WISCONSIN MOTOR VEHICLE CRASH REPORT

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

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Document Number Overri	de	Primary Crash E	ocument#	Agency Crash Number 21-03577		Investigating Officer/Deputy DEPUTY A. KING			
Crash Date 04/27/2021		Oldon Fillio		Date Arrived 04/27/2021		Time Arrived 04:12 PM			
Date Notified 04/27/2021		Time Notified 04:07 PM		Total Units 02		Total Injured 01	Total Killed 00		
On Emergency Hi		t and Run 🔽 Lane Closu		re Work Zone		Trailer or 1	owed	Reporting Threshold	
Government Property		Active School Zone		School Bus Related NO		Tags			
Reportable	Crash Type DT4000 (STANDARD CRASH)				Amended		Secondary Crash		

Description Diagram Reconstruction By Not to scale Photos By DEPUTY A. KING, #9103 CTH G Additional Information **PHOTOS** Stoplight for NB Stoplight for WB **USH 14** Stoplight for 500 Stoplight for SB USH23

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

I WAS DISPATCHED TO A TWO CAR VEHICLE ACCIDENT ON USH23 AND USH14 IN THE TOWN OF SPRING GREEN, COUNTY OF SAUK, STATE OF WISCONSIN. SPRING GREEN OFFICER ZIEMKE WAS ON SCENE AND CONDUCTED THE TRAFFIC CRASH INVESTIGATION. OFFICER ZIEMKE PROVIDED ME WITH ALL THE PERTINENT INFORMATION ONCE I ARRIVED ON SCENE. OFFICER ZIEMKE ADVISED U1 WAS DRIVING NORTHBOUND ON CTHG WHEN U1 APPROACHED THE CONTROLLED INTERSECTION WITH A GREEN TRAFFIC SIGNAL. U2 WAS STATIONARY FACING SOUTH IN THE INTERSECTION OF USH23 AND USH14 WAITING TO TURN EASTBOUND ON USH14. U2 TURNED ONTO USH14 IN FRONT OF U1 WHEN U1 WAS FORCED TO STRIKE U2 ON THE FRONT PASSENGER SIDE OF THE VEHICLE. VEHICLES WERE REMOVED OFF THE ROADWAY UPON ARRIVAL. MADE CONTACT WITH DRIVER OF U2 AND IDENTIFIED HIM WITH WI DL AS JORDAN M. RICHTER. IN SPEAKING WITH JORDAN, I LEARNED THE FOLLOWING INFORMATION. JORDAN STATED HE WAS TURNING EASTBOUND ON USH14 FROM USH23 WHEN HE WAS STRUCK BY U1 WITH A GREEN LIGHT FOR THE NORTH AND SOUTH DIRECTION OF TRAVEL. UPON REQUEST FOR VALID PROOF OF INSURANCE, JORDAN ADVISED HE DID NOT HAVE ANY. UPON LOOKING AT THE VEHICLE, I OBSERVED DAMAGE TO THE FRONT PASSENGER SIDE OF THE VEHICLE, WITH THE REAR PASSENGER TIRE HAVING INSUFFICIENT TREAD. I RAN JORDAN'S DRIVER'S RECORD VIA ETIME AND DOT RECORDS WHICH INDICATED HE WAS ON AN INSTRUCTOR'S PERMIT WHICH REQUIRED HIM TO HAVE A PASSENGER WITH A VALID LICENSE AND ABOVE THE AGE OF 19. I IDENTIFIED THE PASSENGER VERBALLY AS JEFFREY'S. BEAUGRAND. I CONFIRMED JEFFREY'S DRIVER'S LICENSE STATUS AND HE DOES NOT HAVE A VALID

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DRIVER'S LICENSE. I SPOKE WITH OPERATOR OF U2 AND HE ADVISED HE WAS TRAVELLING NORTHBOUND ON CTHG ONTO USH23 THROUGH A CONTROLLED INTERSECTION WITH A GREEN LIGHT WHEN UZ TURNED IN FRONT OF HIM AND WAS UNABLE TO STOP BEFORE STRIKING UZ. UT WAS REMOVED BY GEORGE'S TOWING AND UZ WAS REMOVED BY 4-WAY AUTO. ALL PERSONS REFUSED MEDICAL TREATMENT. I CITED JORDAN WITH THE DRIVER'S LICENSE VIOLATION, VEHICLE EQUIPMENT VIOLATION, FAILURE TO YIELD, AND

Structure Type	Location —									
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Crash Date 04/27/2021

