#### WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 11/08/2021

Crash Time 07:51 AM

	Document Number Override	I - I		Agency Crash Number 21-10757		1 0	Investigating Officer/Deputy DEPUTY D. KROLIKOWSKI			
년 영	Crash Date 11/08/2021	Crash Time 07:51 AM		Date Arrived 11/08/2021		Time Arrived 08:00 AM				
GSF	Date Notified 11/08/2021	Time Notified 07:51 AM		Total Units 03		Total Injured 02	Total Killed 00			
000	On Emergency Hit	and Run Lane Closu		re	☐ Work Zone	✓ Trailer or 1	Towed	Reporting  Threshold		
6TL	Government Active So		School Bus Related NO		Tags					
_	<b>▼</b> Reportable	Crash Type DT4000 (STA	Crash Type DT4000 (STANDARD CRASH)			Amended		Secondary Crash		

Description Diagram Reconstruction By Unit 3 Photos By MENRICULTURE Additional Information NONE Unit Collision site

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

UNIT 2, WHICH HAD A TRAILER ON IT, WAS EAST BOUND IN IT'S PROPER LANE WHEN THE OPERATOR OF UNIT 2 SAW UNIT 1 OVER THE CENTERLINE, APPROACHING IN UNIT 2'S LANE. OPERATOR OF UNIT 2 TURNED TO THE RIGHT QUICKLY TO AVOID A HEAD ON COLLISION WITH UNIT 1. UNIT 1 STRUCK THE TRAILER BEING TOWED BY UNIT 2. UNIT 3 HAD BEEN FOLLOWING UNIT 2, AND STRUCK DEBRIS THAT RESULTED FROM THE COLLISION OF UNIT 2'S TRAILER AND UNIT 1. UNIT 2 CONTINUED INTO THE DITCH ON IT'S RIGHT AFTER THE COLLISION, AND STRUCK AN ADOPT A HIGHWAY SIGN WHILE DOING SO.

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	Location ===								
	ON STH33 EB			Latitude			Longit	ude	
	111 FT S			43.488	626839		-89.63	-89.639416165	
	OF MAN MOUND RD			X Coord	inate		Y C001	rdinate	_
	IN THE TOWN OF GREE	NFIELD			1.03125		48184		
	IN SAUK COUNTY			Structur	e Type				_
				<b>I</b>	RUCTURE				
	Crash Scene 💻								
•	First Harmful Event			First Hai	rmful Event L	ocation			_
	MOTOR VEH IN TRANSI	PORT			ADWAY	20041017			
	Manner of Collision			Light Co					_
		EHICLE IN TRANSPORT		DAYLIC					
	Road Surface Condition(s)				av Factor(s)				_
	DRY			3 (Oddwe	, y , deter(s)				
	Environment Factor(s)								
	NONE			NONE					
	Weather Condition(s)								
	CLEAR								
	Animal Type			Relation	To Trafficwa	ay			_
					ICWAY - C				_
	Crash Classification - Location -	on		Crash Classification - Jurisdiction NO SPECIAL JURISDICTION					
	Tribal Land	Access				Special Study			
	VASAL : 1-4 A	NO CO	NTROL				_		
	1				ECTION				
	Unit Summary =								
	Unit Status		Vehicle Ope	rating As Classification	on	UnitType			_
	IN TRANSIT	_	AUTOMOBILE						
_	Vehicle Type		Operating As Endorsements				_		
2	(SPORT) UTILITY VEHIC	CLE							
	Total Occs	Train/Bus#Recorded	Total#Citati	ions Issued	t Total Traile		TotalHa	azMat Types	_
	1		2		0 Speed Lim		0 Limit Total Lanes		
	Insurance?	Direction Of Travel	Pre (	CrashTire					_
<b>—</b>	YES	WESTBOUND		Mark	55		2		
L N N	Most Harmful Event: Collision	n With	Special Fun			Emergency			_
_	MOTOR VEH IN TRANSF	PORT	NO SPECI	AL FUNCTION		NOT APP	LICABLI	E	
	Traffic Way		Traffic Cont	rol		Traffic Con	trol Inopei	rative/Missing	_
	TWO-WAY, NOT DIVIDE	D	NO CONTI	ROL		NO			
	Surface Type		Road Curva	ture		Road Grade			
	BLACKTOP (BITUMINO	US)	CURVE LE	FT		LEVEL			
	Truck Bus or HazMat								
	NO								
	Vehicle								
	License Plate Number	odia ika ika ika ika ika ika ika ika ika i	Plate Type		St	Country of Is	suance	isalisalisalisalisalisalisalisalisalisal	Silvino
	AFV8592		AUT - AU	TOMOBILE	WI	UNITED S	UNITED STATES		
_	Vehicle Identification N		Make		Year	Model			_
7	5 JN8AZ1MW3BW150249				2011	MURANO :	S/S		
	Color		Body Style			Bus Use			
	WHI - WHITE		LL - CARI						
	Initial Contact Point		Vehicle Da	Vehicle Damage				7 8 9 10 11	
	ANN CONTRACTOR OF THE CONTRACT				IDDLE 40 LEET OF		I .	A CONTRACTOR OF THE PROPERTY O	
_	T 11 - LEFT FRONT C	ORNER		T SIDE MIDDLE 4	0.IEFT 9	IDE FRONT	11.		
LIND	11 - LEFT FRONT C  Extent Of Damage  DISABLING DAMAC			T SIDE MIDDLE, 1 ONT CORNER, 12		SIDE FRONT,	11 -	6 12 5 4 3 2 1	

