WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash Document# Crash Time 11:18 AM		21-07251 E Date Arrived T			Investigating Officer/Deputy DEPUTY C. FRANK Time Arrived 11:38 AM		
(X	Crash Date 08/02/2021					I			
6TL0D5DXX9	Date Notified 08/02/2021	Time Notified 11:19 AM		Total Ur 02	nits	Total Ir 00	njured	Total Kille	.
00-	On Emergency Hin	t and Run	Lane Closu		☐ Work Zone		ailer or	Towed	Reporting Threshold
9 1 1	Government Property	l	hool Zone	School NO	Bus Related	Tags			
	Reportable	Crash Type DT4000 (STA	NDARD CRASH)		[Ar	nended		Secondary Crash
	Description Diagram								_
						b		otos By	
		Ishnala Rd			Not to scale		Adi	ditional Info	mation
	I, a sworn law enforcement on the above date and time U on IshnaLa RD APPROACHING F	JNIT 1 WAS SOUT ERN DELL RD. UN	HBOUND AND STO IIT 2 OPERATOR F.	PPED AT AILED TO	THE STOP SIGN ON ISI	HNALA RD /	AT FERN D		
	IN THE READ. UNIT 2 STRUCK UNI	IT 1 REAR WITH U	NIT 2 FRONT END.						

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Crash Date 08/02/2021

Crash Time 11:18 AM

	Location —								
	ON ISHNALA RD				Latitude			Longitu	de
	108 FT N					94522			3748632
	OF FERN DELL RD				X Coordinate			Y Coord	linato.
	IN THE TOWN OF DELT	ON			273962.9			482699	
	IN SAUK COUNTY				Structure			1,0200	
					Structure	ı ype			
	Crash Scene -								
	First Harmful Event				FirstHarm	nful Event L	ocation		
	MOTOR VEH IN TRANS	PORT			ON ROA	DWAY			
	Manner of Collision				Light Con	dition			
	03 - FRONT TO REAR				DAYLIG	HT			
	Road Surface Condition(s)				Roadway	Factor(s)			
	DRY								
	Environment Factor(s)				1				
	NONE				NONE				
	Weather Condition(s)				1				
	CLEAR								
	Animal Type				1	o Trafficwa	•		
					TRAFFICWAY - ON ROAD				
	Crash Classification - Location -	on			Crash Classification - Jurisdiction NO SPECIAL JURISDICTION				
	Tribal Land				Access Control Special Stu NO CONTROL		Special Study		
	Within Interchange Area	Junction Location INTERSECTION-RELAT	ED	Intersection Type T-INTERSECTION					•
	Unit Summary			·					
	Unit Status		Vehicle Ope	erating As C	lassification	1	UnitType		
	IN TRANSIT		D CLASS	-	TRUCK				
_	Vehicle Type				Operating As Endorsements				
0	UTILITY TRUCK/PICKU	P TRUCK							
	Total Occs	Train/Bus#Recorded	Total#Citat	Total # Citations Issued		d TotalTrail		TotalHaz	:Mat Types
	2		0			0		0	• •
	Insurance?	Direction Of Travel	Pre	CrashTire	Speed Lim		imit Total Lanes		es
<u>.</u>	YES	SOUTHBOUND		Mark		45		2	
	Most Harmful Event: Collisio	n With	Special Fur	nction	CTION		Emergency Motor Vehicle Use		
_	MOTOR VEH IN TRANS	PORT	NO SPEC	IAL FUNC			NOT APPLICABLE Traffic Control Inoperative/Missing NO		
	Traffic Way		Traffic Conf	trol					
	TWO-WAY, NOT DIVIDE	D	NO CONT	ROL					
	Surface Type		Road Curva				Road Grade DOWNHILL		
	BLACKTOP (BITUMINO	US)	STRAIGH	T					
	Truck Bus or HazMat NO								
	Vehicle								SSESSES SESSES SESSES SESSES SESSES SESSES
	License Plate Number		Plate Type	<u></u>		St	Country of Is	suance	
	DH22061		1	GHT TRUC	:K	WI	UNITED STATES		
	Vehicle Identification N	Make			Year	Model			
0	5 IGC4YUEY1LF122	CHEVRO	LET		2020	Model SILVERADO			
	Color	· · · -	Body Style						
	88							Bus Use	
	Initial Contact Point			PK - PICKUP Vehicle Damage					
E				·					
UNIT	Extent Of Damage		05 - RIGH	HT REAR	CORNER,	06 - REAI	R, 07 - LEFT	REAR C	ORNER
	MINOR DAMAGE								

