WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| Document Number Override | Primary Crash Document # Crash Time 12:30 AM | | Agency Crash Number 22-05676 Date Arrived 06/17/2022 | | Investigating Officer/Deputy DEPUTY I. HANSON Time Arrived 01:00 PM | | | |
|--|---|------------------|---|------------------------|---|-------------------------|---------------------|--|
| Crash Date 06/16/2022 | | | | | | | | |
| Date Notified 06/17/2022 | Time Notified 01:00 PM | | Total Units 01 | | Total Injure | Total Kille | | |
| On Emergency Hit | and Run | Lane Closu | ıre | Work Zone | Traile | r or Towed | Reporting Threshold | |
| Government Property | | hool Zone | School NO | Bus Related | Tags | | | |
| ▼ Reportable | Crash Type DT4000 (STA | NDARD CRASH |) | | Amen | ded | Secondary Crash | |
| Description Diagram | | | | | | Reconstructio | _ | |
| not scale | | | | | (| Photos By HANSON | | |
| | | | | | | Additional Info | prmation DTOS | |
| | <u>-</u> ₽) | رتينيال) | | | | | | |
| اليلال | | e.' | | | | | | |
| | Mailb E9931 Shady | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| ↓ I, a sworn law enforcement | nt officer, agre | e that I have no | ot added | I any CJIS data in thi | s report. | _1 | | |
| UNIT 1 WAS WEST ON SHADY LAN OPERATOR THEN CONTINUED BAC THE MAILBOX. 9109 | E ROAD. UNIT 1 | STATED SHE SWE | RVED TO | MISS A DEER AND ENTE | RED THE EAS | | | |