#### **6TL0BGSFGL**

21-10757

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Crash Date 11/08/2021

		Towed Due To Damage TOWED DUE TO DISABLE	NG DAMAGE	Vehicle Removed By CRAIGS TOWING									
		What Driver Was Doing	NG DAWAGE	Vehicle Factors									
		NEGOTIATING CURVE		, and a determinant									
		Driver Prior Action Other		NOT APPLICABLE									
INN	VEHICLE	Driver Actions WRONG SIDE OR WRONG											
04	01	OwnerName JEROLD L LEICHSENRIN (608) 448-8587	G	Owner Address 449 PARK HILL DI PEWAUKEE, WI 5									
		Sequence Of Events											
	5	Event CROSS CENTERLINE											
	02	Event MOTOR VEH IN TRANSPO	ORT										
	03	Event											
	Event												
		Policy Holder											
L N		Insurance Company		Individu <b>al</b>									
⊃		PROGRESSIVE-ADVANCE	ED-INSURANCE-CO	JEROLD LEICHSEN	IRING								
		Individual											
		Driver JEROLD L LEICHSENRIN	Citations issued 2	Sex MALE									
	M	(608) 448-8587		Date of Birth	Race								
<b>∐N</b> O	₫				WHITE								
Ś	INDIVIDUA	Address 449 PARK HILL DR # B PEWAUKEE, WI 53072, US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES									
		On Duty	Crash	Safety Equipment									
	Sai	ety Equipment											
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP	BELI								
		Helmet Use		Helmet Compliance									
		Eye Protection		Tint Compliance									
2	8	Injury Se Injury suspe	everity CTED MINOR INJURY	Airbag  DEPLOYED-COMBI	NATION								
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT AP	PLICABLE		Trapped/Extricated NOT TRAPPED							
		Medical Transport		EMS Agency Identifier		EMS Run#							
		NOT TRANSPORTED											
		Hospital	Date of Death		Time of Death								
		Distracted By	ed By Source										
		Distracted By Action UNKNOWN											

