### WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Overrid	le	Primary Crash E	Document#	Agency 21-096	Crash Number 640	Investigating DEPUTY J	-			
iLG	Crash Date 10/07/2021		Crash Time 07:05 PM		Date Ar 10/07/		Time Arrived 07:23 PM	i			
J1G	Date Notified 10/07/2021		Time Notified 07:09 PM		Total U	nits	Total Injured	ŧ	Total Killed	d	
6TL0BJ1GL	On Emergency		t and Run	Lane Closu	ıre	Work Zone	Trailer	or T	Towed	Reporting  Threshold	
STL	Government Property		Active Sc	chool Zone	School NO	Bus Related	Tags				
•	<b>▼</b> Reportable		Crash Type DT4000 (STA	NDARD CRASH	1)		Amend	led		Secondary  Crash	
	Description <b>—</b>						•				
	Unit 1		County Roa Unit1			Unit 2		Add	otos By	rmation	
						Not Drawn	to Scale				
	i, a sworn law enfo	orceme	nt officer, agr	ee that I have no	ot added	d any CJIS data in t	his report.				
	ON 10/7/21 AT APPROXIMA WHEN THEY SIDE SWIPED WERE NO WITNESSES TO MIRROR, JUST SOME VISIE	EACH (	OTHER. BOTH OF ENT. UNIT 2 STA	PERATORS STATE	THEY OT	HER HAD ENTERED TH	IEIR LANE OF TRA	<b>VFFIC</b>	AND HIT TH	HEIR MIRRORS. THERE	

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Crash Date 10/07/2021

	Location										
ſ	ON USHL U WB				Latitude			Longi			
	268 FT N				43.55685	59382		-89.7	89.778389694		
	OF CTHBD NB	<b></b>			X Coordin	ate		Y Cod	ordinate		
	IN THE TOWN OF DELT	ON			275589.28125				407		
				Structure 1	Туре		-				
L	Crash Scene										
ī	First Harmful Event				FiretHarm	nful Event Lo	cation				
	MOTOR VEH IN TRANSI	PORT			ON ROA		,044011				
ŀ	Manner of Collision	Light Con-									
	07 - SIDESWIPE/SAME I	DARK/LIGHTED									
ŀ	Road Surface Condition(s)	Roadway	Factor(s)								
	WET										
ŀ	Environment Factor(s)				-						
	NONE				NONE						
ſ	Weather Condition(s)				]						
	CLOUDY										
İ	Animal Type				1	o Trafficway					
ŀ	Crash Classification - Location			TRAFFICWAY - ON ROAD  Crash Classification - Jurisdiction							
	PUBLIC PROPERTY				NO SPECIAL JURISDICTION						
	Tribal Land				Access Control Special Study NO CONTROL						
ľ	Within Interchange Area NO	Junction Location NON-JUNCTION		Intersection	on Type INTERSE	CTION			•		
	Unit Summary <b>=</b>			1							
-	Unit Status		I Vehicle On	erating As C	lassification		I I Init Tuno				
	IN TRANSIT		D CLASS	-	g As Classification Unit Type TRUCK						
ŀ	Vehicle Type	D OZAGO		Operating As Endorsements				sements			
	UTILITY TRUCK/PICKUI	P TRUCK									
ŀ	Total Occs	Train/Bus#Recorded	Total#Cita	tions Issued	ł	Total Traile	ers	TotalH	azMat Types		
	1		0			0		0	•		
ł	Insurance?	Direction Of Travel	Pre	Pre CrashTire  Mark		Speed Lim		TotalL	Lanes		
	YES	NORTHBOUND						2			
ľ	Most Harmful Event: Collisio	n With	SpecialFu		T10**	•	Emergency Motor \				
	MOTOR VEH IN TRANSI	PORT		IAL FUNC	Traffic Cor		NOT APPLICABLE  Traffic Control Inoperative/Missing				
ſ	Traffic Way		Traffic Con						rative/Missing		
ļ	DIVIDED HWY MEDIAN	W/BARRIER	NO CONT				Road Grade				
	Surface Type	iie\	Road Curvi								
ļ	BLACKTOP (BITUMINO)  Truck Bus or HazMat	<del></del>	CURVE L	⊆F I			LEVEL				
	NO										
	Vehicle	SESSOS SE	*****						SISISISISISISISISISISISISISISISISISISI		
and	License Plate Number	Plate Type	Plate Type LTK - LIGHT TRUCK Make		St	Country of Is:	suance				
Simples	EC69409  Vehicle Identification Number				LTK - LIG	( WI UNITED ST		ATES	TES		
optionation of					Make CHEVRO	Year	Model				
Supplemental	<b>5</b> 1GB3YSE77MF236	1GB3YSE77MF236322				2021		SLV			
Sustantinus	Color WH! - WH!TE		1	Body Style PK - PICKUP				3			
September 1							NOT A BUS	-			
Standardara.	Initial Contact Point  02 - RIGHT SIDE FF	PONT	Vehicle Da	amage					7 8 9 10 11		
Application.	Extent Of Damage	NON I	00 - NO	OO NO DAMACE					6 12		
	02 - RIGHT SIDE FREE Extent Of Damage NO DAMAGE	00 - 140	00 - NO DAMAGE				5 4 3 2 1				
3	# <b>#</b>										

