECCA LYNN ABRAHAN (608) 448-7536	#S	304 N MAPLE ST NORTH FREEDOM, WI 53951 , L	is .			
	•	(000) 440-7550		NON IR FREEDOM, WE 55851 , US				
	5	Event DITCH						
		Event						
	8							
	63	Event						
		Event						
	3	Event						
_		Policy Holder						
IN		Insurance Company		Individual				
$\supset$		STATE-FARM-GENERAL-INS-CO		JOSHUA TOMLINSON				
		Individual						
		Driver		Citations Issued	Sex			
		Driver JOSHUA CHARLES TOMLI		0	Sex MALE			
		Driver			Sex			
LN.		Driver JOSHUA CHARLES TOMLII (608) 448-7536		O Date of Birth	Sex MALE Race			
UNIT		Driver JOSHUA CHARLES TOMLII (608) 448-7536 Address 304 N MAPLE ST	NSON	O Date of Birth  Driver License Number	Sex MALE Race WHITE			
TINO	INDIVIDUAL	Driver JOSHUA CHARLES TOMLII (608) 448-7536	NSON	O Date of Birth	Sex MALE Race WHITE			
TINO		Driver JOSHUA CHARLES TOMLII (608) 448-7536  Address 304 N MAPLE ST NORTH FREEDOM, WI 5399	NSON 51 , US	O Date of Birth  Driver License Number	Sex MALE Race WHITE			
LIND	INDIVIDUAL	Driver JOSHUA CHARLES TOMLII (608) 448-7536  Address 304 N MAPLE ST NORTH FREEDOM, WI 539	NSON 51 , US	O Date of Birth  Driver License Number	Sex MALE Race WHITE			
TINO	INDIVIDUAL	Driver JOSHUA CHARLES TOMLII (608) 448-7536  Address 304 N MAPLE ST NORTH FREEDOM, WI 539:	NSON 51 , US Crash	Driver License Number  STATE: WISCONSIN COUNTRY: UI  Safety Equipment	Sex MALE Race WHITE			
LIND	INDIVIDUAL	Driver JOSHUA CHARLES TOMLII (608) 448-7536  Address 304 N MAPLE ST NORTH FREEDOM, WI 5399  Cety Equipment  Row	NSON  51 , US  Crash  Seat Position	Driver License Number STATE: WISCONSIN COUNTRY: U	Sex MALE Race WHITE			
TINO	INDIVIDUAL	Driver JOSHUA CHARLES TOMLII (608) 448-7536  Address 304 N MAPLE ST NORTH FREEDOM, WI 539:	NSON 51 , US Crash	Date of Birth  Driver License Number  STATE: WISCONSIN COUNTRY: UI  Safety Equipment  SHOULDER & LAP BELT	Sex MALE Race WHITE			
TIND	INDIVIDUAL	Driver JOSHUA CHARLES TOMLII (608) 448-7536  Address 304 N MAPLE ST NORTH FREEDOM, Wt 5398  Fety Equipment  Row 01 - FRONT ROW	NSON  51 , US  Crash  Seat Position	Driver License Number  STATE: WISCONSIN COUNTRY: UI  Safety Equipment	Sex MALE Race WHITE			
HNO	INDIVIDUAL	Driver JOSHUA CHARLES TOMLII (608) 448-7536  Address 304 N MAPLE ST NORTH FREEDOM, Wt 5398  Fety Equipment  Row 01 - FRONT ROW	NSON  51 , US  Crash  Seat Position	Date of Birth  Driver License Number  STATE: WISCONSIN COUNTRY: UI  Safety Equipment  SHOULDER & LAP BELT	Sex MALE Race WHITE			
	S INDIVIDUAL	Driver JOSHUA CHARLES TOMLII (608) 448-7536  Address 304 N MAPLE ST NORTH FREEDOM, WI 539:  Cety Equipment  Row 01 - FRONT ROW  Helmet Use  Eye Protection	NSON  51 , US  Crash  Seat Position  07 - LEFT	Driver License Number STATE: WISCONSIN COUNTRY: UI  Safety Equipment  SHOULDER & LAP BELT  Helmet Compliance  Tint Compliance	Sex MALE Race WHITE			
	INDIVIDUAL	Driver JOSHUA CHARLES TOMLIS (608) 448-7536  Address 304 N MAPLE ST NORTH FREEDOM, WI 539:  Fety Equipment  Row 01 - FRONT ROW  Helmet Use  Eye Protection	NSON  51 , US  Crash  Seat Position  07 - LEFT	Driver License Number  STATE: WISCONSIN COUNTRY: UI  Safety Equipment  SHOULDER & LAP BELT  Helmet Compliance	Sex MALE Race WHITE			
	S INDIVIDUAL	Driver JOSHUA CHARLES TOMLII (608) 448-7536  Address 304 N MAPLE ST NORTH FREEDOM, WI 539:  Cety Equipment  Row 01 - FRONT ROW Helmet Use  Eye Protection  Injury Sev NO APP	NSON  51 , US  Crash  Seat Position  07 - LEFT	Driver License Number STATE: WISCONSIN COUNTRY: UI Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag	Sex MALE Race WHITE			
