WISCONSIN MOTOR VEHICLE CRASH REPORT

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

E	Occument Number Override	Primary Crash E	ocument#	Agency 21-061	/ Crash Number 169		Officer/Deputy S. SCHLOUGH		
$\mathbf{C} \circ$	7/05/2021	Crash Time 04:38 PM		Date Ar 07/05/		Time Arrived 04:49 PM			
	Pate Notified 7/05/2021	Time Notified 04:41 PM		Total U	nits	Total Injured	Total Kille	d	
֓֞֞֜֝֟֝֟֝֟֝֟֝֟֝֟֝֟֟֝֟֟֝֟֝֟֟֝֟֟֝֟֟֝֟֟֝֟֟֝֟֟֝	On Emergency Hit	and Run	Lane Closu	ıre	☐ Work Zone	Trailer	or Towed	Reporting Threshold	
	Government Property	Active Sc	hool Zone	School NO	Bus Related	Tags			
G	Reportable	Crash Type DT4000 (STA	NDARD CRASH)		Amend	led	Secondary Crash	
	escription Biagram					·			
							Photos By		
	DDAMING NOT TO SSA				USH 12		Additional Info	rmation	
	DRAWING NOT TO SCA	And Andreas							
T.	i, a sworn law enforceme init 1 AND UNIT 2 WERE TRAVELI OTH UNITS PULLED OFF ONTO T IND DIDN'T SEE THEM SLOW."	NG E/B ON USH	12. UNIT 2 SLOWE	D DUE T	O REGULAR CONGEST	ON. UNIT 2 THEN			

Location

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Crash Date 07/05/2021

Crash Time 04:38 PM

	ON USH12 EB 1241 FT S				Latitude 43.27834	15837		Longitud	e 074697
	OF SAUK PRAIRIE RD IN THE TOWN OF PRAIRIE IN SAUK COUNTY			X Coordin 276124.8			Y Coord 479542		
					Structure NO STR			•	
ı	Crash Scene								
•	First Harmful Event				FirstHarm	ful Event Lo	cation		
	MOTOR VEH IN TRANSPO	RT			ON ROA	DWAY			
	Manner of Collision		Light Condition						
	03 - FRONT TO REAR				DAYLIGI				
	Road Surface Condition(s)				Roadway	Factor(s)			
	DRY								
	Environment Factor(s)				1				
	NONE				BACKUF	DUE TO	REGULAR (CONGEST	TION
	Weather Condition(s)				1				
	CLEAR								
	AnimalType				1	o Trafficway			
	Crash Classification - Location				Crash Clas	ssification -	Jurisdiction		
	PUBLIC PROPERTY				NO SPE	CIAL JURI	SDICTION		
	Tribal Land				1	Access Control NO CONTROL			Special Study
	Within Interchange Area	Junction Location		Intersection Type				I	
	NO	NON-JUNCTION		NOT AN	INTERSE	CTION			
	Unit Summary 👅								
	Unit Status		Vehicle Ope	rating As C	lassification		UnitType		
	IN TRANSIT		D CLASS		AUTOMOBILE				
5	Vehicle Type (SPORT) UTILITY VEHICLE	E					Operating As Endorsements		
	Total Occs	Train/Bus#Recorded		Total # Citations Issued		d Total Traile			Mat Types
	1		2		0		0		
	Insurance?	Direction Of Travel		CrashTire	•	Speed Lim	nit	TotalLane	es
Ţ	YES	EASTBOUND		Mark		55	I = maraanau	2	iele Uee
5	Most Harmful Event: Collision W MOTOR VEH IN TRANSPO			Special Function NO SPECIAL FUNCTIO				Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way		Traffic Cont	rol			Traffic Control Inoperative/Missing		
	TWO-WAY, NOT DIVIDED		NO CONT	NO CONTROL			NO		
	Surface Type		Road Curva				Road Grade LEVEL		
	BLACKTOP (BITUMINOUS)	STRAIGH	Т					
	Truck Bus or HazMat NO								
					·ccececece	· coccetee	S S S S S S S S S S S S S S S S S S S		
	Vehicle License Plate Number		Plate Type			St	Country of Is		
	Vehicle License Plate Number AKY5709		AUT - AU		.E	WI	UNITED ST		
_	Vehicle License Plate Number AKY5709 Vehicle Identification Num		AUT - AU Make		.E	WI Year	UNITED ST		
	Vehicle License Plate Number AKY5709 Vehicle Identification Num 1J4FY19S6XP426574		AUT - AU Make JEEP	TOMOBII	-E	WI	UNITED ST Model WRG		
5	Vehicle License Plate Number AKY5709 Vehicle Identification Num		AUT - AU Make	TOMOBII		WI Year	UNITED ST		
5	Vehicle License Plate Number AKY5709 Vehicle Identification Num 1J4FY19S6XP426574 Color BLK - BLACK		AUT - AU Make JEEP Body Style	TOMOBII		WI Year	UNITED ST Model WRG		
	Vehicle License Plate Number AKY5709 Vehicle Identification Num 1J4FY19S6XP426574 Color BLK - BLACK		AUT - AU Make JEEP Body Style 2T - HARI Vehicle Da	TOMOBII DTOP 2 E		WI Year	UNITED ST Model WRG		
	Vehicle License Plate Number AKY5709 Vehicle Identification Num 1J4FY19S6XP426574 Color BLK - BLACK Initial Contact Point		AUT - AU Make JEEP Body Style 2T - HAR	TOMOBII DTOP 2 E		WI Year	UNITED ST Model WRG		

