WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash	Document#	Agenc 22-01	y Crash Number 486		Investigating Officer/Deputy DEPUTY S. MESSNER			
M 3	Crash Date 02/15/2022	Crash Time 07:07 PM	1		rrived /2022	Time Arrived 07:09 PM				
1PTM3	Date Notified 02/15/2022	Time Notified 07:09 PM		Total U	Inits	Total Injured	Total Kill	ed		
00	On Emergency	Hit and Run	✓ Lane Clos	ure	Work Zone	Trailer	or Towed	Reporting Threshold		
eTL	Government Property	Active S	chool Zone	Schoo NO	l Bus Related	Tags				
	▼ Reportable	Crash Type DT4000 (ST	ANDARD CRASI	- 1)		Amend	led	Secondary Crash		
	Description	•				•		•		
	Diagram W. F	Pine Street/STF	133	1	\$		Photos By OFFICER S			
		*		· ·	Not to scale					
	Linn Street/ STH 136				Linn Street/ S	> 1 H 33	Additional Inf PHOTOS	ormation		
	Yello	ow Turn Arrow Point o	f impact		Unit 1 C	nt .				
	02 02	S I I		*************	02					
		W. Pine S	treet/STIH 136	**************************************		Witness				
		W. Pine	treet/STH (136		.					

ON TUESDAY, 2/15/2022, AT APPROXIMATELY 7:07 PM, UNIT 1, A 2013 SILVER FORD ESCAPE, BEARING WI REGISTRATION PLATE #208MBN, WAS BEING DRIVEN BY JACOB HANGER WITH PASSENGER JESSICA HANGER. UNIT 1 WAS WESTBOUND ON LINN STREET, WENT INTO THE TURN LANE TO TURN SOUTH BOUND ON W. PINE STREET. THE FOUR WAY INTERSECTION HAS TRAFFIC LIGHTS EACH DIRECTION. UNIT 1 HAD A YELLOW TURN LIGHT. UNIT 1 PROCEEDED TO TURN. UNIT 2, A 2011 SILVER DODGE DURANGO, BEARING WI # AMY1019, WAS DRIVEN BY LINK BUCHANAN, EASTBOUND ON LINN STREET. UNIT 2 HAD A GREEN LIGHT AND UPON ENTERING THE INTERSECTION TURNED YELLOW. THE YELLOW LIGHT IS ON A TIMER FOR THREE SECONDS. UNIT 2 STRUCK UNIT 1, WHEN UNIT 1 WAS TURNING, IN THE PASSENGER SIDE REAR PANEL. UNIT 1 SPUN CLOCKWISE FOR APPROXIMATELY 120 DEGREES AND CAME TO A REST WITH SIDE CURTAIN AIRBAGS DEPLOYED. NO ONE WAS INJURED IN EITHER CAR. BARABOO AMBULANCE CHECKED THE OCCUPANTS OF UNIT 1 FOR ANY INJURIES DUE TO AIRBAG DEPLOYMENT. THE WITNESS, IDENTIFIED AS HEATHER LAWRENCE, OBSERVED THE CRASH, THEN LOOKED TO THE SIGNAL LIGHTS AND OBSERVED A RED LIGHT. UNIT 1 WAS REMOVED BY CRAIGS TOWING. UNIT 2 WAS REMOVED BY THE OPERATOR.