	S INDIVIDUAL	Driver JOSHUA CHARLES TOMLIS (608) 448-7536  Address 304 N MAPLE ST NORTH FREEDOM, WI 539:  Fety Equipment  Row 01 - FRONT ROW Helmet Use  Eye Protection  Injury Sev NO APPL Ejected  E ST NORTH FREEDOM, WI 539:  Injury Sev	NSON  51 , US  Crash  Seat Position 07 - LEFT	Date of Birth  Driver License Number  STATE: WISCONSIN COUNTRY: UI  Safety Equipment  SHOULDER & LAP BELT  Heimet Compliance  Tint Compliance  Airbag  NON DEPLOYED	Sex MALE Race WHITE NITED STATES			
	S INDIVIDUAL	Driver JOSHUA CHARLES TOMLIS (608) 448-7536  Address 304 N MAPLE ST NORTH FREEDOM, WI 539:  Fety Equipment  Row 01 - FRONT ROW Helmet Use  Eye Protection  Injury Sev NO APPL Ejected NOT EJECTED Medical Transport	Seat Position 07 - LEFT  Verity ARENT INJURY	Date of Birth  Driver License Number  STATE: WISCONSIN COUNTRY: UI  Safety Equipment  SHOULDER & LAP BELT  Heimet Compliance  Tint Compliance  Airbag  NON DEPLOYED	Sex MALE Race WHITE  NITED STATES  Trapped/Extricated			
	S INDIVIDUAL	Driver JOSHUA CHARLES TOMLIS (608) 448-7536  Address 304 N MAPLE ST NORTH FREEDOM, Wt 539:  Fety Equipment  Row 01 - FRONT ROW  Helmet Use  Eye Protection  Injury Sev NO APP  Ejected NOT EJECTED  Medical Transport NOT TRANSPORTED	Seat Position 07 - LEFT  Verity ARENT INJURY	Date of Birth  Driver License Number  STATE: WISCONSIN COUNTRY: UI  Safety Equipment  SHOULDER & LAP BELT  Heimet Compliance  Tint Compliance  Airbag  NON DEPLOYED  PLICABLE  EMS Agency identifier	Sex MALE Race WHITE  NITED STATES  Trapped/Extricated NOT TRAPPED EMS Run#			
	S INDIVIDUAL	Driver JOSHUA CHARLES TOMLIS (608) 448-7536  Address 304 N MAPLE ST NORTH FREEDOM, WI 539:  Fety Equipment  Row 01 - FRONT ROW Helmet Use  Eye Protection  Injury Sev NO APPL Ejected NOT EJECTED Medical Transport	Seat Position 07 - LEFT  Verity ARENT INJURY	Date of Birth  Driver License Number  STATE: WISCONSIN COUNTRY: UI  Safety Equipment  SHOULDER & LAP BELT  Helmet Compliance  Tint Compliance  Airbag  NON DEPLOYED	Sex MALE Race WHITE  NITED STATES  Trapped/Extricated NOT TRAPPED			
	S INDIVIDUAL	Driver JOSHUA CHARLES TOMLIS (608) 448-7536  Address 304 N MAPLE ST NORTH FREEDOM, WI 539:  Fety Equipment  Row 01 - FRONT ROW Helmet Use  Eye Protection  Injury NO APPL Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital	Seat Position 07 - LEFT  Verity ARENT INJURY Ejection Path NOT EJECTED/NOT APP	Date of Birth  Driver License Number STATE: WISCONSIN COUNTRY: UI  Safety Equipment  SHOULDER & LAP BELT  Helmet Compliance  Tint Compliance  Airbag NON DEPLOYED  PLICABLE  EMS Agency Identifier  Date of Death	Sex MALE Race WHITE  NITED STATES  Trapped/Extricated NOT TRAPPED EMS Run#			
	S INDIVIDUAL	Driver JOSHUA CHARLES TOMLIS (608) 448-7536  Address 304 N MAPLE ST NORTH FREEDOM, WI 539:  Fety Equipment Row 01 - FRONT ROW Helmet Use  Eye Protection  Injury Sev NO APP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital	Seat Position 07 - LEFT  Verity ARENT INJURY Ejection Path NOT EJECTED/NOT APP	Date of Birth  Driver License Number STATE: WISCONSIN COUNTRY: UI  Safety Equipment  SHOULDER & LAP BELT  Helmet Compliance  Tint Compliance  Airbag NON DEPLOYED  PLICABLE  EMS Agency Identifier  Date of Death	Sex MALE Race WHITE  NITED STATES  Trapped/Extricated NOT TRAPPED EMS Run#			

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		Non Motorist	Location				
		Prior Action					
UNIT		Action					
		A 5 - 01					
		Action Other					To/From School
	E	Drug & Alcohol NO	lse	Suspected Drug Use NO			•
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type			Alcohol Test Results	
Drug TES		Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results			
04	5	Drug Type					
		Individual Condition					
		APPEARED NORMAL					