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Crash Date 10/07/2021

		Towed Due To Damage		Vehicle Removed By				
		NOT TOWED		OPERATOR				
		What Driver Was Doing		Vehicle Factors				
		NEGOTIATING CURVE						
		Driver Prior Action Other		NOT APPLICABLE				
TINO	VEHICLE	Driver Actions UNKNOWN						
٦	10	Owner Name ROBERT DEWEY PICKET (608) 339-6817	т	Owner Address S2273A 1ST ST REEDSBURG, W	1 53959 , US			
		Sequence Of Events						
	5	Event MOTOR VEH IN TRANSPO		***************************************				
	8	Event						
	8	Event						
	3	Event						
_		Policy Holder						
UNIT		Insurance Company		Individual ROBERT PICKETT				
_	OTATE A ARMITOENE CARE-INCO-CO			ROBERT FICKET				
		Individual						
		Driver ROBERT DEWEY PICKET (608) 339-6817	т	Citations issued Sex  MALE				
⊨	700	(000) 332-0017		Date of Birth	Race WHITE			
LIND	INDIVIDUAL	Address S2273A 1ST ST REEDSBURG, WI 53959 ,	US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES				
	Sai	fety Equipment On Duty	Crash	Safety Equipment				
		Row 01 - FRONT ROW	SeatPosition 07 - LEFT	SHOULDER & LAF	BELT			
		HelmetUse		Helmet Compliance				
		Eye Protection		Tint Compliance				
٤	8	Injury Se	everity PARENT INJURY	Airbag NON DEPLOYED				
		Ejected NOT EJECTED	PLICABLE		Trapped/Extricated NOT TRAPPED			
		Medical Transport NOT TRANSPORTED		EMS Agency Identifie	r	EMS Run#		
		Hospital		Date of Death		Time of Death		
		Distracts	ed By Source					
		Distracted By NOT A	PPLICABLE (NOT DISTRA	ACTED)				
		Distracted By Action NOT DISTRACTED						