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

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Crash Date 02/15/2022

Crash Time 07:07 PM

Location ——										
ON STH136 EB	Latitude Longitude			de						
32 FT S	43.474703733 -89.768752185				3752185					
OF LINN ST/ STH33 WB	X Coordinate Y Coordinate			linate						
IN THE VILLAGE OF WEST IN SAUK COUNTY	276063.90625 4817256.5									
M OAGN GGGN 1					Structure 7	Гуре		1		
	NO STRU	JCTURE								
Crash Scene										
FirstHarmfulEvent					FirstHarm	ful Europti	agation			
MOTOR VEH IN TRANSPO	РT				ON ROAL		.ocauon			
Manner of Collision					Light Cond					
01 - ANGLE					DARK/LI					
Road Surface Condition(s)					Roadway					
. ,					3 Coacivay	s actor(s)				
DRY										
Environment Factor(s)					1					
NONE					NONE					
Weather Condition(s)					1					
CLEAR										
Animal Type					Relation T	o Trafficus	317			
Ammarrype					TRAFFIC		•			
Crash Classification - Location					Crash Clas	ssification	- Jurisdiction			
PUBLIC PROPERTY					NO SPECIAL JURISDICTION					
TribalLand					Access Control Special Study					
					FULL CO	NTROL				
1 1	Junction Location NTERSECTION			Intersection	on Type AY INTER	eectio	.ı			
	NIERSECTION		_			SECTIO	N			
Closure Type LANE CLOSURE			Reaso	ons for Clos	ure					
	Time to kind on a /D 4 Oleans	-1	1 A M	ENEODO	EMENT, T	OW TRU	CK			
Date Initial Lane/Rd Closed 02/15/2022	Time Initial Lane/Rd Closed 07:09 PM	a	LAW	ENTONC						
Date All Lanes Open	Time All Lanes Open			Scene Clea						
02/15/2022	07:41 PM		02/15	/2022	07:41 PM					
Unit Summary -										
Unit Status				erating As C	Classification Unit Type					
IN TRANSIT		D CI	ASS					AUTOMOBILE		
Vehicle Type					Operating As Endorsements					
(SPORT) UTILITY VEHICLE										
Total Occs	Train/Bus#Recorded		# Citat	ions Issued	ł	TotalTra	''		MatTypes	
2		1				0	0			
Insurance?	Direction Of Travel			CrashTire		Speed Li	mit	TotalLan	es	
YES	SOUTHBOUND			Mark		25		4	2-1-11	
Most Harmful Event: Collision W MOTOR VEH IN TRANSPO			ial Fun SPEC	iction IAL FUNC	TION		Emergency NOT APPL			
							Traffic Conti			
Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER TRAFFIC SIGNAL							NO	ormohera	uvenvissiig	
DIVIDED HWY W/O TRAFFIC BARRIER TRAFFIC SIGNAL Surface Type Road Curvature							Road Grade			
BLACKTOP (BITUMINOUS) Road Curvature STRAIGHT							LEVEL			
Truck Bus or HazMat	•	10,		<u>. </u>						
NO										
Vehicle										
		I Si-	- T		т	St	Country of l-	lianos		
License Plate Number 208MBN			eType T₋∧⊪	TOMOBIL	_	WI	Country of lss			
	hor	Mak		OWICE		Year		A159		
Vehicle Identification Num 1FMCU9GX8DUB1531		FOF				2013	Model ESCAPE SE			

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		Color		Bod	ly Style		Bus Use			
		SIL - SILVER (ALUMINUM)		LL	- CARRYALL					
	ш	Initial Contact Point		Veh	nicle Damage		:/// WARROW 1940/24/ 1940/			
L	Ħ	04 - RIGHT SIDE REAR			-	7 8 9 10 H				
NS NS	Ŧ	Extent Of Damage			- RIGHT SIDE MIDI		SIDE REAR, 05	6 12		
-	VEHICLE	DISABLING DAMAGE			IGHT REAR CORN	ER, 06 - REAR		5 4 9 2 1		
	7	Towed Due To Damage		Voh	nicle Removed By					
		TOWED DUE TO DISABLING	C DAMAGE		AIGS TOWING					
			J DAMAGE							
		What Driver Was Doing		ven	nicle Factors					
		LEFT TURN			T APPLICABLE					
		Driver Prior Action Other		"	TAFFLICABLE					
		Driver Actions	= 14/43/							
	Ш	FAILED TO YIELD RIGHT-OF-WAY								
N	Ö									
5	I									
_	VEHIC									
		OwnerName			Owner Address					
_		JESSICA MAE HANGER			S4984 LOVERS LN					
0	5	(608) 477-0232			BARABOO, WI 539	13 , US				
		Sequence Of Events								
		Event								
	5	LEFT TURN								
		Frank								
	8	Event MOTOR VEH IN TRANSPOR	lT .							
		Event								
	8									
		Event								
	8									
١.		Policy Holder								
		Insurance Company								
5		PROGRESSIVE-UNIVERSA	LINSURANCE-COMP	Individual JESSICA HANGER						
			E-IIIOOIIAIIOE-OOMI		LOUIDATIANOLI					
		Individual								
		Driver		- 1	Ditations Issued	Sex				
	_	JACOB JAMES HANGER		1		MALE				
				Date of Birth Race						
⊨	<u> </u>				WHITE					
S	2	Address		Davost iconso Number						
_	NON	S4984 LOVERS LN		STATE, MICCONDIN COUNTRY, INSITES STATES						
		BARABOO, WI 53913 , US		STATE: WISCONSIN COUNTRY: UNITED STATES						
		On Duty C	rash	l s	Safety Equipment					
	Sai	lety Equipment			, , ,					
		Row	Seat Position	⊢s	SHOULDER & LAP I	BELT				
		01 - FRONT ROW	07 - LEFT							
		He i met Use		-	lelmet Compliance					
		11GH/ICC GGG		Ι,	ionici ounipianoe					
		Eye Protection		+	int Compliance					
		Lya rotacton		Ι,	ii t Compilance					
		injury Seve	erity .		kirbag					
2	8	Injury NO APPA	RENT INJURY	- 1	DEPLOYED-CURTA	IN				
		100001001100011000000000000000000000000	jection Path		ZE EUTED-UNITA	163	Trapped/Extricated			
		'	OT EJECTED/NOT API	Pi ic	ARI F		NOT TRAPPED			
		Medical Transport	O LVEVILDATO I AFI				EMS Run#			
		NOT TRANSPORTED		=	MS Agency Identifier		LWO KUR#			
l	### [Bib	HOI INMHOPORIED		- 1			I			