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21-06169

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

	**************************************	Towed Due To Damage		Vehicle Removed By		
		NOT TOWED		OPERATOR		
		What Driver Was Doing		Vehicle Factors		
		GOING STRAIGHT		l		
		Driver Prior Action Other		NOT APPLICABLE		
LINI	VEHICLE	Driver Actions OTHER CONTRIBUTING A	CTION			
Б	01	Owner Name TIFFENY AUSTIN RUSSEL (608) 477-1611	L	Owner Address S9904 COUNTY ROAD E SAUK CITY, WI 53583 , US		
		Sequence Of Events				
	5	Event MOTOR VEH IN TRANSPO		redostativita (hvite dostativita (hvite dostativita (hvite dostativita (hvite dostativita (hvite dostativita (h	interdisens telisteristens er disens telistens er disens sens telistens telistens telistens telistens telisten	
	8	Event				
	3	Event				
	3	Event				
		Policy Holder				
UNIT		Insurance Company PROGRESSIVE-CASUALTY-INS-CO		Individual		
\neg				TIFFENY RUSSELL		
		Individual				
		Individual Driver		Citations Issued	Sex	
		Individual		Citations issued 2		
L		Individual Driver TIFFENY AUSTIN RUSSEL		Citations issued 2 Date of Birth	Sex FEMALE	
TINO	INDIVIDUAL	Individual Driver TIFFENY AUSTIN RUSSEL	. L	Citations issued 2	Sex FEMALE Race WHITE	
LIND	INDIVIDUAL	Individual Driver TIFFENY AUSTIN RUSSEL (608) 477-1611 Address S9904 COUNTY ROAD E SAUK CITY, WI 53583 , US	. L	Citations issued 2 Date of Birth Drivert icense Number	Sex FEMALE Race WHITE	
LINO	INDIVIDUAL	Individual Driver TIFFENY AUSTIN RUSSEL (608) 477-1611 Address S9904 COUNTY ROAD E SAUK CITY, WI 53583, US	.L 3 Crash	Citations issued 2 Date of Birth Drivert icense Number STATE: WISCONSIN COUNTRY: UN Safety Equipment	Sex FEMALE Race WHITE	
TINO	INDIVIDUAL	Individual Driver TIFFENY AUSTIN RUSSEL (608) 477-1611 Address S9904 COUNTY ROAD E SAUK CITY, WI 53583 , US fety Equipment Row 01 - FRONT ROW	. L	Citations issued 2 Date of Birth Drivert icense Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT	Sex FEMALE Race WHITE	
FIND	INDIVIDUAL	Individual Driver TIFFENY AUSTIN RUSSEL (608) 477-1611 Address S9904 COUNTY ROAD E SAUK CITY, WI 53583 , US Fety Equipment Row	L Crash Seat Position	Citations issued 2 Date of Birth Drivert icense Number STATE: WISCONSIN COUNTRY: UN Safety Equipment	Sex FEMALE Race WHITE	
HNO	INDIVIDUAL	Individual Driver TIFFENY AUSTIN RUSSEL (608) 477-1611 Address S9904 COUNTY ROAD E SAUK CITY, WI 53583 , US fety Equipment Row 01 - FRONT ROW	L Crash Seat Position	Citations issued 2 Date of Birth Drivert icense Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT	Sex FEMALE Race WHITE	
	INDIVIDUAL	Individual Driver TIFFENY AUSTIN RUSSEL (608) 477-1611 Address S9904 COUNTY ROAD E SAUK CITY, WI 53583 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Sev	Crash Seat Position 07 - LEFT Verity PARENT INJURY	Citations issued 2 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance	FEMALE Race WHITE ITED STATES	
	S INDIVIDUAL	Individual Driver TIFFENY AUSTIN RUSSEL (608) 477-1611 Address S9904 COUNTY ROAD E SAUK CITY, WI 53583 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Sev NO APP	Crash Seat Position 07 - LEFT Verity PARENT INJURY Ejection Path	Citations issued 2 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag NON DEPLOYED	FEMALE Race WHITE ITED STATES Trapped/Extricated	
	S INDIVIDUAL	Individual Driver TIFFENY AUSTIN RUSSEL (608) 477-1611 Address S9904 COUNTY ROAD E SAUK CITY, WI 53583 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Ejected	Crash Seat Position 07 - LEFT Verity PARENT INJURY	Citations issued 2 Date of Birth Drivert icense Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag NON DEPLOYED	FEMALE Race WHITE ITED STATES	
	S INDIVIDUAL	Individual Driver TIFFENY AUSTIN RUSSEL (608) 477-1611 Address S9904 COUNTY ROAD E SAUK CITY, WI 53583 , US Fety Equipment Row 01 - FRONT ROW HelmetUse Eye Protection Injury Figetted NO APP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED	Crash Seat Position 07 - LEFT Verity PARENT INJURY Ejection Path	Citations issued 2 Date of Birth Drivert icense Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier	Race WHITE ITED STATES Trapped/Extricated NOT TRAPPED EMS Run#	
	S INDIVIDUAL	Individual Driver TIFFENY AUSTIN RUSSEL (608) 477-1611 Address S9904 COUNTY ROAD E SAUK CITY, WI 53583 , US Gety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Sey NO APP Ejected NOT EJECTED Medical Transport	Crash Seat Position 07 - LEFT Verity PARENT INJURY Ejection Path	Citations issued 2 Date of Birth Drivert icense Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag NON DEPLOYED	FEMALE Race WHITE ITED STATES Trapped/Extricated NOT TRAPPED	
	S INDIVIDUAL	Individual Driver TIFFENY AUSTIN RUSSEL (608) 477-1611 Address S9904 COUNTY ROAD E SAUK CITY, WI 53583 , US 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 PARENT INJURY Ejection Path NOT EJECTED/NOT API	Citations issued 2 Date of Birth Drivert icense Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier	Race WHITE ITED STATES Trapped/Extricated NOT TRAPPED EMS Run#	

