6TL0D1PTLF 21-04339

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Override	Primary Crash Document#					g Officer/Deputy S. MESSNER			
Crash Date 05/20/2021	Crash Time 04:30 PM		I I		Time Arrive	ived			
Date Notified 05/30/2021 On Emergency Government Property	Time Notified 04:35 PM		Total t	Jnits	Total Injure	d	Total Kille	ed	
On Emergency	Hit and Run	Lane Closu	re	Work Zone	Traile	r or T	owed	***************************************	Reporting Threshold
Government Property	L.J.	School Zone	School NO	l Bus Related	Tags				
▼ Reportable	Crash Type DT4000 (ST	ANDARD CRASH))		Amen	ded			Secondary Crash
Description Diagram							onstructio		
Not to sca		Coon Bluff Road Unit 1 Unit 1 stoppe left	Ţ.	Im CTH H	Unit 2	Ado	itos By P. S. MES		#9134

ON FRIDAY, 5/20/2021, AT 4:30 PM, UNIT 1, A 2016 BIEGE FIAT BEARING WI #688ZWW, WAS OPERATED BY CHRISTINE COSCINO. UNIT 1 WAS WESTBOUND ON CTH H, ACTIVATED ITS LEFT TURN SIGNAL, SLOWED AND CAME TO A STOP TO MAKE A LEFT TURN, YELDING TO ONCOMING TRAFFIC. UNIT 2, A 2014 BLUE JEEP COMPAS BEARING MS #0L46S, WAS OPERATED BY KELSEY M. DREA. UNIT 2 WAS WESTBOUND, AT WICH TIME KELSEY ADMITTED TO LOOKING AWAY AT A MAP AND UPON LOOKING UP ATTEMPTED TO BRAKE AND SWERVED TO MIS UNIT 1. UNIT 2 STRUCK UNIT 1. THIS CAUSED DISABLING DAMAGE TO BOTH VEHICLES AND BOTH VEHICLES WERE REMOVED BY PLATTS TOWING. NO INJURIES TO EITHER DRIVERS.

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

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Lo	cation ===									
	N COON BLUFF RD				Latitude			Longitud	de .	
	7 FT S				43.61595	55884		-89.867	783006	
	F CTHH WB I THE TOWN OF DELLO	NAI A			X Coordin	ate		Y Coordinate		
	I SAUK COUNTY	// !			268595.375 4833216					
						Type UCTURE				
Cı	ash Scene 💳									
	rst Harmful Event				First Harm	ıful Event L	ocation			
М	OTOR VEH IN TRANSP	ORT			ON ROA					
M	anner of Collision				Light Cond	dition				
03	3 - FRONT TO REAR				DAYLIG	HT				
R	oad Surface Condition(s)				Roadway	Factor(s)				
D	RY									
E	nvironment Factor(s)				1					
	ONE				NONE					
	eather Condition(s)									
C	LOUDY									
Ai	nimal Type				Relation T	o Trafficwa	У			
L						CWAY - O				
	rash Classification - Location	1					Jurisdiction			
	PUBLIC PROPERTY Tribal Land				NO SPECIAL JURISDICTION					
					Access Control NO CONTROL				Special Study	
	ithin Interchange Area	Junction Location		Intersection						
Y	ES	INTERSECTION		FOUR-W	AY INTER	RSECTION	1			
Ur	nit Summary 🗨									
-	nit Status		Vehicle Ope	erating As C	lassification		UnitType			
	ITRANSIT		D CLASS				AUTOMOBILE Operating As Endorsements			
	ehicle Type ASSENGER CAR						Operating A	.s Endorse	ments	
	otal Occs	Train/Bus#Recorded	Total#Citat	tione leeuod	1	Total Trai	lers	Total Haz	Mat Types	
1	nai Occs	rian bas ni resonaca	0	10115 155000	•	0	1010	0	ariat i ypoo	
_	surance?	Direction Of Travel		CrashTire		Speed Lir	nit	TotalLan	es	
	ES	WESTBOUND		Mark	55		2 Emergency Motor Vehicle Use			
М	ost Harmful Event: Collision	With	SpecialFur						icle Use	
	OTOR VEH IN TRANSP	ORT	NO SPEC		HON		NOT APP			
	affic Way		Traffic Conf				Traffic Conf	rol Inopera	tive/Missing	
	WO-WAY, NOT DIVIDED)	NO CONT				NO			
	urface Type LACKTOP (BITUMINOU	IS)	Road Curva STRAIGH					Road Grade LEVEL		
	ruck Bus or HazMat	,	STRAIGH	•			LLVEL			
N	0									
	Vehicle									
	License Plate Number		Plate Type			St	Country of Is			
	688ZWW			TOMOBIL	.E	WI	UNITED STATES Model			
•	Vehicle Identification Nu		Make			Year				
		20	FIAT			2016	500X			
	Color BGE - BEIGE		Body Style		TY VEHIC	ıF	Bus Use			
и			Vehicle Da		YERV					
		ORNER	1.5							
			OA - RIGHT SIDE DE		EAR, 05 - RIGHT RE					
Ì	Extent Of Damage		04 - RIGH	IT SIDE R	EAR, 05 -	RIGHT RI	EAR CORNE	R, 06 - R	EAR	
	Extent Of Damage DISABLING DAMAG	E	04 - RIGH	IT SIDE R	EAR, 05 -	RIGHT RI	EAR CORNE	R, 06 - R	EAR	