Crash Date 02/15/2022 Crash Time 07:07 PM

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

		Hospital				Date of Death			Time of Death				
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)												
Distracted By Action NOT DISTRACTED													
		Non Motorist	Striking Unit	t#	Location								
		Prior Action											
		Action											
	¥												
LNO	INDIVIDUAL												
_	2												
		Action Other						To/From School					
		Suspected Alcohol Use Drug & Alcohol NO				Suspected Drug Use NO)						
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type			Alcohol Test Results					
		Drug Test Given Drug Test Type TEST NOT GIVEN											
5	8	Drug Type											
		Individual Condition											
		APPEARED NORMAL											
		Individual											
		Passenger JESSICA MAE HANGER (608) 477-0232			Otations Issued Sex FEMALE								
⊢	DIVIDUAL				Date of Birth	Race WHITE							
EN C		Address S4984 LOVERS LN BARABOO, WI 53913 , US On Duty Crash ety Equipment			Driver License Number								
	Z				STATE: WISCONSIN COUNTRY: UNITED STATES								
	Sai				Safety Equipment								
		Row 01 - FRONT ROW		Seat Pos 09 - RIO		SHOULDER & LAP BELT							
		HelmetUse				Heimet Compliance							
		Eye Protection			Tint Compliance								
5	8	Injury Severity NO APPARENT INJURY			Airbag NON DEPLOYED								
		Ejected	Ej∈	ection Pat	h				Trapped/Extricated				
		NOT EJECTED Medical Transport) I E/JEC	TED/NOT APPL	ICABLE EMS Agency Identifi	ier		NOT TRAPPED EMS Run#				
		NOT TRANSPORT	ED			Date of Death			Time of Death				

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 02/15/2022

Crash Time 07:07 PM

		Distracted By	Dist	racted By So	ource								
		Distracted By Action											
		Non Motorist	Strik	ing Unit#	Location								
		Prior Action			- 1								
		Action											
⊢	NDWDUAL												
UNIT	DIVIE												
	IN												
		Action Other										To/From School	
	I	Suspected Alcohol Use Drug & Alcohol NO					Suspected Drug Use						
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test T	уре				Alcohol Tes	t Results		
		Drug Test Given TEST NOT GIVEN			Drug Test Typ	е		Drug Test Results					
5	002	Drug Type						ı					
		Individual Condition											
		APPEARED NORM	1AL										
		Violations				*****							
	0.1	UTC Number BG024354	sst	ue To? 1	Statute Number 346.37(1)(e)1		Description FYR-YELLOW FLAS	HING S	SIGNAL O	PERATOR Y	/IOL		
	Unit	t Summary •											
	Unit	Status RANSIT				1	ehicle Operating As Class CLASS	ification		Unit Type AUTOMOE	BILE		
02		cle Type								Operating A	s Endorsem	ents	
_		SENGER CAR		Train/Bus	#Recorded	Тта	otal#Citations Issued	Total Traile	ers	Total HazN	1at Types		
	1	rance?		Direction C		0			0 Speed Lim		0 Total Lanes		
LINO	YES		~ ~ \A6	EASTBO		[Pre CrashTire Mark Decial Function		25	4 Emergency Motor Vehicle Use			
5	MO	TOR VEH IN TRANS				N	O SPECIAL FUNCTIO	N		NOT APPL	ICABLE		
	DIVI	DIVIDED HWY W/TRAFFIC BARRIER					affic Control O CONTROL			Traffic Control Inoperative/Missing NO			
		ace Type I CKTOP (BITUMIN C	ous)	ļ			Road Curvature STRAIGHT			Road Grade LEVEL			
	Truc NO	k Bus or HazMat											
	1	Vehicle License Plate Numbe	r			1 =	Plate Type	Ī	St T	Country of ls	suance	s a geststaa a geststaa a ageststaa	
		AMY1019	,			- 1	UT - AUTOMOBILE			UNITED ST			
05	02	Vehicle Identification 1D4RE4GG4BC65				- 1	fake OODGE			Model DURANGO			

