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 10:35 AM Time Notified 10:41 AM		Agency Crash Number 22-07014 Date Arrived 07/20/2022 Total Units 02		Investigating Officer/Deputy DEPUTY T. SUTHERLAND				
ရ	Crash Date 07/20/2022					Time Arrived 11:09 AM				
61LUC884J6	Date Notified 07/20/2022					Total Injure			Total Killed 00	
ے ا	On Emergency Hi	t and Run	Lane Clos		₩ Work Zone	I	er or	Towed	Reporting Threshold	
0	Government Property Active School Zone				Bus Related	Tags				
	▼ Reportable	and I located							Secondary Crash	
	Description Diagram								_	
	Not To Scale	ST	H 23				Ph	otos By ditional Info		
	I, a sworn law enforceme	ent officer, agre	ee that I have n	ot adde	d any CJIS data in t	his report.				
	ON 07-20-22 UNIT 2 WAS SOUTHB SOUTHBOUND. UNIT 1 REAR-END	OUND STOPPING	IN TRAFFIC FOR	A FLAGM			IRECT	LY BEHIND	UNIT 2 ALSO	

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Crash Date 07/20/2022

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Location ——									
ON STH23 WB			La	atitude			Longitud	de	
0.55 MI S			4:	43.153874318 -90.059665629					
OF LEONE DR			X	Coordinate			Y Coord	inate	
IN THE TOWN OF SPRING IN SAUK COUNTY	G GREEN		2	251227.125 4782448					
IN SAUN COUNT			St	Structure Type					
			I .	O STRUC					
Crash Scene									
First Harmful Event			TFi	irst Harmful I	EventL	ocation			
MOTOR VEH IN TRANSP	ORT	0	N ROADW	ΙΑΥ					
Manner of Collision			Li	ight Conditio	n				
03 - FRONT TO REAR		AYLIGHT							
Road Surface Condition(s)	R	oadway Fac	tor(s)						
DRY				·	, ,				
Environment Factor(s)									
NONE			W	ORK ZON	E (CO	NSTRUCTIO	N/MAINT	ENANCE/UTILITY)	
Weather Condition(s)									
CLEAR									
Animal Type			I .	elation To T		•			
Crash Classification - Location				TRAFFICWAY - ON ROAD					
PUBLIC PROPERTY			I .	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION					
TribalLand			I .	Access Control Special Study NO CONTROL					
Within Interchange Area NO	Junction Location NON-JUNCTION		Intersection T	ection Type AN INTERSECTION					
Work Zone Crash Location ADVANCE WARNING ARI	EΔ		Work Zone Crash Type LANE CLOSURE						
Workers Present			ement Present						
YES		NO	NO						
Work Zone Speed Limit 55	Advisory/Reg	gulatory Speed L DRY							
Unit Summary =	1.2.5.2.11								
Unit Status		Vehicle Ope	erating As Clas	sification		UnitType			
IN TRANSIT		D CLASS	o.c.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			AUTOMOBILE			
Vehicle Type		·				Operating As Endorsements			
PASSENGER CAR									
Total Occs	Train/Bus#Recorded	Total#Citat	tions Issued	0 0	otal Trail	ers	Total Haz	Mat Types	
Insurance?	Direction Of Travel		CrashTire	T	oeed Lir	nit	Total Lan	<u> </u>	
YES	NORTHBOUND	FIG.	Mark	55			2		
Most Harmful Event: Collision		Special Fur				Emergency		icle Use	
MOTOR VEH IN TRANSP	ORT		IAL FUNCTION	אכ		NOT APPI			
Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control TRAFFIC CONTROL PERSON			Traffic Control Inoperative/Missing				
Surface Type	Road Curva	ature		Road Grade					
BLACKTOP (BITUMINOU	STRAIGH	T			LEVEL				
Truck Bus or HazMat		•							
Vehicle				ccccccccc					
License Plate Number		Plate Type	<u> </u>	St		Country of Is	suance		
AGZ4422		1	JTOMOBILE	w	l	UNITED ST	TATES		
Vehicle Identification Nu	 mber	Make		Ye	ar	Model			
5 2T1BURHE6EC1433		ТОУОТА		20	14	COROLLA			