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		Towed Due To Damage		Vehicle Removed By	
		TOWED DUE TO DISABLII What Driver Was Doing	NG DAMAGE	PLATTS WRECKER	
		LEFT TURN		Vehicle Factors	
		Driver Prior Action Other		NOT APPLICABLE	
		Driver Actions NO CONTRIBUTING ACTION	ON		
_	VEHICLE	NO CONTINUE ACTI	O.Y		
IN N	Ĭ				
_	3				
		OwnerName CHRISTINE COSCINO		Owner Address 3383 3RD LN	
2	5			OXFORD, WI 53952 , US	
		Sequence Of Events			
	5	Event MOTOR VEH IN TRANSPO	ORT		
	N	Event			
	8	_			
	8	Event			
	3	Event			
╘		Policy Holder Insurance Company			
H		AMERICAN-FAMILY-INS-C	20	Individual CHRISTINE COSCINO	
	AH:23333	a —	• •		
		Individual			
		Individual Driver			Sex
		Individual		Citations issued	Sex FEMALE
_		Individual Driver		Citations issued	Sex
TINC		Individual Driver CHRISTINE COSCINO Address		Citations issued	Sex FEMALE Race
UNIT	NDIVIDUAL	Individual Driver CHRISTINE COSCINO Address 3383 3RD LN		Citations Issued O Date of Birth Driver License Number	Sex FEMALE Race WHITE
LINO		Individual Driver CHRISTINE COSCINO Address		Citations Issued 0 Date of Birth	Sex FEMALE Race WHITE
TINO	INDIVIDUAL	Address 3383 3RD LN OXFORD, WI 53952 , US		Citations Issued O Date of Birth Driver License Number	Sex FEMALE Race WHITE
LIND	INDIVIDUAL	Individual Driver CHRISTINE COSCINO Address 3383 3RD LN OXFORD, WI 53952 , US		Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment	Sex FEMALE Race WHITE
TINO	INDIVIDUAL	Address 3383 3RD LN OXFORD, WI 53952 , US On Duty Row	Crash	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN	Sex FEMALE Race WHITE
TINO	INDIVIDUAL	Individual Driver CHRISTINE COSCINO Address 3383 3RD LN OXFORD, WI 53952 , US fety Equipment Row 01 - FRONT ROW	Crash	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT	Sex FEMALE Race WHITE
TINO	INDIVIDUAL	Individual Driver CHRISTINE COSCINO Address 3383 3RD LN OXFORD, WI 53952 , US Fety Equipment Row 01 - FRONT ROW Helmet Use	Crash	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment	Sex FEMALE Race WHITE
TINO	INDIVIDUAL	Individual Driver CHRISTINE COSCINO Address 3383 3RD LN OXFORD, WI 53952 , US fety Equipment Row 01 - FRONT ROW	Crash	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT	Sex FEMALE Race WHITE
	S INDIVIDUAL	Address 3383 3RD LN OXFORD, WI 53952 , US On Duty Ety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection	Crash Seat Position 07 - LEFT	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance	Sex FEMALE Race WHITE
	INDIVIDUAL	Individual Driver CHRISTINE COSCINO Address 3383 3RD LN OXFORD, WI 53952 , US On Duty Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Se NO API	Crash Seat Position 07 - LEFT	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance	Sex FEMALE Race WHITE IITED STATES
	S INDIVIDUAL	Individual Driver CHRISTINE COSCINO Address 3383 3RD LN OXFORD, WI 53952 , US On Duty Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Se NO API	Crash Seat Position 07 - LEFT	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED	Sex FEMALE Race WHITE
	S INDIVIDUAL	Address 3383 3RD LN OXFORD, WI 53952 , US Per Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Se NO API Ejected NOT EJECTED Medical Transport	Crash Seat Position 07 - LEFT Everity PARENT INJURY Ejection Path	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED	Sex FEMALE Race WHITE IITED STATES
	S INDIVIDUAL	Address 3383 3RD LN OXFORD, WI 53952 , US Tety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Se Injury NO API Ejected NOT EJECTED Medical Transport NOT TRANSPORTED	Crash Seat Position 07 - LEFT Everity PARENT INJURY Ejection Path	Citations Issued Date of Birth Drivert idense Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier	Sex FEMALE Race WHITE IITED STATES Trapped/Extricated NOT TRAPPED EMS Run #
	S INDIVIDUAL	Address 3383 3RD LN OXFORD, WI 53952 , US Per Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Se NO API Ejected NOT EJECTED Medical Transport	Crash Seat Position 07 - LEFT Everity PARENT INJURY Ejection Path	Citations Issued Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag NON DEPLOYED	Sex FEMALE Race WHITE IITED STATES Trapped/Extricated NOT TRAPPED
	S INDIVIDUAL	Address 3383 3RD LN OXFORD, WI 53952 , US On Duty Tety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Injury Medical Transport NOT TRANSPORTED Hospital	Crash Seat Position 07 - LEFT Everity PARENT INJURY Ejection Path NOT EJECTED/NOT AP	Citations Issued Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier Date of Death	Sex FEMALE Race WHITE IITED STATES Trapped/Extricated NOT TRAPPED EMS Run #
	S INDIVIDUAL	Address 3383 3RD LN OXFORD, WI 53952 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Se Injury NO API Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital	Crash Seat Position 07 - LEFT Everity PARENT INJURY Ejection Path NOT EJECTED/NOT AP	Citations Issued Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier Date of Death	Sex FEMALE Race WHITE IITED STATES Trapped/Extricated NOT TRAPPED EMS Run #