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Crash Date 11/08/2021

		_									
		Non Motorist	Striking Unit#	Location							
		Prior Action		I							
LIND	NDIVIDUAL	Action									
	IND	Action Other							To/From School		
	l 	Drug & Alcohol	Suspected Alco	phol Use	Suspected D	rug Use					
		AlcoholTestGiven TEST NOT GIVEN			pe			Alcohol Test	t Results		
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug	g Test Results	3			
5	8	Drug Type		<u>'</u>		-					
		Individual Condition  APPEARED NORM	Individual Condition  APPEARED NORMAL								
	1	Violations							S		
		UTC Number	Issue To?	Statute Number	Description				<u>USTRIBUSTRUSTRUSTRUSTRUSTRUSTRUSTRUSTRUSTRUSTR</u>		
	9	BE132243	001	346.05(1)	OPERATIN	IG LEFT OF CI	ENTER				
	8	UTC Number <b>BE132244</b>	issue To? 001	Statute Number 341.04(1)	NON-REGIS	STRATION OF	AUTO, ET	С			
		Summary •			V 1: 1 0	4 01 75 6		I			
		Status <b>RANSIT</b>			Vehicle Operating As Classification D CLASS			Unit Type AUTOMOBILE			
05		cle Type ORT) UTILITY VEHI	CLE					Operating As Endorsements			
	1	lOccs		#Recorded	Total#Citations 0	Issued	Total Trail		Total HazMat Types  0		
╘	YES	rance?	Direction (		Pre Cras	k	Speed Lin		Total Lanes 2		
L N	МОТ	tHarmfulEvent: Collision TOR VEH IN TRANS			Special Function NO SPECIAL			Emergency Motor Vehicle Use NOT APPLICABLE			
	TWC	ic Way D-WAY, NOT DIVIDE	D		Traffic Control NO CONTROL			NO	rol Inoperative/Missing		
		ace Type I <b>CKTOP (BITUMIN</b> O	nus)		Road Curvature  CURVE RIGHT			Road Grade			
		k Bus or HazMat				<u>'</u>					
		Vehicle									
		License Plate Number PV1857			Plate Type  LTK - LIGHT	TRUCK	St WI	Country of less			
		Vehicle Identification Number			Make Year GENERAL MOTORS COR 2003		Model YUKON XL				
05	05	Vehicle Identification f			1	OTORS COR		Model YUKON XL			

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Crash Date 11/08/2021

	ш	Initial Contact Point			1	Vehicle Dam	nage			7 8 9 10 11			
UNIT	VEHIC	14 - UNDERCARRIAGE Extent Of Damage	3E						PRNER, 12 - FRONT,	5 12			
∍	ij	FUNCTIONAL DAMA	.GE			13 - TOP, <sup>^</sup>	14 - UNDER	CARRIAGE		5 4 8 2 1			
		Towed Due To Damage NOT TOWED			ľ	Vehicle Rem	noved By						
		What Driver Was Doing NEGOTIATING CUR			,	Vehicle Fact	tors						
		Driver Prior Action Other				NOT APPLICABLE							
		Driver Antique											
	щ	Driver Actions NO CONTRIBUTING	ACTION										
IN	宣												
n	VEHICLE												
2	C.	OwnerName NICHOLAS RYAN ZII	EGEL			605 2N	ID ST	.40 110					
05	8					BARABOO, WI 53913 , US							
		l Sequence Of Eve	nts										
	Event MOTOR VEH IN TRANSPORT												
		Event Event											
	8	Event											
	8	Event											
╘		Policy Holder											
UNIT		Insurance Company PROGRESSIVE-ADV	ANCED-IN	ISUR	ANCE-CO	Individual NICHOLAS ZIEGEL							
		Trailer/Towed	27/2-27/2-27/2-27/2	200200	And a transfer of the following the followin								
02		Trailer Plate # CB13685	Plate Type		Make TMAN		State WI		Country of Issuance UNITED STATES Address 605 2ND ST				
_	ER.	UnitType AUTO			vidual HOLAS RYAN ZIE	EGEL							
UNIT	RAILER/	Vehicle Identification Nu		(920	0) 248-9345				BARABOO, WI 53913	, US			
	-	5JWL4182XML10143											
		Driver				Citations		Sex					
	J	NICHOLAS RYAN ZIE (920) 248-9345	EGEL			0	l.al-	MALE					
_	INDMDUA					Date of Bi	ITA	Race WHITE					
TNO	8	Address 605 2ND ST				Driver Lice	ense Number						
	Z	BARABOO, WI 5391:	3 , US			STATE:	WISCONSIN	COUNTR	Y: UNITED STATES				
			h		Safety Eq	uinment							
	Safety Equipment On Duty Crash												
		Row 01 - FRONT ROW		SeatP 1 <b>7 - L</b>	osition <b>EFT</b>	SHOULDER & LAP BELT							
		HelmetUse				Helmet Compliance							
		Eye Protection				TintComp	oliance						