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;		Color		Box	dy Style		Bus Use				
		WHI - WHITE			- 4DR						
					hicle Damage						
–	VEHICLE	12 - FRONT		'	more surrage			7 8 9 10 H			
UNIT	¥	Extent Of Damage		رړ ⊢	- FRONT			5 12			
⊃ ¦	Ū.	FUNCTIONAL DAMAGE		'-	()()()			5 4 3 2 1			
	>			CONTRACTOR OF STANDARD							
		Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR							
				_							
		What Driver Was Doing		Ve	hicle Factors						
		GOING STRAIGHT		l NC	T APPLICABLE						
		Driver Prior Action Other		"	TAR ECABLE						
		Driver Actions FAILURE TO CONTROL									
	Щ	PAREORE TO CONTROL									
UNIT	VEHIC										
5	T.										
	5										
		OwnerName			Owner Address	- 46					
9	10	CLIFTON L WRIGHT			1115 12TH STREET #5 BARABOO, WI 53913 , US						
0	_										
		Sequence Of Events		YSYYSYY							
	5	Event									
MOTOR VEH IN TRANSPORT											
	8	Event									
	0										
	63	Event									
	9										
	8	Event									
	0										
 -		Policy Holder									
INN		Insurance Company		Individual							
⊃ ¦		PROGRESSIVE-UNIVERS	AL-INSURANCE-COMP	CLIFTON WRIGHT							
		ndividual									
		Driver		**********	Citations Issued	TSex					
		CARL V WILLIAMS				MALE					
	₹	(608) 477-9905			1 MALE Date of Birth Race						
⊨	DUA				2410 07 211117	BLACK/AFRICAN AMERICAN					
N N	5	Address			Driver I icense Number						
-	NON	1113 12TH STREET #7									
	É	BARABOO, WI 53913 , US			STATE: WISCONSIN COUNTRY: UNITED STATES						
		On Duty	Crash	Safety Equipment							
	Sai	ety Equipment									
		Row	Seat Position	۱,	SHOULDER & LAP I	BELT					
		01 - FRONT ROW	07 - LEFT								
		HelmetUse		 	Helmet Compliance						
		- Howner and			·						
		Eye Protection		+	Tint Compliance						
-	Injury Severity			Airbag							
9	8	injury no apf	ARENT INJURY		NON DEPLOYED						
		Ejected	Ejection Path				Trapped/Extricated				
		NOT EJECTED	NOT EJECTED/NOT AP	PLIC	CABLE		NOT TRAPPED				
		Medical Transport		f	EMS Agency Identifier		EMS Run#				
		NOT TRANSPORTED									

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		Hospital				Date of Death	ı		Time of Dea	th			
		Distracted By	Distracte OTHER	d By Source DISTRAC	TION (ANIMAL	MAL, FOOD, GROOMING)							
		Distracted By Action OTHER ACTION (LOOKING AWAY FROM TASK ETC)											
		Non Motorist	Striking U	lnit#	Location								
		Prior Action											
		Action											
_	JAL												
LIND	INDIVIDUAL												
	2												
		A 6 00									T		
		Action Other									To/From School		
	I	Drug & Alcohol NO			Jse Jse	Suspected Dr NO	rug Use						
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Typ	е			Alcohol Test Results					
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Type Drug Test R		rug Test Results						
7	99	Drug Type											
Individual Condition													
APPEARED NORMAL													
	,	Violations	· · · · -	- La	*****	·uvuvuvuvuvuv			***********		KASEKERISEKERISEKERISEKERISEKERISEKERISEKERISEKERISEKERISEKERISEKERISEKERISEKERISEKERISEKERISEKERISEKERISEKERI		
	5	UTC Number BD759560	Issue To	? Sta 346	tute Number 3.57(2)	Description FAILURE TO	O KEEP VE	HICLE UNDER	CONTROL	-			
		t Summary Status			T.	/ehicle Operating	a A a Classifie	ation	11-47				
		FRANSIT			CLASS	auori	UnitType AUTOMOBILE						
05	Vehicle Type (SPORT) UTILITY VEHICLE							Operating As Endorsements					
	Tota 1	Total Occs Train/Bus#Recorded			Total#Citations Issued 0		Total Traile	ers	Total HazN	1at Types			
_	Insu YES	rance?	I .	ction Of Tr	1 :	Pre CrashTire Sp		Speed Lim	it	Total Lane	5		
LNO	Mos	Most Harmful Event: Collision With				Mark 55 Special Function NO SPECIAL FUNCTION			Emergency Motor Vehicle Use NOT APPLICABLE				
	MOTOR VEH IN TRANSPORT Traffic Way					Traffic Control			Traffic Control Inoperative/Missing				
		,				TRAFFIC CONTROL PERSON Road Curvature			NO Road Grade				
		ACKTOP (BITUMING	OUS)			STRAIGHT			LEVEL				
	NO	A DOS OFFICIAL											
	1	Vehicle	r			Plate Type		St	Country of le	suance			
License Plate Number APA5483						AUT - AUTOM	IOBILE		Country of Issuance UNITED STATES				