6TL0D5DXX9

21-07251

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		Towed Due To Damage		Vehicle Removed By						
		NOT TOWED		OWNER						
		What Driver Was Doing STOP IN TRAFFIC		Vehicle Factors						
		Driver Prior Action Other		NOT APPLICABLE						
		Driver Frior Action Office								
		Driver Actions								
	Щ	NO CONTRIBUTING ACTION								
UNIT	9									
5	VEHICLE									
	7									
		Owner Name		Owner Address						
_		ROBERT J LUCAS		E5186 HERRITZ RD						
2	5	(608) 532-0458		REEDSBURG, WI 5395	J , US					
		Sequence Of Events								
	5	Event MOTOR VEH IN TRANSPOR	RT							
	N	Event								
	8									
	60	Event								
		Event								
	2									
_		Policy Holder								
INN		Insurance Company		Individual						
\supset	20211111	GEICO-ADVANTAGE-INSUI	RANCE-CO	ROBERT LUCAS						
				111111111111111111111111111111111111111						
		Individual								
		Individual Driver		Citations Issued	Sex					
		Individual		Citations issued 0	Sex MALE					
L		Individual Driver ROBERT J LUCAS		Citations Issued	Sex					
TINC		Individual Driver ROBERT J LUCAS (608) 532-0458 Address		Citations issued 0	Sex MALE Race					
UNIT		Driver ROBERT J LUCAS (608) 532-0458 Address E5186 HERRITZ RD		Citations Issued O Date of Birth	Sex MALE Race WHITE					
LIND	INDIVIDUAL	Individual Driver ROBERT J LUCAS (608) 532-0458 Address		Citations Issued 0 Date of Birth Driver License Number	Sex MALE Race WHITE					
TINO	INDIVIDUAL	Individual Driver ROBERT J LUCAS (608) 532-0458 Address E5186 HERRITZ RD REEDSBURG, WI 53959 , U	us	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COM	Sex MALE Race WHITE					
TINO	INDIVIDUAL	Individual Driver ROBERT J LUCAS (608) 532-0458 Address E5186 HERRITZ RD REEDSBURG, WI 53959 , U	us	Citations Issued 0 Date of Birth Driver License Number	Sex MALE Race WHITE					
LIND	INDIVIDUAL	Individual Driver ROBERT J LUCAS (608) 532-0458 Address E5186 HERRITZ RD REEDSBURG, WI 53959 , to the company of the company	US Crash Seat Position	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COM	Sex MALE Race WHITE UNITED STATES					
FIND	INDIVIDUAL	Individual Driver ROBERT J LUCAS (608) 532-0458 Address E5186 HERRITZ RD REEDSBURG, WI 53959 , L Fety Equipment Row 01 - FRONT ROW	US Crash	Citations Issued Date of Birth Driver License Number STATE: WISCONSIN COL Safety Equipment SHOULDER & LAP BELT	Sex MALE Race WHITE UNITED STATES					
TINO	INDIVIDUAL	Individual Driver ROBERT J LUCAS (608) 532-0458 Address E5186 HERRITZ RD REEDSBURG, WI 53959 , to the company of the company	US Crash Seat Position	Citations Issued Date of Birth Driver License Number STATE: WISCONSIN COM Safety Equipment	Sex MALE Race WHITE UNITED STATES					
TINO	INDIVIDUAL	Individual Driver ROBERT J LUCAS (608) 532-0458 Address E5186 HERRITZ RD REEDSBURG, WI 53959 , L Fety Equipment Row 01 - FRONT ROW	US Crash Seat Position	Citations Issued Date of Birth Driver License Number STATE: WISCONSIN COL Safety Equipment SHOULDER & LAP BELT	Sex MALE Race WHITE UNITED STATES					
TINO	INDIVIDUAL	Individual Driver ROBERT J LUCAS (608) 532-0458 Address E5186 HERRITZ RD REEDSBURG, WI 53959 , U Fety Equipment Row 01 - FRONT ROW HelmetUse Eye Protection	US Crash Seat Position 07 - LEFT	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COL Safety Equipment SHOULDER & LAP BELT Heimet Compliance	Sex MALE Race WHITE UNITED STATES					