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1		CA.II.		1 6						
		Non Motorist	ing Unit#	Location						
		Prior Action								
!		Action								
	4									
	INDIVIDUAL									
UNIT	M									
	Z									
		Action Other								To/From School
	1	Drug & Alcohol NO	oected Alcohol U	se	Suspected Drug Use NO					
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	•			Alcohol Test f	Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug T	est Results			
_	_	Drug Type								
01	9									
		Individual Condition								
		APPEARED NORMAL								
		t Summary ===								
		Status 'RANSIT		I	ehicle Operating As Classi CLASS	ification		Unit Type AUTOMOB	LE	
02		icle Type						Operating As	Endorsen	nents
		ORT) UTILITY VEHICLE	Train/Bus#Re	corded T	otal#Citations ssued		Total Traile	ers T	Total HazN	Mat Types
	1		Direction Of Tra	0			0 Speed Lim) Fotal Lane	_
ь	YES	rance?	WESTBOUN		Pre CrashTire Mark		55		otarcane 2	15
TINO		tHarmfulEvent: Collision Wi TOR VEH IN TRANSPOF			Special Function NO SPECIAL FUNCTION			Emergency Motor Vehicle Use NOT APPLICABLE		
		fic Way D-WAY, NOT DIVIDED			raffic Control		Traffic Control Inoperative/Missing NO			
		ace Type		I	oad Curvature			Road Grade		
		ACKTOP (BITUMINOUS) k Bus or HazMat		s	TRAIGHT			LEVEL		
	NO									
	,	Vehicle License Plate Number		T r	Plate Type	T	St	Country of less	iance	SISTA SESTINISTE SESTI
		0L46S			AUT - AUTOMOBILE	MS		Country of Issuance UNITED STATES		
02	8	Vehicle Identification Numb 1C4NJDBB9ED568157		I	Vake JEEP		Year 2014	Model COMPASS		
		Color			Body Style			Bus Use		
		BLU - BLUE			4D - 4DR					
⊨	П	Initial Contact Point 11 - LEFT FRONT COR	NER	'	Vehicle Damage					
UNIT	VEHICL	Extent Of Damage DISABLING DAMAGE		,	10 - LEFT SIDE FRONT	Г, 11 - І	LEFT FRO	NT CORNE	R, 12 - FF	RONT
		Towed Due To Damage	DI 1810 D		Vehicle Removed By					
		TOWED DUE TO DISA	BLING DAMA	5 E	PLATTS WRECKER					