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Crash Date 06/16/2022

Crash Time 12:30 AM

| L | ocation — | | | | | | | | | | |
|---|---|-------------|---|--|---|------------------------------|--------------------------|--|---|---|--|
| | ON SHADY LANE RD | Latitude | | Longitud | Longitude | | | | | | |
| | 0.31 MI E | | | | | 43.54724884 | | -89.831 | 092834 | | |
| | OF MIRROR LAKE RD | | | | | X Coordinate | | | Y Coord | inate | |
| | IN THE TOWN OF DELTON IN SAUK COUNTY | | | | | 271295.90625 4825483 | | | 33 | | |
| ľ | IN SAUK COUNTY | | | | | | Туре | | I . | | |
| | | | | | | | | | | | |
| C | rash Scene | | | | | I. | | | | | |
| _ | irst Harmful Event | | | | | First Harm | of all Essent | Lagation | | | |
| | AAILBOX | | | | | SHOULE | | | | | |
| 1 - | Manner of Collision | | | | | | | пі | | | |
| | | \/EL | IICI E IN TRANSPORT | | | Light Cond | | | | | |
| | | VEF | IICLE IN TRANSPORT | | | DAYLIGI | | | | | |
| | Road Surface Condition(s) | | | | | Roadway | Factor(s) | | | | |
| 1 | DRY | | | | | | | | | | |
| E | Environment Factor(s) | | | | | | | | | | |
| | NONE | | | | | NONE | | | | | |
| | | | | | | | | | | | |
| ۷ | Veather Condition(s) | | | | | | | | | | |
| | CLEAR | | | | | | | | | | |
| 1 | Animal Type | | | | | Relation T | o Trafficw | av | | | |
| | 71 | | | | | | | NOT ON ROA | D | | |
| (| Crash Classification - Locat | ion | | | | | | - Jurisdiction | | | |
| | PUBLIC PROPERTY | | | | | NO SPECIAL JURISDICTION | | | | | |
| 7 | ribal Land | | | | | Access Control Special Study | | | | | |
| | | | | | | NO CONTROL | | | | | |
| V | Within Interchange Area Junction Location Intersectio | | | | | ion Type | | | | | |
| | | | | | | INTERSECTION | | | | | |
| | NO | | | | NOI AN | INTERSE | CTION | | | | |
| ᆫ | | ' | NON-SONOTION | | NOI AN | INTERSE | CTION | | | | |
| U | nit Summary • | ' | TON-JONOTION | I Vehicle One | | | | Linit Tuno | | | |
| U | nit Summary Jnit Status | ' | NON-SONO HON | Vehicle Ope | | | | Unit Type | DII E | | |
| U | nit Summary Jnit Status N TRANSIT | | NON-SONOTION | Vehicle Ope | | | | AUTOMO | | nents | |
| U U II V | nit Summary Jnit Status N TRANSIT /ehicle Type | | NON-SONOTION | • | | | | | | ments | |
| U | nit Summary Jnit Status N TRANSIT /ehicle Type PASSENGER CAR | | | D CLASS | erating As C | Classification | | AUTOMO Operating A | s Endorse | | |
| U | nit Summary Unit Status N TRANSIT Vehicle Type PASSENGER CAR Total Occs | | Train/Bus # Recorded | D CLASS Total # Cita | erating As C | Classification | Total Tra | AUTOMO Operating A | s Endorsei | ments Mat Types | |
| U 1 | nit Summary Unit Status N TRANSIT Vehicle Type PASSENGER CAR Total Occs | | Train/Bus # Recorded | D CLASS Total # Cita 0 | erating As C | Classification | Total Tra | AUTOMO Operating A | S Endorsel Total Haz | Mat Types | |
| U | nit Summary Unit Status N TRANSIT Vehicle Type PASSENGER CAR Total Occs Insurance? | | Train/Bus # Recorded Direction Of Travel | D CLASS Total # Cita 0 | erating As C | Classification | Total Tra 0 Speed L | AUTOMO Operating A | Total Haz Total Lan | Mat Types | |
| U III | nit Summary Unit Status N TRANSIT Vehicle Type PASSENGER CAR Total Occs Insurance? VES | | Train/Bus # Recorded Direction Of Travel WESTBOUND | Total # Cita 0 | tions Issued CrashTire | Classification | Total Tra | AUTOMO Operating A ailers | Total Haz Total Lan 2 | Mat Types es | |
| U | nit Summary Jnit Status N TRANSIT Vehicle Type PASSENGER CAR Total Occs Insurance? VES Most Harmful Event: Collisi | | Train/Bus # Recorded Direction Of Travel WESTBOUND | D CLASS Total # Cita 0 | tions Issued CrashTire Mark | Classification | Total Tra 0 Speed L | AUTOMO Operating A | Total Haz 0 Total Lan 2 Motor Veh | Mat Types es | |
| U | nit Summary Jnit Status N TRANSIT Vehicle Type PASSENGER CAR Total Occs Insurance? VES Most Harmful Event: Collision | | Train/Bus # Recorded Direction Of Travel WESTBOUND | Total # Citar 0 Pre Special Fun | tions Issued CrashTire Mark action | Classification | Total Tra 0 Speed L | AUTOMO Operating A ailers imit Emergency NOT APP | Total Haz 0 Total Lan 2 Motor Veh | Mat Types es icle Use | |
| | nit Summary Jinit Status N TRANSIT Vehicle Type PASSENGER CAR Total Occs Insurance? VES Most Harmful Event: Collision MAILBOX Traffic Way | on W | Train/Bus # Recorded Direction Of Travel WESTBOUND | Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont | tions Issued CrashTire Mark action EIAL FUNC | Classification | Total Tra 0 Speed L | AUTOMO Operating A ailers imit Emergency NOT APP Traffic Cont | Total Haz 0 Total Lan 2 Motor Veh | Mat Types es icle Use | |