	S INDIVIDUAL	Individual Driver ROBERT J LUCAS (608) 532-0458 Address E5186 HERRITZ RD REEDSBURG, WI 53959 , L Cety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Sev	US Crash Seat Position 07 - LEFT	Citations Issued O Date of Birth Driver License Number STATE: WISCONSIN COL Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag	Sex MALE Race WHITE UNITED STATES					
	INDIVIDUAL	Individual Driver ROBERT J LUCAS (608) 532-0458 Address E5186 HERRITZ RD REEDSBURG, WI 53959 , to Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Sev	US Crash Seat Position 07 - LEFT Verity ARENT INJURY	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COL Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance	Sex MALE Race WHITE UNITED STATES					
	S INDIVIDUAL	Individual Driver ROBERT J LUCAS (608) 532-0458 Address E5186 HERRITZ RD REEDSBURG, WI 53959 , to the second seco	US Crash Seat Position 07 - LEFT	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COM Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag NON DEPLOYED	Sex MALE Race WHITE UNITED STATES					
	S INDIVIDUAL	Individual Driver ROBERT J LUCAS (608) 532-0458 Address E5186 HERRITZ RD REEDSBURG, WI 53959 , to the second seco	US Crash Seat Position 07 - LEFT Verity ARENT INJURY Ejection Path	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COM Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag NON DEPLOYED	Sex MALE Race WHITE UNITED STATES Trapped/Extricated					
	S INDIVIDUAL	Individual Driver ROBERT J LUCAS (608) 532-0458 Address E5186 HERRITZ RD REEDSBURG, WI 53959 , L Cety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury NO APP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED	US Crash Seat Position 07 - LEFT Verity ARENT INJURY Ejection Path	Citations Issued Date of Birth Driver License Number STATE: WISCONSIN COL Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier	Sex MALE Race WHITE UNITED STATES Trapped/Extricated NOT TRAPPED EMS Run#					
	S INDIVIDUAL	Individual Driver ROBERT J LUCAS (608) 532-0458 Address E5186 HERRITZ RD REEDSBURG, WI 53959 , to the second sec	US Crash Seat Position 07 - LEFT Verity ARENT INJURY Ejection Path	Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COS Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED	Sex MALE Race WHITE UNITED STATES Trapped/Extricated NOT TRAPPED					
	S INDIVIDUAL	Individual Driver ROBERT J LUCAS (608) 532-0458 Address E5186 HERRITZ RD REEDSBURG, WI 53959 , L On Duty C Pety 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 API	Citations Issued Date of Birth Driver License Number STATE: WISCONSIN COS Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier Date of Death	Sex MALE Race WHITE UNITED STATES Trapped/Extricated NOT TRAPPED EMS Run#					
	S INDIVIDUAL	Individual Driver ROBERT J LUCAS (608) 532-0458 Address E5186 HERRITZ RD REEDSBURG, WI 53959 , L Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Injury NO APP. Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital	Seat Position 07 - LEFT Verity ARENT INJURY Ejection Path NOT EJECTED/NOT API	Citations Issued Date of Birth Driver License Number STATE: WISCONSIN COS Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier Date of Death	Sex MALE Race WHITE UNITED STATES Trapped/Extricated NOT TRAPPED EMS Run#					
	S INDIVIDUAL	Individual Driver ROBERT J LUCAS (608) 532-0458 Address E5186 HERRITZ RD REEDSBURG, WI 53959 , L On Duty C Pety 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 API	Citations Issued Date of Birth Driver License Number STATE: WISCONSIN COS Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier Date of Death	Sex MALE Race WHITE UNITED STATES Trapped/Extricated NOT TRAPPED EMS Run#					