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Crash Time 04:30 PM

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		What Driver Was Doing		V	ehicle Factors			
		GOING STRAIGHT						
		Driver Prior Action Other		N	IOT APPLICABLE			
		Driver Actions OTHER CONTRIBUTING	ACTION					
_	VEHICLE	OTHER CONTRIBUTING	4011014					
INI	2							
⋾	曲							
	7							
		Owner Name			Owner Address			
		KELSEY MARIE DREA			2301 ATWOOD AVE # 25	3		
05	62				MADISON, WI 53704 , L	JS		
		Sequence Of Events				ryeryeryeryeryeryer		
		Event		***************************************	***************************************	301-1301-1301-1301-1301-1301-130		
	5	MOTOR VEH IN TRANSP	ORT					
	8	Event						
	63	Event						
		Fire						
	8	Event						
≒		Policy Holder						
TNO.		Insurance Company ROOT INSURANCE COM	-ΔΝΥ		Individual KELSEY DREA			
					1,000,000			
		Individual			Citations Issued			
		Driver KELSEY MARIE DREA			0		Sex F EMALE	
	₹				Date of Birth		Race	
—	8				23.0 0.2		WHITE	
FIND	INDIVIDUAL	Address			Driver License Number			
ر	9	2301 ATWOOD AVE # 28			STATE: WISCONSIN COU	NITOV. I INITE	ED STATES	
		MADISON, WI 53704 , US	•		STATE: WISCONSIN COU	MIKI OMII	ED STATES	
	Ç,	ety Equipment On Duty	Crash		Safety Equipment			
			1		CHOSSIDED O LAB DEST			
		Row 01 - FRONT ROW	SeatPo 07 - LE		SHOULDER & LAP BELT			
		HelmetUse	0,- 2	-F)	Helmet Compliance			
		Heilietose			Heiner Compilance			
		Eye Protection			Tint Compliance			
					·			
05	8	Injury S	everity		Airbag			
0	•	Injury no ap			NON DEPLOYED			
		Ejected	Ejection Pa		IOADI E		Frapped/Extricated	
		NOT EJECTED Medical Transport	MOLETE	CTED/NOT APPL			NOT TRAPPED	
		NOT TRANSPORTED			EMS Agency Identifier	1	EMS Run#	
		Hospital			Date of Death		Fime of Death	
		. The same						
		Distract	ed By Source)	I			
		Distracted By OTHER	R DISTRAC	TION (ANIMAL, F	FOOD, GROOMING)			
		Distracted By Action	C AWAY :	DOM TARY ETG				
		OTHER ACTION (LOOKIN			1			
		Non Motorist	Unit#	Location				
				I				

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1 8		Truinu Antinu					
		Prior Action Prior Action					
		Action					
	4						
l <u>⊨</u> ∜	2						
UNIT	INDIVIDUAL						
⊃	Ħ						
	Z						
		Action Other					To/From School
		Suspected Alcohol	Use	Suspected Drug Use			
	i	Drug & Alcohol NO		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					
02	005	Drug Type	•		•		
0	8						
		Individual Condition					
		APPEARED NORMAL					
		AT LAKED HOKWAL					
1							