

6TL0BGSFGS  
21-11509

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

6TL0BGSFGS

Document Number Override		Primary Crash Document#		Agency Crash Number 21-11509		Investigating Officer/Deputy DEPUTY D. KROLIKOWSKI	
Crash Date 12/01/2021		Crash Time 07:58 AM		Date Arrived 12/01/2021		Time Arrived 08:13 AM	
Date Notified 12/01/2021		Time Notified 07:58 AM		Total Units 02		Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input checked="" type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone	<input type="checkbox"/> Trailer or Towed		<input type="checkbox"/> Reporting Threshold	
<input type="checkbox"/> Government Property		<input type="checkbox"/> Active School Zone		School Bus Related NO		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

Description

Diagram		Reconstruction By	
		Photos By	
		Additional Information NONE	
		<input checked="" type="checkbox"/> I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.	
UNIT 2 WAS WESTBOUND WHEN UNIT 1 CROSSED OVER THE CENTERLINE, STRIKING UNIT 2. UNIT 1 CONTINUED ON AND DID NOT STOP. UNIT 1 WAS DESCRIBED AS A MAROON MINIVAN BY THE OPERATOR OF UNIT 2.			

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Location

ON STH136 WB 530 FT W OF SCENIC RD IN THE TOWN OF EXCELSIOR IN SAUK COUNTY	Latitude 43.477858398	Longitude -89.860164878
	X Coordinate 268682.15625	Y Coordinate 4817857
	Structure Type NO STRUCTURE	

Crash Scene

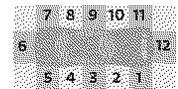
First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>	First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>06 - SIDESWIPE/OPPOSITE DIRECTION</b>	Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>DRY</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>		
Weather Condition(s) <b>CLOUDY</b>		
Animal Type	Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>	Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land	Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>

Unit Summary

UNIT 01	Unit Status <b>HIT AND RUN</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>	
	Vehicle Type <b>PASSENGER VAN</b>				Operating As Endorsements	
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>UNKNOWN</b>	Direction Of Travel <b>UNKNOWN</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>55</b>	Total Lanes <b>2</b>	
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>		Special Function <b>UNKNOWN</b>	Emergency Motor Vehicle Use <b>UNKNOWN</b>		
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>NO CONTROL</b>	Traffic Control Inoperative/Missing <b>NO</b>		
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>	Road Grade <b>LEVEL</b>		
	Truck Bus or HazMat <b>NO</b>					

Vehicle

UNIT 01 VEHICLE 01	License Plate Number <b>UNKNOWN</b>		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>OT</b>	Country of Issuance <b>UNITED STATES</b>	
	Vehicle Identification Number		Make	Year	Model	
	Color <b>MAR - MAROON (BURGUNDY)</b>		Body Style		Bus Use	
	Initial Contact Point <b>99 - UNKNOWN</b>		Vehicle Damage			
	Extent Of Damage <b>VEHICLE NOT AT SCENE</b>		<b>16 - VEHICLE NOT AT SCENE</b>			



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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>	
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors	
	Driver Prior Action Other		<b>UNKNOWN</b>	
	Driver Actions <b>UNKNOWN</b>			
01 01	Owner Name		Owner Address	
<b>Sequence Of Events</b>				
01 02 03 04	Event <b>CROSS CENTERLINE</b>			
	Event <b>MOTOR VEH IN TRANSPORT</b>			
	Event			
	Event			
<b>Individual</b>				
UNIT INDIVIDUAL	Driver <b>UNKNOWN</b>		Citations Issued <b>0</b>	Sex
			Date of Birth	Race
	Address		Driver License Number	
01 001	<b>Safety Equipment</b>		On Duty Crash	
			Safety Equipment	
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>NONE USED - VEHICLE OCCUPANT</b>	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NOT APPLICABLE</b>	
Ejected <b>NOT APPLICABLE</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT APPLICABLE</b>
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier		EMS Run #
Hospital		Date of Death		Time of Death
<b>Distracted By</b>		Distracted By Source		
Distracted By Action				
<b>Non Motorist</b>		Striking Unit #	Location	

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UNIT INDIVIDUAL	Prior Action				
	Action				
	Action Other		To/From School		
	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use	Suspected Drug Use		
	Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results		
	Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results		
	Drug Type				
	Individual Condition <b>NOT OBSERVED</b>				
	01	001			

Unit Summary

UNIT 02	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>TRUCK</b>	
	Vehicle Type <b>UTILITY TRUCK/PICKUP TRUCK</b>				Operating As Endorsements	
	Total Occs <b>3</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>YES</b>	Direction Of Travel <b>WESTBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>55</b>	Total Lanes <b>2</b>	
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>					