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Ī		·		• •		- 1	A 1 1					
8 Injury PO		POSSI	njury Severity POSSIBLE INJURY			Airbag NON DEPLOYED						
		Ejected	. 000.	Ejection Pat		Ι,				Trapped/Ex	tricated	
		NOT EJECTED		1 1	TED/NOT APP	PLIC	CABLE			NOT TRAI		
		Medical Transport		I		E	EMS Agency Identifier			EMS Run#		
		NOT TRANSPORT	ED									
		Hospital				I	Date of Death Time of Death					
		Distracted By	Distract	ted By Source <b>\PPLICABL</b> I	E (NOT DISTRA	ACT	ED)			•		
		Distracted By Action NOT DISTRACTED	)									
Non Motorist Striking Unit # Location												
		Prior Action										
		Action										
	JAL											
UNIT	INDIVIDUAL											
7												
	=											
		Action Other										To/From School
	1	Drug & Alcohol	Suspec <b>NO</b>	cted Alcohol U	se		Suspected Drug Use NO					
		Alcohol Test Given Alcohol TEST NOT GIVEN			Alcohol Test Typ	ре				Alcohol Tes	t Results	
		Drug Test Given TEST NOT GIVEN Drug Test				pe Drug TestResul			Test Results	•		
05	005	Drug Type										
		Individual Condition										
		APPEARED NORM	IAL									
		t Summary				\/_L	i-l- 0	· · · · · · · · · · · · · · · · · · ·				
	1	Status FRANSIT			I .		icle Operating As Clas LASS	sincation	1	UnitType AUTOMOE	BILE	
_		icle Type								Operating A		nents
03	•	ORT) UTILITY VEHI							<b>.</b>			
	Tota	al Occs	T	rain/Bus#Red		Tota  0	al#Citations Issued		Total Traile	ers	Total Hazi	/latTypes
<b>—</b>	Insu YES	rance?	I	irection Of Tra ASTBOUND			Pre CrashTire Mark		Speed Lim		TotalLane 2	
LNO		t Harmful Event: Collision		)			cialFunction SPECIAL FUNCTION	ON	•	Emergency Motor Vehicle Use NOT APPLICABLE		
		fic Way					fic Control			Traffic Control Inoperative/Missing		
	TWO-WAY, NOT DIVIDED						NO CONTROL			NO		
	Surface Type BLACKTOP (BITUMINOUS)						d Curvature RVE RIGHT			Road Grade LEVEL		
		ck Bus or HazMat	,				TE MOIL					
	NO											
		Vehicle				eeee						

Crash Date 11/08/2021
Crash Time 07:51 AM

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

		License Plate Number	I	Plate Type	St	Country of Issuance						
		208PTE		AUT - AUTOMOBILE	WI	UNITED STATES						
03	8	Vehicle Identification Number		Make	Year	Model						
_		1FMCU0F79DUD65387		FORD	2013	Bus Use						
		Color GRN - GREEN	I	Body Style  LL - CARRYALL		Bususe						
	ш	Initial Contact Point		Vehicle Damage								
╘	VEHICLE	01 - RIGHT FRONT CORNER	t	04 BIGUT EBONT CO	SONED OS D	ICUT OIDE	7 8 9 10 11					
UNIT	I	Extent Of Damage		01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE 5 12 FRONT, 03 - RIGHT SIDE MIDDLE 5 12 13 2 3 3 5								
	3	FUNCTIONAL DAMAGE		FRONT, 03 - RIGHT SIDE MIDDLE								
		Towed Due To Damage		Vehicle Removed By								
		NOT TOWED What Driver Was Doing		Vehicle Factors								
		NEGOTIATING CURVE		versicle ractors								
		Driver Prior Action Other		NOT APPLICABLE								
		Driver Actions										
	#	NO CONTRIBUTING ACTION	l									
N	<u>o</u>											
5	VEHICLE											
		OwnerName		Owner Address								
~	m	FRED DOUGLAS MILLER	1602 MANASSAS									
03	8	(608) 772-8378		BARABOO, WI 53913 , US								
	5	Event  OTHER OBJECT - NOT FIXED										
		Event										
	8	27511										
	8	Event										
	•											
	8	Event										
		Policy Holder										
UNIT		Insurance Company		le dividual								
5		HARTFORD-UNDERWRITER	S-INS-CO	FRED MILLER	Individual FRED Mit LER							
		Individual										
		Driver		Citations Issued	Sex							
		FRED DOUGLAS MILLER		0	MALE							
	NDIVIDUAL	(608) 772-8378		Date of Birth	Race							
╘	ō				WHITE							
S	줅	Address 1602 MANASSAS DR		Driver License Number								
	Z	BARABOO, WI 53913 , US		STATE: WISCONSIN	COUNTRY: U	NITED STATES						
		On Duty Cr	ash	Safety Equipment								
	Sa	fety Equipment										
		Row	Seat Position	SHOULDER & LAP BELT								
		01 - FRONT ROW	07 - LEFT									
		HelmetUse		Helmet Compliance								
		Eye Protection		Tint Compliance								
		-										
03	83	Injury Seve	•	Airbag								
J	•	<b>Injury</b> no appa	RENT INJURY	NON DEPLOYED								

