WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash E	Document#	Agency 21-124	Crash Number 143		g Officer/Deputy T. SUTHERLAND			
ם ב	Crash Date 12/28/2021	Crash Time 01:30 PM		Date Arrived 12/28/2021		Time Arrived 01:39 PM				
6 I LUC884HB	Date Notified 12/28/2021	Time Notified 01:39 PM		Total Units 01		Total Injured		Total Killed 00		
<u>3</u>	On Emergency Hit	and Run	Lane Closs	ure	☐ Work Zone	▼ Traîlei	r or To	wed	Reporting Threshold	
<u>ا ا</u>	Government Property	Active Sc	hool Zone	School NO	Bus Related	Tags				
	▼ Reportable	Crash Type DT4000 (STA	NDARD CRASH	ł)		Amend	ded		Secondary Crash	
Ī	Description Diagram						I D		D.	
	Diagiam						Photo	nstruction os By	Бу	
						0	Additi NON	ional Infor	mation	
					511	ł 78 ——				
			P	(eller R	oad					
	Not To Scale			**************************************						
	I, a sworn law enforcement ON 12-28-21 OPERATOR WAS SOU STH 78. NO INJURIES REPORTED.						INTOR	ROAD SIGN	NALONG WEST SIDE OF	

Crash Date 12/28/2021
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Location

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Crash Date 12/28/2021

Crash Time 01:30 PM

	ON KELLER RD 26 FT N OF STH78 SB				Latitude 43.321416806 X Coordinate		Longitu -89.73	2144869	
	IN THE TOWN OF PRAI IN SAUK COUNTY	IRIE DU SAC		278466.	278466.625		4800134		
				Structure NO STR	Type UCTURE				
	Crash Scene			'					
	First Harmful Event			FirstHarm	nful Event Lo	cation			
	TRAFFIC SIGN POST			ON ROA	DWAY				
	Manner of Collision			Light Con					
		VEHICLE IN TRANSPORT	DAYLIG						
	Road Surface Condition(s) SNOW		Roadway	ractor(s)					
	Environment Factor(s)								
	WEATHER CONDITION	ıs		ROAD S	URFACE C	CONDITION	(WET, IC	CY, SNOW, SLUSH,	
	Weather Condition(s)								
	SNOW								
	Animal Type			I	Relation To Trafficway TRAFFICWAY - ON ROAD				
	Crash Classification - Locat	tion			Crash Classification - Jurisdiction NO SPECIAL JURISDICTION				
	TribalLand				Access Control			Special Study	
				PARTIA	PARTIAL CONTROL				
	Within Interchange Area NO	Junction Location INTERSECTION		Intersection Type T-INTERSECTION					
	Unit Summary								
	Unit Status	Classification Unit Type							
			1	Classification	•	1			
	IN TRANSIT		D CLASS	Classification	•	AUTOMOI			
01			1	Classification		1		ements	
7	IN TRANSIT Vehicle Type PASSENGER VAN Total Occs	Train/Bus#Recorded	D CLASS Total # Citations Issue		Total Traile	AUTOMOI Operating A	s Endorse Total Ha	ements zMatTypes	
07	IN TRANSIT Vehicle Type PASSENGER VAN Total Occs 1		D CLASS		Total Traile	AUTOMOI Operating A	Total Ha	zMat Types	
	IN TRANSIT Vehicle Type PASSENGER VAN Total Occs 1 Insurance?	Direction Of Travel	Total#Citations Issu 1 Pre CrashTi	ed	Total Traile 1 Speed Lim	AUTOMOI Operating A	Total Ha. Total Lar	zMat Types	
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UNIT 01	IN TRANSIT Vehicle Type PASSENGER VAN Total Occs 1 Insurance?	Direction Of Travel SOUTHBOUND	Total#Citations Issu 1 Pre CrashTi	ed ire	Total Traile 1 Speed Lim	AUTOMOI Operating A ers nit Emergency NOT APPI	Total Ha. O Total Lar 2 Motor Vel	zMatTypes nes hicle Use =	
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Crash Time 01:30 PM

		Towed Due To Damage			I	Vehicle Removed By						
					OPERATOR Vehicle Factors							
		RIGHT TURN			venicle rations							
		Driver Prior Action Other				NOT APPLICABLE						
LIND	VEHICLE	Driver Actions SPEED TOO FAST/C	OND)								
5	5	Owner Name DANIEL PAUL HICKEY (262) 939-1761					Owner Address 6228 LARCHMONT DR MOUNT PLEASANT, WI 53406 , US					
		l Sequence Of Eve	nts						********			
	8	Event TRAFFIC SIGN POST										
	Event											
	8	Event										
	3	Event										
⊨												
IN	Insurance Company PROGRESSIVE-ADVANCED-INSURANCE-CO						Individual DANIEL HICKEY					
5		Trailer Plate # CB16933	Plate Typ		Make FRRV		State WI		1	try of Issuance ED STATES		
UNIT	RAILER!	Unit Type UTILITY TRAILER Vehicle Identification Number 5NHUBL V26BN072945 Individual DANIEL PAUL HICKE (262) 939-1761				EY 6228				ss LARCHMONT DR NT PLEASANT, WI 53406 , US		
Ś	TRA									itti EEAGAIti, Wi 33400 , 33		
		ndividual ————————————————————————————————————										
		Driver DANIEL PAUL HICKEY				Citations issued Sex 1 MALE						
	3	(262) 939-1761				Date of Birth Race WHITE						
LIND	8	Address				Driver License Number						
_		6228 LARCHMONT DR MOUNT PLEASANT, WI 53406 , US			STATE: WISCONSIN COUNTRY: UNITED STATES							
	Sai	On Duty Crash fety Equipment				Safety Equipment						
		Row Seat Position 01 - FRONT ROW 07 - LEFT					SHOULDER & LAP BELT					
		HeimetUse					Helmet Compliance					
		Eye Protection					TintCompliance					
10	100	inj Injury _N o	Injury Severity Airbag NO APPARENT INJURY NON DEPLOYED									
		Ejection Path			ath	Trapped/Extricat			Trapped/Extricated			
	SMINE!	NOT EJECTED NOT EJECTED/NOT APP				LICABLE				NOT TRAPPED		

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		Medical Transport NOT TRANSPORT	ED		EMS Agency Identifier		EMS Run#	
		Hospital			Date of Death		Time of Death	
3		Distracted By	Distracted By S NOT APPLIC	iource ABLE (NOT DISTRAC	CTED)			
		Distracted By Action NOT DISTRACTED						
		Non Motorist	Striking Unit#	Location				
		Prior Action						
		Action						
	UAL							
TINO	INDIWIBUAL							
_	INDI							
		Action Other						To/From School
	, L	orug & Alcohol	Suspected Alco	ohol 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	•	
2	001	Drug Type		<u> </u>		•		
		Individual Condition						
		APPEARED NORM	1AL					
	Ì	Violations	*****	ungangangangan an a		KEKKKKKKKKKKKKKK	TERRETERE THE THE THE THE THE THE THE THE THE TH	
	0.1	UTC Number BD759522	Issue To? 001	Statute Number 346.57(3)	Description DRIVING TOO FAST	FOR CONDITIO	NS	