6TL0C884J6

22-07014

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8		Vehicle Identification Number		Ma		Year	Model				
•		JTJGARDZ9L5001144					NX				
		Color RED - RED		- 1	dy Style		Bus Use				
	ш	Initial Contact Point		4D - 4DR Vehicle Damage							
lΕ	ᡖ	06 - REAR						7 8 9 10 11			
	VEHICLE	Extent Of Damage		— 06	- REAR			6 12			
-	3	MINOR DAMAGE						5 4 8 2 1			
		Towed Due To Damage NOT TOWED		- 1	hicle Removed By						
		What Driver Was Doing		OPERATOR Vehicle Factors							
		SLOW/STOPPING		1	version addition						
		Driver Prior Action Other		NOT APPLICABLE							
	ш	Driver Actions NO CONTRIBUTING ACTION									
l⊨	VEHICLE										
	Ī										
	3										
		O			L O						
 		OwnerName ROBERT FRANCIS MCKINLEY			Owner Address 6050 GOLF COURSE RD						
8	2	(608) 553-4188			SPRING GREEN, WI 53588 , US						
		Sequence Of Events									
	5	Event MOTOR VEH IN TRANSPORT									
	~	Event									
	8										
	Event										
		Event									
	3										
<u> </u>		Policy Holder									
		Insurance Company			Individual ROBERT MCKINLEY						
-		AMERICAN-FAMILY-INS-CO			RUBERT MURINLET						
		ndividual Driver									
		ROBERT FRANCIS MCK	NLEY		Citations Issued Sex 0 MALE						
	3	(608) 553-4188		1		Race					
LIND	NDIVIDUA				WHITE						
5	á	Address 6050 GOLF COURSE RD		1	Driver License Number						
	Z	SPRING GREEN, WI 5358	8 , US	[3	STATE: WISCONSIN COUNTRY: UNITED STATES						
	C-1	On Duty Crash			Safety Equipment						
	Vai	ety Equipment		Щ,	SHOULDER & LAP BELT						
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	`	SHOULDER & LAP BE	,					
		HelmetUse			Helmet Compliance						
		Eye Protection		-	Fint Compliance						
2	Δ	Injury S	everity		Airbag						
02	200		PARENT INJURY		NON DEPLOYED						
		Ejected	Ejection Path		AB: 5		Trapped/Extricated				
I		NOT EJECTED	NOT EJECTED/NOT A	4246	ADLE		NOT TRAPPED				

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	Medical Transport		EMS Agency Identifier		EMS Run#					
	NOT TRANSPORTED									
	Hospital		Date of Death		Time of Death					
	Lushia		Date of Death		rime or Death					
	Distracted	By Source								
	Distracted By NOT APPLICABLE (NOT DISTRACTED)									
	Distracted By Action									
	NOT DISTRACTED									
		5 m 1 m								
	Non Motorist Striking Ur	nit# Location								
	MON MONONS									
	Prior Action	•								
	Action									
	Action									
=										
_ 2										
5 9										
UNIT										
	Action Other					To/From School				
	1 Sycanosta	d Alexandiia	I Currented Dave Hea							
	Drug & Alcohol NO	d Alcohol Use	Suspected Drug Use							
	Drug & Alcohol No		NO							
	Alcohol Test Given	Alcohol Test Type)		Alcohol Test Results					
	TEST NOT GIVEN									
	Drug Test Given	Drug Test Type		Dww.Tast.Daswits						
	TEST NOT GIVEN	Didg restrype		Drug Test Results						
02 002	Drug Type									
0 2										
	Individual Condition									
	APPEARED NORMAL									
20300011111330	188									