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		Ejected	Ejection Pa	th			Trapped/Extricated				
		NOT EJECTED	NOT EJE	CTED/NOT APPL	ICABLE		NOT TRAPPED				
		Medical Transport			EMS Agency Identifier		EMS Run#				
		NOT TRANSPORTED									
		Hospital			Date of Death		Time of Death				
		Distrac	ted By Source	)							
		Distracted By NOT A	APPLICABL	E (NOT DISTRAC	CTED)						
		NOT DISTRACTED									
		Non Motorist	Unit#	Location							
		Prior Action									
		Action									
	UAL										
UNIT	NDIVIDUAL										
_	2										
		Action Other						To/From School			
		l Drug & Alcohol NO	cted Alcohol U	lse	Suspected Drug Use						
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results				
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results					
03	003	Drug Type									
_	0										
		Individual Condition									
		APPEARED NORMAL									
		Individual *******					\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$				
		Passenger DIANA P MILLER			Citations Issued  0	Sex FEMALE					
	JA.	(608) 772-8378			Date of Birth	Race					
LNO	9	Address			Driver License Number	WHITE					
⊃	NDWDWA	1602 MANASSAS DR BARABOO, WI 53913 , U	IS		District Electrics Hallinger						
		,									
	Sal	on Dut	y Crash		Safety Equipment						
	Row Seat Position 01 - FRONT ROW 09 - RIGHT				SHOULDER & LAP BELT						
		Helmet Use	03 - 1/1	O::1	Helmet Compliance						
		Eye Protection			TintCompliance						
	+	Injury S	everity		Airbag						
03	8	Injury <sub>NO AF</sub>	PARENT IN		NON DEPLOYED						
		Ejected NOT EJECTED	Ejection Pa	th CTED/NOT APPL	ICABLE		Trapped/Extricated NOT TRAPPED				
	***********	1	1				1				

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Crash Date 11/08/2021

		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run#		
		Hospital		Date of Death		Time of Death		
		Distracted By Source  Distracted By	e					
		Distracted By Action						
		Striking Unit#						
		Non Motorist						
		Prior Action						
		Action						
	_							
⊨	INDIVIDUAL							
LNO	₹							
	Z							
		Action Other					To/From School	
		Suspected Alcohol L	Inc	Suspected Drug Use				
		Drug & Alcohol NO	J56	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			
8	8	Drug Type	1					
		Individual Condition						
		APPEARED NORMAL						
'	Wit	ness -						
01	EMI	ridual LY LOUGHRY KLINE		Address 2333 HOARD ST # 1			Date of Birth	
	(30:	3) 854-7987		MADISON, WI 53704	, US			
WITN								
		ness ridual		Address			Date of Birth	
02	HAY	DEN EDGAR MILLIGAN		Address 3626 RICHARD ST MADISON, WI 53714 , US			Pale of Bilki)	
WITN	(608) 695-9398			masievii, III voi 14	,			
≤ w	I							