Vehicle

UNIT VEHICLE 02	02	License Plate Number <b>NK9405</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
		Vehicle Identification Number <b>1GCPYFED4MZ427219</b>	Make <b>CHEVROLET</b>	Year <b>2021</b>	Model <b>SILVERADO</b>	
		Color <b>GRY - GRAY</b>	Body Style <b>PK - PICKUP</b>		Bus Use	
		Initial Contact Point <b>09 - LEFT SIDE MIDDLE</b>	Vehicle Damage			
		Extent Of Damage <b>MINOR DAMAGE</b>	<b>08 - LEFT SIDE REAR, 09 - LEFT SIDE MIDDLE</b>			
		Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By			
		What Driver Was Doing <b>GOING STRAIGHT</b>				

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UNIT VEHICLE	Vehicle Factors	
	Driver Prior Action Other	NOT APPLICABLE
	Driver Actions NO CONTRIBUTING ACTION	
02 02	Owner Name BRUNKER CONSTRUCTION LLC (608) 963-7996	Owner Address E13366 STATE ROAD 33 BARABOO, WI 53913 , US
	<b>Sequence Of Events</b>	
01 02 03 04	Event MOTOR VEH IN TRANSPORT	
	Event	
	Event	
	Event	
UNIT	<b>Policy Holder</b>	
	Insurance Company LENTZ & WHITE INSURANCE O	Organization/Company BRUNKER CONSTRUCTION LLC
UNIT INDIVIDUAL	<b>Individual</b>	
	Driver SAMANTHIA RAMSEY BRUNKER (608) 963-7996	Citations Issued 0
		Sex FEMALE
		Date of Birth [REDACTED]
	Address E13366 STATE ROAD 33 BARABOO, WI 53913 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES
02 002	<b>Safety Equipment</b>	
	On Duty Crash	Safety Equipment
	Row 01 - FRONT ROW	Seat Position 07 - LEFT
	SHOULDER & LAP BELT	
	Helmet Use	Helmet Compliance
Eye Protection	Tint Compliance	
02 002	<b>Injury</b>	
	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE
	Trapped/Extricated NOT TRAPPED	
	Medical Transport NOT TRANSPORTED	EMS Agency Identifier
Hospital	EMS Run#	
	Date of Death	Time of Death
<b>Distracted By</b>		
Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED		
<b>Non Motorist</b>		
Striking Unit#	Location	

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UNIT	INDIVIDUAL	Prior Action			
		Action			
02	002	Action Other		To/From School	
		<b>Drug &amp; Alcohol</b> Suspected Alcohol Use NO		Suspected Drug Use NO	
02	002	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	002	Drug Type			
		Individual Condition APPEARED NORMAL			
UNIT	INDIVIDUAL	<b>Individual</b>			
		Passenger KATIE D BRUNKER (608) 963-7996	Citations Issued 0	Sex FEMALE	
02	003	Date of Birth [REDACTED]	Race WHITE		
		Address E13366 STATE ROAD 33 BARABOO, WI 53913 , US	Driver License Number		
02	003	<b>Safety Equipment</b> On Duty Crash		Safety Equipment	
		Row 02 - SECOND ROW	Seat Position 07 - LEFT	BOOSTER SEAT	
02	003	Helmet Use		Helmet Compliance	
		Eye Protection		Tint Compliance	
02	003	<b>Injury</b> Injury Severity NO APPARENT INJURY		Airbag NON DEPLOYED	
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED	
02	003	Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run#
		Hospital		Date of Death	Time of Death
02	003	<b>Distracted By</b> Distracted By Source			
		Distracted By Action			
02	003	<b>Non Motorist</b> Striking Unit#		Location	
		Prior Action			

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UNIT INDIVIDUAL	Action		
	Action Other		To/From School
	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use NO	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
	Drug Type		
	Individual Condition APPEARED NORMAL		
	<b>Individual</b>		
	Passenger JAXSON R BRUNKER (608) 963-7996	Citations Issued 0	Sex MALE
	Date of Birth [REDACTED]	Race WHITE	
Address E13366 STATE ROAD 33 BARABOO, WI 53913 , US	Driver License Number		
UNIT INDIVIDUAL	<b>Safety Equipment</b>	On Duty Crash	Safety Equipment
	Row 02 - SECOND ROW	Seat Position 09 - RIGHT	SHOULDER & LAP BELT
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	<b>Injury</b>	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #
	Hospital	Date of Death	Time of Death
	<b>Distracted By</b>	Distracted By Source	
	Distracted By Action		
<b>Non Motorist</b>	Striking Unit #	Location	
Prior Action			

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UNIT INDIVIDUAL          02 004	Action		
	Action Other		To/From School
	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use NO	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
	Drug Type		
	Individual Condition APPEARED NORMAL		