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:		Color		Body Style		Bus Use						
		SIL - SILVER (ALUMINUM	1	UT - SPORT UTIL	ITY VEHICLE							
	ш	Initial Contact Point	•	Vehicle Damage	-							
_	Ξ.	12 - FRONT		7 Chiloso Dannago			7 8 9 10 11					
INN	¥.			01 - RIGHT FRON	T CORNER, 02 - RIG	HT SIDE	6 12					
⋾	VEHICL	Extent Of Damage		FRONT, 12 - FRO	NT		5 4 3 2 1					
	3	FUNCTIONAL DAMAGE					CONTRACTOR CONTRACTOR ACTION ACTIONS					
		Towed Due To Damage		Vehicle Removed By								
		NOT TOWED		OPERATOR								
		What Driver Was Doing		Vehicle Factors								
		GOING STRAIGHT										
		Driver Prior Action Other		NOT APPLICABLE								
		Driver Actions										
:	ш	NO CONTRIBUTING ACTION										
—	\$13,535 (200)											
INN	VEHICL											
\Box	Ħ											
	3											
		OwnerName		Owner Address								
C.	CJ.	BOBBY GENE BUCHANAI	I JR	344 BERKLEY BLVD								
05	62	(608) 432-2193		BARABOO, WI 53913 , US								
		Sequence Of Events		<u> </u>								
		Event										
	5	MOTOR VEH IN TRANSPO	RT									
	8	Event										
	en.	Event										
	03											
		Event										
	9											
		Policy Holder										
L		Insurance Company		Individual								
_		DAIRYLAND-NATIONAL-II	is-co	BOBBY BUCHA	NAN							
		Individual										
		Driver		Citations Issued	Sex							
		LINK RAYMOND BUCHAN	AN	0								
	7	(608) 432-2193				MALE Race						
	DUA			Date of Birth	Race							
╘												
Š	INDIN	Address		Driver License Number								
_	ŧ.	344 BERKLEY BLVD BARABOO, WI 53913 , US		STATE: WISCONSIN COUNTRY: UNITED STATES								
		BARABOO, WESSELS , S.	•	STATE. WISCONSIN CODETRY, SHITTED STATES								
		On Duty	Crash	Safety Equipment								
	Sal	ety Equipment										
		Row	SeatPosition	SHOULDER & L	AP BELT							
		01 - FRONT ROW	07 - LEFT									
:				Halmat Campliana								
		Holmothico		Helmet Compliance								
		HelmetUse										
		Eye Protection		Tint Compliance								
		Eye Protection		·								
12	63	Eye Protection	verity	Airbag								
02	800	Eye Protection	verity PARENT INJURY	·	D							
02	5003	Eye Protection	verity PARENT INJURY Ejection Path	Airbag	D	Trapped/Extricated	ı					
05	003	Eye Protection Injury Se	PARENT INJURY	Airbag NON DEPLOYE	D	Trapped/Extricated						
02	003	Eye Protection Injury Se Injury NO API	PARENT INJURY Ejection Path	Airbag NON DEPLOYE		1						

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								(222, 222 .222
		Hospital			Date of Death		Time of Death	
		Distrac	ted By Source					
		Distracted By NOT A	APPLICABLE (NOT DI	STRA	CTED)			
		Distracted By Action NOT DISTRACTED						
		Non Motorist	Unit# Location					
		Prior Action						
		Action						
	NDIVIDUAL							
L N N	3							
ā	2							
	2							
		Action Other						To/From School
	1	Drug & Alcohol NO	cted Alcohol Use		Suspected Drug Use NO			
		Alcohol Test Given	AlcoholTe	st Type	1		Alcohol Test Results	
		TEST NOT GIVEN						
		Drug Test Given TEST NOT GIVEN	Drug Test	Type		Drug Test Results		
05	88	Drug Type	•					
		Individual Condition						
		APPEARED NORMAL						
	Wif	ness						
		/idual		T	Address			Date of Ritth
5	HEA	ATHER MARIE LAWRENCE			303 BROADWAY ST			
	(608	3) 963-4657			BARABOO, WI 53913	, US		
WITN								