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		Striking Non Motorist	Unit#	Location				
		Prior Action		1				
	_	Action						
UNIT	INDIVIDUAL							
-	Š							
		Action Other						To/From School
								10)F10m 5cn00i
	i	Drug & Alcohol NO	ted Alcohol t	jse	Suspected Drug Use NO			
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	•		Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		
5	100	Drug Type		'				
		Individual Condition						
		APPEARED NORMAL						
		ndividual Passenger			Citations Issued		Sex	
	4	TERRY PATRICK KUMBE (414) 659-4970	RA		0		MALE	
⊨	ă	, ,			Date of Birth		Race	
UNIT	INDIVIDUA	Address 5227 W BUCKSKIN DR ELOY, AZ 85131 8015, US			Driver License Number STATE: ARIZONA C	OUNTRY: UNITE	ED STATES	
	Sai	On Duty Tety Equipment	Crash		Safety Equipment			
		Row 01 - FRONT ROW	Seat Po		SHOULDER & LAP I	BELT		
		Helmet Use			Helmet Compliance			
		Eye Protection			Tint Compliance			
9	005	Injury Se Injury NO AP	PARENT I		Airbag NON DEPLOYED			
		Ejected NOT EJECTED	Ejection Pa	ith CTED/NOT APPI	LICABLE		Trapped/Extricated NOT TRAPPED	
		Medical Transport NOT TRANSPORTED			EMS Agency Identifier		EMS Run#	
		Hospital			Date of Death		Time of Death	
		Distracted By	ed By Source	•				
		Distracted By Action						
		Non Motorist	Unit#	Location				
				1				

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1										
		Prior Action								
TIND	INDIVIDUAL	Action Other								To/From School
	1	Susp Drug & Alcohol NO	pected Alcohol U	se	Suspected Drug Use					
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Typ	pe			AlcoholTes	t Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug 1	Test Results			
01	002	Drug Type				1				
		Individual Condition APPEARED NORMAL								
	Uni	t Summary								
	Unit	Status 'RANSIT		1	Vehicle Operating As Class D CLASS	sification		Unit Type AUTOMO	DH E	
		cle Type			2 01700			Operating As Endorsements		
02		SENGER CAR								
	Tota 2	lOccs	Train/Bus#Red		Total#Citations Issued 0		Total Traile		Total Hazî	
	Insu YES	rance?	Direction Of Tra	ND D	Pre CrashTire Mark		Speed Lim		Total Lanes 2	
NN T	MO.	tHarmfulEvent: Collision Wi TOR VEH IN TRANSPOR			Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE			
		raffic Way WO-WAY, NOT DIVIDED			Traffic Control NO CONTROL			Traffic Control Inoperative/Missing NO		
		ace Type		I .	Road Curvature			Road Grade		
	-	CKTOP (BITUMINOUS) k Bus or HazMat			STRAIGHT			DOWNHIL		
		Vehicle				and a second				
		License Plate Number			Plate Type		St	Country of Is	suance	
		KAK1130			AUT - AUTOMOBILE		IL Year	UNITED S	TATES	
02	8	Vehicle Identification Numb 5NPE24AF8KH757454			Make HYUNDAI		2019	Model SONATA		
		Color WHi - WHITE			Body Style 4D - 4DR			Bus Use		
	щ	Initial Contact Point			Vehicle Damage					
UNIT	VEHICLE	12 - FRONT Extent Of Damage FUNCTIONAL DAMAG	E		01 - RIGHT FRONT CO	ORNER	, 11 - LEF	T FRONT C	ORNER, 1	2 - FRONT
	7	Towed Due To Damage NOT TOWED	_		Vehicle Removed By OWNER					
I		What Driver Was Doing GOING STRAIGHT								