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21-03577

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

				Plate Type	St	Country of Issuance			
		Vehicle Identification Number		Make	Year	Model			
5	5	1C6RR7TT7HS864904		DODGE	2017	RAM			
		Color		Body Style	I	Bus Use			
		BLK - BLACK		4D - 4DR					
_	VEHICLE	Initial Contact Point 01 - RIGHT FRONT CORNER	I	Vehicle Damage					
L	Ĭ	Extent Of Damage		01 - RIGHT FRON	T CORNER				
_	Ŋ	DISABLING DAMAGE							
		Towed Due To Damage		Vehicle Removed By					
		TOWED DUE TO DISABLING What Driver Was Doing		Vehicle Factors	BODY				
		GOING STRAIGHT		venicle Factors					
		Driver Prior Action Other		NOT APPLICABLE	i				
	111	Driver Actions NO CONTRIBUTING ACTION	ı						
⊨	VEHICLE								
N	Ī								
_	3								
		Owner Name		Overnov Address					
		TRAVIS JOHN KLEIST		Owner Address S12420 GARD					
2	5	(608) 341-7715		SPRING GREE	N, WI 53588 , US				
	5	Event MOTOR VEH IN TRANSPOR	т						
	8	Event							
		Event							
	03								
	3	Event							
		Policy Holder							
N		Insurance Company		Individual					
⊃		AMERICAN-FAMILY-INS-CO		TRAVIS KLEIST					
		Individual							
		Driver TRAVIS JOHN KLEIST		Citations Issued		Sex			
	7	(608) 341-7715		Date of Birth		MALE Race			
_	INDIVIDUAL			Date of Sitti		WHITE			
S	2	Address		Driver License Nur	nber				
_	2	S12420 GARDEN PATH SPRING GREEN, WI 53588	us	STATE: WISCO	NSIN COUNTRY: U	NITED STATES			
		,			STATE: WISCONSIN COUNTRY: UNITED STATES				
		 	ash	Safety Equipment					
	Sa	fety Equipment							
		Row	Seat Position 07 - LEFT	SHOULDER & LAP BELT					
		01 - FRONT ROW HelmetUse	07 - LEF1	Helmet Compliance					
		Eye Protection		Tint Compliance					
-	=	Injury Seve	rity	Airbag					
2	8	Injury Possibl	E INJURY	NON DEPLOYE	D				

Crash Date 04/27/2021 Crash Time 04:05 PM

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	80000	Ejected	Ejection Pa	th				Trapped/Extricated			
		NOT EJECTED	NOT EJE	CTED/NOT APP	LICABLE			NOT TRAPPED			
		Medical Transport			EMS Agency Identifier			EMS Run#			
		NOT TRANSPORTE	D								
		Hospital			Date of Death Time of Death						
		District D									
Distracted By NOT APPLICABLE (NOT DISTRACTED) Distracted By Action											
NOT DISTRACTED											
Non Motorist Striking Unit# Location											
	Prior Action										
		Action									
	AL										
UNIT	NDIVIDUAL										
5	IDIV										
	4										
		A (1 O)								T /5 0 1 1	
		Action Other								To/From School	
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		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Typ	e			Alcohol Tes	t Results		
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results						
10	100	Drug Type		l							
		Individual Condition									
		APPEARED NORMA	.L								
		t Summary 💻									
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٦.		cle Type						Operating A		nents	
05		ORT) UTILITY VEHIC					· ·		· · · · · ·		
	Tota	lOccs	Train/Bus#Re	1 '	「otal#Citations Issued ↓		Total Traile	ers	Total HazN	/lat i ypes	
<u>.</u>	Insui NO	rance?	Direction Of Tra		Pre CrashTire Mark		Speed Lim	ìt	TotalLane 2	s	
LINO		tHarmful Event: Collision			Special Function NO SPECIAL FUNCTIO	N		Emergency Motor Vehicle Use NOT APPLICABLE			
	Traff	fic Way		I	raffic Control			Traffic Cont	rol Inoperati	ive/Missing	
		D-WAY, NOT DIVIDED ace Type)		RAFFIC SIGNAL Road Curvature			NO Road Grade	<u> </u>		
		CKTOP (BITUMINOU	JS)		STRAIGHT LEVEL						
	Truc NO	k Bus or HazMat									
		Vehicle								GEG GE GEGEGEGE GEGEGEGEGEGEGEGEGEGEGEG	
		License Plate Number			Plate Type St			Country of Issuance			
		AKT5973			AUT - AUTOMOBILE		WI	UNITED ST	TATES		