Crash Date 07/05/2021
Crash Time 04:38 PM

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Crash Date 07/05/2021

Crash Time 04:38 PM

		_									
		Non Motorist	Striking Unit#	Location							
		Prior Action									
UNIT	NDIVIDUAL	Action									
_	IONI	Action Other									To/From School
			C	- L - 11 1		Commented Describes					
	Ľ	Drug & Alcohol	Suspected Alco NO	onoi Ose		Suspected Drug Use NO					
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Ty	/pe				Alcohol Test	:Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type	+		Drug T	Test Results	3		
5	100	Drug Type									
		Individual Condition									
		APPEARED NORM	IAL								
	١	/iolations	***	***********	nanana				*****	SERECES SERVICES	
	0.1	UTC Number BG024589	Issue To?	Statute Number 346.89(1)		Description INATTENTIVE DRIVI	NG				
	02	UTC Number BG024590	Issue To? 001	Statute Number 343.44(1)(a)		Description OPERATING WHILE	SUSP	ENDED			
	Unit	Summary •									
		Status RANSIT			Vehicle Operating As Classification D CLASS			UnitType AUTOMOBILE			
05	Vehi	nicle Type PORT) UTILITY VEHICLE							Operating As Endorsements		
	Tota 1	Occs	Train/Bus	#Recorded	To 0	tal#CitationsIssued		Total Trail	ers	Total HazN 0	1at Types
F	Insur YES	ance?	Direction (Pre CrashTire Speed Lin Mark 55		Speed Lin 55	nit	Total Lanes	S
LIND		Harmful Event: Collisio			Special Function NO SPECIAL FUNCTION				Emergency Motor Vehicle Use NOT APPLICABLE		
		ic Way D-WAY, NOT DIVIDE	ĒD			affic Control CONTROL			Traffic Contr	ol Inoperati	ve/Missing
		ace Type .CKTOP (BITUMING	ous)			Road Curvature STRAIGHT			Road Grade LEVEL		
		k Bus or HazMat	,						1		
		/ehicle			55555						
		License Plate Number	•		ΙP	late Type	Ī	St	Country of Iss	suance	
		AKV3157			Α	UT - AUTOMOBILE		WI	UNITED STATES		
05	02	Vehicle Identification I 5FNYF28717B0022			Н	lake ONDA		Year 2007	Model PILOT		
		Color GRY - GRAY			Body Style Bus Use 4D - 4DR						