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				Ve	hicle Factors				
		Driver Prior Action Other		NC.	OT APPLICABLE				
UNIT	VEHICLE	Driver Actions FOLLOWING TOO CLOSI	E, FAILURE TO	CONTROL					
02	02	Owner Name KATHLEEN A SULLIVAN (630) 479-4211			Owner Address 628 SHERWOOD RD LA GRANGE PARK, IL 6	0526 , US			
	10	Sequence Of Events Event MOTOR VEH IN TRANSP	OPT						
	20	Event							
	63	Event							
	8	Event							
l⊨		Policy Holder							
IN IN		Insurance Company STATE-FARM-GENERAL-INS-CO		I	Individual KATHLEEN SULLIVAN				
		Individual							
	4	Driver JOHN M KANAKES (773) 501-1489 Address 5002 W GUNNISON ST APT 2 CHICAGO, IL 60630 , US		<u> </u>	Citations Issued 0	Sex MALE			
TINO	INDINIDUAL			[Date of Birth	Race WHITE			
5	ION				Driver License Number STATE: ILLINOIS COUNT	RY: UNITED STATES			
	Sat	Gety Equipment On Dut	y Crash		Safety Equipment				
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	""	SHOULDER & LAP BELT				
		HeimetUse			Helmet Compliance				
		Eye Protection			Tint Compliance				
62	88	Injury S Injury NO AF	PARENT INJU		Airbag NON DEPLOYED	Trapped/Extricated			
		NOT EJECTED	1 -	ED/NOT APPLK	CABLE	NOT TRAPPED			
		Medical Transport NOT TRANSPORTED	1		EMS Agency Identifier	EMS Run#			
		Hospital			Date of Death	Time of Death			
		Distracted By NOT A	ted By Source (PPLICABLE (NOT DISTRACT	ſED)	l			
		Distracted By Action NOT DISTRACTED							
		Non Motorist	Unit# Lo	cation					

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ı												
		Prior Action										
TINO	INDIVIDUAL	Action Action Other To/From School										
					•							
	1	Drug & Alcohol NO	ed Alcohol L		Suspected Drug Use NO		T					
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol TestResults					
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results						
8	003	Drug Type		'								
		Individual Condition	Individual Condition									
		APPEARED NORMAL										
		ndividual										
		Passenger BARBARA L ASLAN		Citations Issued		Sex FEMALE						
	UAL	(773) 463-0138 Address			Date of Birth Race							
E N	INDIVIDUA				Driver License Number							
-	2	4047 N MAPLEWOOD AVE CHICAGO, IL 60618 , US			STATE: ILLINOIS COUNTRY: UNITED STATES							
	Saf	On Duty ety Equipment	Crash		Safety Equipment							
		Row 01 - FRONT ROW	Seat Position		SHOULDER & LAP BELT							
		HelmetUse		Helmet Compliance								
		Eye Protection Injury Severity NO APPARENT INJURY			Tint Compliance							
05	8				Airbag							
	-		'AKEN I II Ejection Pa		NON DEPLOYED		Trapped/Extricated					
		NOT EJECTED Medical Transport	NOT EJE	CTED/NOT APPL			NOT TRAPPED					
		NOT TRANSPORTED			EMS Agency Identifier		EMS Run#					
		Hospital			Date of Death		Time of Death					
		Distracted By Distracte	d By Source)	•		•					
		Distracted By Action										
		Non Motorist	Jnit#	Location								
		PriorAction		1								

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	Action					
V						
TINO						
LIND						
2						
						I =
	Action Other					To/From School
	Drug & Alcohol NO	d Alcohol Use	Suspected Drug Use NO			
	Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type			Alcohol Test Results	
	Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results			
02 MM	Drug Type	·		•		
	Individual Condition					
	APPEARED NORMAL					