| | nit Summary Jinit Status N TRANSIT Vehicle Type PASSENGER CAR Total Occs Insurance? VES Most Harmful Event: Collision MAILBOX Traffic Way TWO-WAY, NOT DIVID | on W | Train/Bus # Recorded Direction Of Travel WESTBOUND | Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont | crashTire Mark Iction ISLAL FUNC | Classification | Total Tra 0 Speed L | AUTOMO Operating A ailers imit Emergency NOT APP | Total Haz 0 Total Lan 2 Motor Veh LICABLE rol Inopera | Mat Types es icle Use | |
| U III V F T T T T T T T T T T T T T T T T T T | nit Summary Init Status N TRANSIT //ehicle Type PASSENGER CAR Total Occs Insurance? //ES //MAILBOX Traffic Way WO-WAY, NOT DIVIDIONAL Surface Type | on W | Train/Bus # Recorded Direction Of Travel WESTBOUND | Total # Citar 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva | crating As C tions Issued CrashTire Mark metion CIAL FUNC | Classification | Total Tra 0 Speed L | AUTOMO Operating A ailers imit Emergency NOT APP Traffic Cont NO | Total Haz 0 Total Lan 2 Motor Veh LICABLE | Mat Types es icle Use | |
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| | nit Summary Init Status N TRANSIT Vehicle Type PASSENGER CAR Total Occs Insurance? VES MAILBOX Traffic Way TWO-WAY, NOT DIVID Surface Type BLACKTOP (BITUMING Truck Bus or HazMat NO Vehicle | on W | Train/Bus # Recorded Direction Of Travel WESTBOUND | Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH | crashTire Mark action EIAL FUNC FROL ature T | Classification | Total Tra 0 Speed L 35 | AUTOMO Operating A ailers imit Emergency NOT APP Traffic Cont NO Road Grade DOWNHIL | Total Haz 0 Total Lan 2 Motor Veh LICABLE rol Inopera | Mat Types es icle Use | |
| | nit Summary Init Status N TRANSIT Vehicle Type PASSENGER CAR Total Occs Insurance? VES MAILBOX Traffic Way TWO-WAY, NOT DIVID Surface Type BLACKTOP (BITUMING Truck Bus or HazMat NO Vehicle License Plate Numbe | on W | Train/Bus # Recorded Direction Of Travel WESTBOUND | Total # Citar 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH | crashTire Mark Inction ISAL FUNC ITAL ITAL ITAL ITAL ITAL ITAL ITAL ITAL | CTION | Total Tra 0 Speed L 35 | AUTOMO Operating A ailers imit Emergency NOT APP Traffic Cont NO Road Grade DOWNHIL | Total Haz 0 Total Lan 2 Motor Veh LICABLE rol Inopera | Mat Types es icle Use | |
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| | nit Summary Init Status N TRANSIT //ehicle Type PASSENGER CAR Total Occs Insurance? //ES //MAILBOX Traffic Way INSURACE Type BLACKTOP (BITUMING Truck Bus or HazMat NO Vehicle License Plate Numbe AKH5426 Vehicle Identification 3FAHP0JAXAR33: Color BLK - BLACK | on W | Train/Bus # Recorded Direction Of Travel WESTBOUND ith | Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AU Make FORD Body Style 4D - 4DR | tions Issued CrashTire Mark action HAL FUNC TO | CTION | Total Tra 0 Speed L 35 | AUTOMO Operating A ailers imit Emergency NOT APP Traffic Cont NO Road Grade DOWNHIL Country of Is UNITED S' Model FUSION S | Total Haz 0 Total Lan 2 Motor Veh LICABLE rol Inopera | Mat Types es icle Use tive/Missing | |
| | nit Summary Init Status N TRANSIT //ehicle Type PASSENGER CAR Total Occs Insurance? //ES //MAILBOX Traffic Way WO-WAY, NOT DIVID //For Divide Bus or HazMat NO Vehicle License Plate Numbe AKH5426 Vehicle Identification 3FAHP0JAXAR33: Color BLK - BLACK Initial Contact Point | on W | Train/Bus # Recorded Direction Of Travel WESTBOUND ith | Total # Citar 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AU Make FORD Body Style | tions Issued CrashTire Mark action HAL FUNC TO | CTION | Total Tra 0 Speed L 35 | AUTOMO Operating A ailers imit Emergency NOT APP Traffic Cont NO Road Grade DOWNHIL Country of Is UNITED S' Model FUSION S | Total Haz 0 Total Lan 2 Motor Veh LICABLE rol Inopera | Mat Types es icle Use tive/Missing | |
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| U | nit Summary Init Status N TRANSIT //ehicle Type PASSENGER CAR Total Occs Insurance? //ES //MAILBOX Traffic Way INO-WAY, NOT DIVID //Burface Type BLACKTOP (BITUMING Truck Bus or HazMat NO Vehicle License Plate Numbe AKH5426 Vehicle Identification 3FAHP0JAXAR33; Color BLK - BLACK Initial Contact Point | on W ED DUS | Train/Bus # Recorded Direction Of Travel WESTBOUND ith | D CLASS Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AU Make FORD Body Style 4D - 4DR Vehicle Da | tions Issued CrashTire Mark Inction IROL ITOMOBIL | CTION | St WI Year 2010 | AUTOMO Operating A ailers imit Emergency NOT APP Traffic Cont NO Road Grade DOWNHIL Country of Is UNITED S Model FUSION S Bus Use | Total Haz 0 Total Lan 2 Motor Veh LICABLE rol Inopera | Mat Types es icle Use tive/Missing | |