Crash Date 04/27/2021
Crash Time 04:05 PM

6TL092T5QV

21-03577

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 04/27/2021

Crash Time 04:05 PM

05	8	Vehicle Identification Number 1C4PJMAK4CW105483		Ma JE	ke EP	Year 2012	Model LBY					
		Color SIL - SILVER (ALUMINUM)			Body Style 4D - 4DR Bus Use							
UNIT	VEHICLE	Initial Contact Point 01 - RtGHT FRONT CORN Extent Of Damage DISABLING DAMAGE	ER		nicle Damage - RIGHT FRONT CORNER	₹						
	7	Towed Due To Damage TOWED DUE TO DISABLE	NG DAMAGE	Ve	hicle Removed By							
		What Driver Was Doing LEFT TURN		Ve	hicle Factors							
		Driver Prior Action Other		NC	OT APPLICABLE							
UNIT	VEHICLE	Driver Actions FAILED TO YIELD RIGHT	-OF-WAY									
05	02	OwnerName JORDAN M RICHTER (608) 459-8058			Owner Address 1165 CLOVER ST PLAIN, WI 53577, US							
		Sequence Of Events										
	5	Event MOTOR VEH IN TRANSPO	ORT									
	ଷ	Event										
	83	Event										
	8	Event										
		individual										
		Driver JORDAN M RICHTER		- 1	Citations Issued \$		Sex MALE					
_	JWIDUA	(608) 459-8058		1	Date of Birth		Race WHITE					
ş	ቜ	Address		Driver License Number								
	Z	1165 CLOVER ST PLAIN, WI 53577 , US		STATE: WISCONSIN COUNTRY: UNITED STATES								
	Sai	l On Duty fety Equipment	Crash	1	Safety Equipment							
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	7	SHOULDER & LAP BELT							
		HeimetUse		Helmet Compliance								
		Eye Protection		Tint Compliance								
8	85	Injury Severity Injury NO APPARENT INJURY			Airbag DEPLOYED-FRONT							
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT A	PPLIC	CABLE		Trapped/Extricated NOT TRAPPED					
		Medical Transport NOT TRANSPORTED			EMS Agency Identifier		EMS Run#					
l												

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Hospital				Date of Death		Time of Death						
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED) Distracted By Action													
Distracted By Action NOT DISTRACTED														
		Non Motorist	Striking Un	it#	Location									
		Prior Action Prior Action												
		Action												
	4													
<u>⊢</u> NS	NDIVIDUAL													
_	Ş													
	-													
		Action Other							To/From School					
			Suspected	Alcohol U	se	Suspected Drug Use								
		Drug & Alcohol No			A inchei Teet Ture	NO		TA 3 17 18 3						
		Alcohol Test Given TEST NOT GIVEN		Alcohol rest type	icohol Test Type		Alcohol Test Results							
		Drug Test Given TEST NOT GIVEN	Drug Test Given Drug Test Type TEST NOT GIVEN				Drug Test Results							
05	8	Drug Type			•									
		Individual Condition												
		APPEARED NORMAL												
		 ndividual												
		Passenger				Citations Issued		Sex						
	4	JEFFREY S BEAU	SKAND			Date of Birth		MALE Race						
—	DIVIDUAL					Date of Birth		WHITE						
ENS.	Ξ	Address				Driver License Number								
	Z	E3901 MARBLE QRY RD PLAIN, WI 53577 , US			STATE: WISCONSIN COUNTRY: UNITED STATES									
	Ç.	On Duty Crash fety Equipment				Safety Equipment								
		Row		SeatPo	sition	SHOULDER & LAP BELT								
		01 - FRONT ROW HelmetUse		09 - RI	GHT									
					Heimet Compliance									
		Eye Protection			TintCompliance									
05	88	Injury Severity NO APPARENT INJURY			Airbag DEPLOYED-FRONT									
		Ejected	Ej	ection Pa	t h	I		Trapped/Extricated						
		NOT EJECTED Medical Transport		OLEVE	CTED/NOT APPL	EMS Agency Identifier		NOT TRAPPED EMS Run#						
		NOT TRANSPORT	ED			Data of Darsit		Time of Consti-						
		Hospital			Date of Death	Time of Death								

6 of 7

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 04/27/2021

Crash Time 04:05 PM

		Distracted By	Distracted By So	игсе						
		Distracted By Action								
		Non Motorist	Striking Unit#	Location						
		Prior Action								
 		Action								
		, toubly								
	3									
EN S	9									
>	INDIVIDUAL									
		Action Other						To/From School		
		Acadii Calei						10/1 TOTH COMOC!		
	1	Orug & Alcohol	Suspected Alcoh NO	nol Use	Suspected Drug Use NO			•		
		Alcohol Test Given		Alcohol Test Type)		Alcohol Test Results			
		TEST NOT GIVEN Drug Test Given		Drug Test Type		Drug Test Results				
		TEST NOT GIVEN		Biog restrypa		Diag restresuis				
05	800	Drug Type								
		Individual Condition								
		APPEARED NORM	IAL							
		Violations								
	5	UTC Number AD978533	Issue To? 002	Statute Number 343.07(1g)(a)1	Description OPERATE MOTOR \	VEHICLE BY PER	RMITTEE W/O INST	RUCTOR		
	7	UTC Number AD978534	Issue To? 002	Statute Number 344.62(1)	Description OPERATE MOTOR VEHICLE W/O INSURANCE					
	8	UTC Number AD978535	Issue To? 002	Statute Number 346.18(3)	Description FAIL/YIELD RIGHT/WAY FROM STOP SIGN					
	8	UTC Number AD978536		Statute Number TR301.34(1)	Description TIRE TREAD DEPTH	+				
		ness 💻								
N 8	TER	ridual RRA R BAHR			Address 7393 SUGAR LOAF R AVOCA, WI 53506 , U			Date of Birth		
WITN										