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21-06169

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Crash Date 07/05/2021

Crash Time 04:38 PM

				I						
<u> </u>	VEHICLE	Initial Contact Point 06 - REAR		Vehicle Damage						
INN	呈	Extent Of Damage		06 - REAR						
_	y	FUNCTIONAL DAMAGE								
		Towed Due To Damage		Vehicle Removed By						
		NOT TOWED		OPERATOR						
		What Driver Was Doing		Vehicle Factors						
		SLOW/STOPPING Driver Prior Action Other		NOT APPLICABLE						
		Driver Prior Action Other								
		Driver Actions NO CONTRIBUTING ACTION								
	щ	NO CONTRIBUTING ACTION								
N	ᄗ									
5	VEHICLE									
		OwnerName		Owner Address						
۱.		ROBERT BURNETT HEM!	-	2100 N MAYFAIR RD # 223						
8	8	(619) 865-0945		WAUWATOSA, WI 53226 , US						
		Sequence Of Events								
	5	Event MOTOR VEH IN TRANSPO	ORT							
	8	Event								
	100000	Event								
		C Continue of the continue of								
	8	Event								
		Event								
	2									
L	2	Policy Holder								
TINO	2	Policy Holder Insurance Company		Individual						
UNIT	70	Policy Holder Insurance Company USAA-CASUALTY-INS-CO		Individual ROBERT HEMP						
TINO	70	Policy Holder Insurance Company USAA-CASUALTY-INS-CO		ROBERT HEMP						
TINO	70	Policy Holder Insurance Company USAA-CASUALTY-INS-CO		ROBERT HEMP Citations Issued	Sex					
UNIT	70	Policy Holder Insurance Company USAA-CASUALTY-INS-CO Individual Driver		Citations issued 0	Sex MALE					
	70	Policy Holder Insurance Company USAA-CASUALTY-INS-CO Individual Driver ROBERT BURNETT HEMI		ROBERT HEMP Citations Issued	Sex					
	70	Policy Holder Insurance Company USAA-CASUALTY-INS-CO Individual Driver ROBERT BURNETT HEM (619) 865-0945 Address		Citations issued 0	Sex MALE Race					
UNT UNIT	NDIVIDUAL 04	Policy Holder Insurance Company USAA-CASUALTY-INS-CO Individual Driver ROBERT BURNETT HEMI (619) 865-0945 Address 2100 N MAYFAIR RD # 223	P	ROBERT HEMP Citations Issued Date of Birth Driver License Number	Sex MALE Race WHITE					
	70	Policy Holder Insurance Company USAA-CASUALTY-INS-CO Individual Driver ROBERT BURNETT HEM (619) 865-0945 Address	P	Citations issued O Date of Birth	Sex MALE Race WHITE					
	NDIVIDUAL 04	Policy Holder Insurance Company USAA-CASUALTY-INS-CO Individual Driver ROBERT BURNETT HEM! (619) 865-0945 Address 2100 N MAYFAIR RD # 22: WAUWATOSA, WI 53226	P 3 , us	Citations Issued O Date of Birth Drivert icense Number STATE: WISCONSIN COUNTRY: N	Sex MALE Race WHITE					
	INDIVIDUAL 04	Policy Holder Insurance Company USAA-CASUALTY-INS-CO Individual Driver ROBERT BURNETT HEMI (619) 865-0945 Address 2100 N MAYFAIR RD # 223	P 3 , us	ROBERT HEMP Citations Issued Date of Birth Driver License Number	Sex MALE Race WHITE					
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TNU	S INDIVIDUAL 04	Policy Holder Insurance Company USAA-CASUALTY-INS-CO Individual Driver ROBERT BURNETT HEMI (619) 865-0945 Address 2100 N MAYFAIR RD # 22: WAUWATOSA, WI 53226 On Duty Row 01 - FRONT ROW Helmet Use Eye Protection	P 3 , US Crash Seat Position 07 - LEFT	ROBERT HEMP Citations Issued 0 Date of Birth Drivert Icense Number STATE: WISCONSIN COUNTRY: 1 Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance	Sex MALE Race WHITE					
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		Distracted By Source	ce .				
		Distracted By NOT APPLICAB	LE (NUT DISTRAC	JIED)			
		Distracted By Action NOT DISTRACTED					
		Non Motorist Striking Unit#	Location				
		Prior Action					
		Action					
	_1						
	NOWEVAL						
UNIT	₫						
5	ā						
	Z						
		Action Other					To/From School
							, , , , , , , , , , , , , , , , , , , ,
	I	Drug & Alcohol NO	Use	Suspected Drug Use NO			
		Alcohol Test Given	Alcohol Test Type			Alcohol Test Results	
		TEST NOT GIVEN					
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results	;	
70	005	Drug Type	•		•		
	7						
		Individual Condition					
		APPEARED NORMAL					