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

| | | Towed Due To Damage | | Vehicle Removed By | | | | |
|------|------------|---|-------------------------|--|------------------|---------------|--|--|
| | | NOT TOWED | | OWNER | | | | |
| | | What Driver Was Doing | | Vehicle Factors | | | | |
| | | GOING STRAIGHT | | | | | | |
| | | Driver Prior Action Other | | NOT APPLICABLE | | | | |
| LIND | VEHICLE | Driver Actions FAILURE TO CONTROL | | | | | | |
| 6 | 10 | Owner Name GRACE ANSTETT (608) 477-8850 | | Owner Address 203 N MAPLE ST NORTH FREEDOI | M, WI 53951 , US | 3 | | |
| | | Sequence Of Events | | | | | | |
| | 01 | Event MAILBOX | | | | | | |
| | 02 | Event | | | | | | |
| | 03 | Event | | | | | | |
| | 04 | Event | | | | | | |
| | | Policy Holder | | | | | | |
| LNO | | Insurance Company | | Individual | | | | |
| 5 | | GEICO-ADVANTAGE-INS | URANCE-CO | GRACE ANSTETT | | | | |
| | ı | Individual | | | | | | |
| | | Driver | | Citations Issued | Sex | | | |
| | ļ | GRACE ANSTETT (608) 477-8850 | | 0 | FEMALE | | | |
| ⊨ | IDU/ | (, | | Date of Birth | Race WHITE | | | |
| LNO | INDIVIDUAL | Address 203 N MAPLE ST NORTH FREEDOM, WI 53 | 951 , US | Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES | | | | |
| | Sat | On Duty fety Equipment | r Crash | Safety Equipment | | | | |
| | Ou. | | I 0 . (D .); | SHOULDER & LAP | DEI T | | | |
| | | Row 01 - FRONT ROW | Seat Position 07 - LEFT | | | | | |
| | | Helmet Use | | Helmet Compliance | | | | |
| | | Eye Protection | | Tint Compliance | | | | |
| 7 | 001 | Injury So | everity PARENT INJURY | Airbag NON DEPLOYED | | | | |
| | | Ejected | Ejection Path | Trapped/Extricated | | | | |
| | | NOT EJECTED | NOT EJECTED/NOT APP | | | NOT TRAPPED | | |
| | | Medical Transport NOT TRANSPORTED | | EMS Agency Identifier | | EMS Run # | | |
| | | Hospital | | Date of Death | | Time of Death | | |
| | | Distracted By UNKNO | ed By Source | | | 1 | | |
| | | Distracted By Action | J1111 | | | | | |
| | | UNKNOWN | | | | | | |

Crash Date 06/16/2022

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | | Non Motor | Striking Unit # | Location | | | | |
|--------------|------------|------------------------------|-----------------------|-------------------|---|-------------------|----------------------|-------------------------------|
| | | Prior Action | | <u> </u> | | | | |
| TINO | INDIVIDUAL | Action | | | | | | |
| | | Action Other | | | | | | To/From School |
| | L | Drug & Alcoh | Suspected Alcohol U | se | Suspected Drug Use NO | | | |
| | | Alcohol Test Giver | | Alcohol Test Type | | | Alcohol Test Results | |
| | | Drug Test Given TEST NOT GIV | EN | Drug Test Type | | Drug Test Results | | |
| ۶ | 001 | Drug Type | | , | | | | |
| | | Individual Condition | | | | | | |
| | D | NOT OBSERVE | | | | | | |
| 01 | Indiv | | | | Address | 2040 | | |
| PROP OWNER 0 | (608 | THAN SUNDSMC 3) 963-7020 |) | | E9931 SHADY LANE F REEDSBURG, WI 539 | | | |
| | Fixe | d Objects St | ruck | | | | | |
| | 2 | | Struck Object MAILBOX | | | | | Damage Tag Number 0 |