

6TL0D5DXZ0

22-01571

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Location

ON STH33 EB 65 FT E OF BREEZY HILL RD IN THE TOWN OF FAIRFIELD IN SAUK COUNTY	Latitude 43.504251905	Longitude -89.605952017
	X Coordinate 289334.4375	Y Coordinate 4820113
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 03 - FRONT TO REAR	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLEAR		
Animal Type	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION

Unit Summary

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

Vehicle

UNIT	VEHICLE	License Plate Number	Plate Type	St	Country of Issuance	
		Vehicle Identification Number 3GNFK16R4VG101214	Make CHEVROLET	Year 1997	Model SUBURBAN	
		Color WHI - WHITE	Body Style UT - SPORT UTILITY VEHICLE		Bus Use	
		Initial Contact Point 12 - FRONT	Vehicle Damage			
		Extent Of Damage FUNCTIONAL DAMAGE	12 - FRONT			



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UNIT VEHICLE	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR	
	What Driver Was Doing GOING STRAIGHT	Vehicle Factors NOT APPLICABLE	
	Driver Prior Action Other		
	Driver Actions FOLLOWING TOO CLOSE, OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER		
01 01	Owner Name SHANNON LYNN ZONTA (608) 404-0735	Owner Address 419 N MAPLE ST # 4 NORTH FREEDOM, WI 53951 , US	
	Sequence Of Events		
01 02 03 04	Event MOTOR VEH IN TRANSPORT		
	Event		
	Event		
	Event		
UNIT INDIVIDUAL	Individual		
	Driver SHANNON LYNN ZONTA (608) 404-0735	Citations Issued 1	Sex FEMALE
		Date of Birth [REDACTED]	Race WHITE
	Address 419 N MAPLE ST # 4 NORTH FREEDOM, WI 53951 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
01 001	Safety Equipment		
	On Duty Crash	Safety Equipment SHOULDER & LAP BELT	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	
	Helmet Use	Helmet Compliance	
	Eye Protection	Tint Compliance	
	Injury	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
	Distracted By Distracted By Source VEHICLE-INTEGRATED DEVICE		
	Distracted By Action OTHER ACTION (LOOKING AWAY FROM TASK ETC)		
	Non Motorist	Striking Unit #	Location

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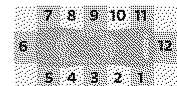
UNIT INDIVIDUAL	Prior Action						
	Action						
	Action Other			To/From School			
	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO			
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	Alcohol Test Results			
	Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results			
	Drug Type						
	Individual Condition APPEARED NORMAL						
	Violations						
	01	001	01	01	UTC Number BG110137	Issue To? 001	Statute Number 344.62(1)

Unit Summary

UNIT 02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT			Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE
	Traffic Way TWO-WAY, NOT DIVIDED			Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO
	Surface Type BLACKTOP (BITUMINOUS)			Road Curvature STRAIGHT		Road Grade LEVEL
	Truck Bus or HazMat NO					

Vehicle

UNIT VEHICLE 02	License Plate Number DFENDR		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number 1N4AL21E29N478251		Make NISSAN	Year 2009	Model ALTIMA 2.5	
	Color SIL - SILVER (ALUMINUM)		Body Style 4D - 4DR		Bus Use	
	Initial Contact Point 06 - REAR		Vehicle Damage			
	Extent Of Damage FUNCTIONAL DAMAGE		06 - REAR			



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UNIT VEHICLE	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR	
	What Driver Was Doing SLOW/STOPPING	Vehicle Factors	
	Driver Prior Action Other	NOT APPLICABLE	
	Driver Actions OPERATED MOTOR VEHICLE IN AGGRESSIVE/RECKLESS MANNER		
02 02	Owner Name ROBERT EUGENE JACOBY (608) 643-9815	Owner Address 1310 JEFFERSON ST BARABOO, WI 53913 , US	
	Sequence Of Events		
01 02 03 04	Event MOTOR VEH IN TRANSPORT		
	Event		
	Event		
	Event		
UNIT	Policy Holder		
	Insurance Company PROGRESSIVE-ADVANCED-INSURANCE-CO	Individual ROBERT JACOBY	
UNIT INDIVIDUAL	Individual		
	Driver ROBERT EUGENE JACOBY (608) 643-9815	Citations Issued 0	Sex MALE
		Date of Birth [REDACTED]	Race WHITE
	Address 1310 JEFFERSON ST BARABOO, WI 53913 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
02 002	Safety Equipment		On Duty Crash
			Safety Equipment
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
Injury		Injury Severity	Airbag
		NO APPARENT INJURY	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
Distracted By		Distracted By Source	
		NOT APPLICABLE (NOT DISTRACTED)	
Distracted By Action			
NOT DISTRACTED			

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UNIT	Non Motorist		Striking Unit #	Location		
	Prior Action					
	Action					
	Action Other				To/From School	
	Drug & Alcohol		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					
	02	002				