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Non Motorist	Striking Unit#	Location					
		Prior Action		1					
		Action							
E	Ž								
UNIT	INDIVIDUAL								
	Z								
		Action Other							To/From School
	1	Drug & Alcohol N	Suspected Alcohol U IO		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 Resul	ts		
2	8	Drug Type							
		Individual Condition							
		APPEARED NORMA	AL.						
		t Summary 💻							
		Status <b>'RANSIT</b>			ehicle Operating As Class CLASS	ification	Unit Type TRUCK		
02		icle Type	TRUCK				Operating A	s Endorser	nents
		UTILITY TRUCK/PICKUP TRUCK  Total Occs Train/Bus#Recorded			otal#CitationsIssued	TotalTra	ilers	Total Hazi	Mat Types
	1 Insu	rance?	Direction Of Tra	avel 0	Pre CrashTire	0 Speed L	mit	0 Total Lane	es
TINO	YES	YES NORTHBOUND		ND [	Mark 35			2	
S		Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT			pecial Function IO SPECIAL FUNCTIO	Emergency NOT APPL	Motor Vehi .ICABLE	icle Use	
	Traffic Way DIVIDED HWY MEDIAN W/BARRIER			<b>I</b>	raffic Control O CONTROL	Traffic Control Inoperative/Missing NO			
	Surface Type			R	oad Curvature	Road Grade			
		k Bus or HazMat	JS)	c	URVE LEFT		LEVEL		
	NO								
		Vehicle License Plate Number		T p	Plate Type	St	Country of lss	suance	
		License Plate Number 2560288B			TK - LIGHT TRUCK	## <b></b>	1 '	UNITED STATES	
02	8	Vehicle Identification Number 3TMCZ5AN1KM213291			Make Year TOYOTA 2019		Model UNKNOWN		
		Color TAN - TAN			Body Style PK - PICKUP	Bus Use			
	Щ	Initial Contact Point			/ehicle Damage				
UNIT	VEHICLE	10 - LEFT SIDE FRO	ONT		10 - LEFT SIDE FRON	т			7 8 9 10 11 6 12
	贞	MINOR DAMAGE				•			5 4 3 2 1
Towed Due To Damage  NOT TOWED					Vehicle Removed By OPERATOR				

Crash Date 10/07/2021
Crash Time 07:05 PM

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Crash Date 10/07/2021

		What Driver Was Doing		V	ehicle Factors							
		NEGOTIATING CURVE			l							
		Driver Prior Action Other		N	IOT APPLICABLE							
		Driver Actions										
	ш	UNKNOWN										
╘	VEHICLE											
IN	I											
	3											
					To Air							
		OwnerName IRENA SZCZEPANSKI			Owner Address 2380 COUNTY R	OAD Z						
02	8	(608) 852-5195			FRIENDSHIP, WI							
		Sequence Of Events										
	5	Event										
	8	Event										
		Event										
	63											
	3	Event										
INN		Policy Holder Insurance Company STATE-FARM-GENERAL-INS-CO			I							
5					Individual IRENA SZCZEPANSKI							
		ndividual										
		Driver IRENA SZCZEPANSKI (608) 852-5195			Citations issued Sex							
	_				0 FEMALE							
	INDIVIDUAL				Date of Birth	irth Race WHITE						
LNO	9				Drivert icense Number							
ź	ā	Address 2380 COUNTY ROAD Z FRIENDSHIP, WI 53934 , US										
					STATE: WISCONSIN COUNTRY: UNITED STATES							
	C.,	On Duty Crash  fety Equipment			Safety Equipment							
				CHOSH DED 6 I AF								
		Row Seat Position 07 - LEFT			SHOULDER & LAP BELT							
		HelmetUse		<del></del> ·	Heimet Compliance							
		Eye Protection			TintCompliance							
	~.	Injury Severity			Airhan							
05	805	Injury <sub>NO AP</sub>	PARENT II	NJURY	Airbag NON DEPLOYED							
		Ejected	Ejection Pa				Trapped/Extricated					
		NOT EJECTED	NOT EJE	CTED/NOT APPL			NOT TRAPPED					
		Medical Transport			EMS Agency Identifie	at .	EMS Run#					
	NOT TRANSPORTED Hospital			Date of Death		Time of Death						
		1105 (105)			Date of Death		Tane of Death					
		Distract	ed By Source	<b>)</b>			1					
		Distracted By NOT A	PPLICABL	E (NOT DISTRAC	CTED)							
		Distracted By Action NOT DISTRACTED										
		L Strikina	Unit#	Location								
		Non Motorist										

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		Prior Action					
		A .C					
		Action					
	4						
LIND	NDIVIDUAL						
5	W						
	¥						
	_						
		Action Other					To/From School
	,	Drug & Alcohol NO	Jse	Suspected Drug Use			
	•						
		Alcohol Test Given	Alcohol Test Type			Alcohol Test Results	
		TEST NOT GIVEN	7 17				
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results		
	~	Drug Type					
02	002	Diag Type					
	_						
		Individual Condition					
		APPEARED NORMAL					
		/					
		APPEARED NORMAL					