6TL0CX0Q9T 22-07617

WISCONSIN MOTOR VEHICLE CRASH REPORT

	Document Number Override	Primary Crash	Document #	Agency 22-07	Crash Number 6 17	Investigating DEPUTY I.	Officer/Deputy HANSON	1	
6TL0CX0Q9T	Crash Date 08/04/2022	Crash Time 10:58 AM Time Notified 11:00 AM		Date Arrived 08/04/2022 Total Units 01		Time Arrived			
	Date Notified					11:05 AM Total Injured Total Killed		ed	
2 X	08/04/2022					00	00		
00	On Emergency	and Run	Lane Clos	-	Work Zone		or Towed	owed Reporting Threshold	
611	Government Property		chool Zone	School NO	Bus Related	Tags			
	✓ Reportable	Crash Type DT4000 (STA	NDARD CRASH	I)		Amende	ed	Secondary Crash	
	Description								
	mail	l box 			R	▶	Photos By HANSON Additional Info PHOTOS	ormation	
				1 1					
					h 136				
	✓ I, a sworn law enforceme	nt officer, agr	ee that I have n	ot addeo	l any CJIS data in th	is report.			
	UNIT 1 WAS EAST ON STH 136. UN								
	THE REAR OF HIS CAR SLID OUT	STRINING A MAIL	DUA. UNIT I THE	IN PULLEL	INTO A DRIVEWAY OF	г этн тзо. MAILB(DA OWNER AD	VISED. 9109	

22-07617

6

UNIT

5

UNIT

WISCONSIN MOTOR VEHICLE CRASH REPORT

1	ation —								(000) 330-4093	
	ation									
-	LINN ST/ STH136 EB				Latitude	2000		Longi		
	STH33 EB				43.47606206				8262117	
	HE TOWN OF BARAB			X Coordinate			-	ordinate		
IN S	AUK COUNTY				274947.			4817	444.5	
					Structure	Туре				
Cra	sh Scene									
-	Harmful Event				Firet Harn	ul Event l	ocation			
	LBOX			First Harmful Event Location SHOULDER RIGHT						
	ner of Collision			Light Condition						
		HICLE IN TRANSPORT			DAYLIGHT					
-	d Surface Condition(s)				Roadway Factor(s)					
DR					Roadway	1 40101(3)				
Envi	ronment Factor(s)				_					
NO					NONE					
Wea	ther Condition(s)				-					
CLE	AR									
Anin	nal Type			Relation To Trafficway						
Crac	h Classification - Location			TRAFFICWAY - ON ROAD						
_	BLIC PROPERTY			Crash Classification - Jurisdictio NO SPECIAL JURISDICTIC						
_	al Land				Access Co				Special Study	
THD				NO CONTR			1 3			
	in Interchange Area	Junction Location		Intersection Type NOT AN INTERSECTION						
NO		NON-JUNCTION		NOT AN	INTERSE	CTION				
	t Summary		Vehicle On	orating As C			Linit Tune			
	RANSIT			Vehicle Operating As Classification D CLASS			Unit Type AUTOMOBILE			
	cle Type		D CLASS	DCLASS			Operating As Endorsements			
	SENGER CAR						Operating P		sements	
Tota	l Occs	Train/Bus # Recorded	Total # Cita	tions Issued	d Total Trail		ilers Total HazMat Types		azMat Types	
1			0	0			0			
Insu	rance?	Direction Of Travel	Pre	Pre CrashTire			mit Total Lanes		anes	
YES	5	EASTBOUND		Mark				2		
	t Harmful Event: Collision V	Vith		Special Function			Emergency	_		
	LBOX			NO SPECIAL FUNCTION			NOT APP	pontrol Inoperative/Missing		
	ic Way			Traffic Control				to moperative/wissing		
	D-WAY, NOT DIVIDED			NO CONTROL			NO Road Grade			
		2)		Road Curvature CURVE LEFT			LEVEL			
	CKTOP (BITUMINOUS k Bus or HazMat	>)	CORVEL							
NO	K Bus of Haziviat									
	Vehicle									
ABS3309 Vehicle Identification Number				Plate Type		St		Country of Issuance		
				AUT - AUTOMOBILE		WI	UNITED STATES Model			
			Make TOYOTA	TOYOTA		Year 2009	COROLLA/S/			
	Color		Body Style Bus Use							
	GLD - GOLD		4D - 4DR							
щ	Initial Contact Point			Vehicle Damage					7 8 9 10 11	
Initial Contact Point 04 - RIGHT SIDE REAR Extent Of Damage MINOR DAMAGE				04 - RIGHT SIDE REAR, 05 - RIGHT REAR CORNER,						
				06 - REAR				,	5 4 3 2 1	
>	MINON DAMAGE									

6TL0CX0Q9T

22-07617

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Towed Due To Damage		Veh	icle Removed By				
		NOT TOWED		ow	/NER				
		What Driver Was Doing			Vehicle Factors				
		NEGOTIATING CURVE Driver Prior Action Other							
				NO	T APPLICABLE				
		Driver Actions							
	щ	FAILURE TO CONTROL							
Ę	<u></u>								
UNIT	VEHICLE								
	3								
		Owner Name JOSHUA FEINE			Owner Address 32720 LOST HOLL				
0	6	(608) 434-2016			CAZENOVIA, WI 53				
0	U	()			,,	,			
		Sequence Of Events							
	01	Event MAILBOX							
	N	Event							
	02								
	03	Event							
		Event							
	04								
⊢	I	Policy Holder							
UNIT		Insurance Company			Individual				
ر		STATE-FARM-GENERAL-INS-CO			JOSHUA FEINE				
	I	Individual							
		Driver ISAIAH FEINE (608) 434-2016			Citations Issued Sex				
	_				0 MALE				
	NDIVIDUAL				Date of Birth Race				
UNIT	Ę	Address			Priver License Number				
Б	ā	E13131 NEUMAN RD							
	Z	BARABOO, WI 53913, US		STATE: WISCONSIN COUNTRY: UNITED STATES					
		On Duty C	rash	s	afety Equipment				
	Sat	afety Equipment							
		Row	Seat Position	SHOULDER & LAP BELT					
		01 - FRONT ROW	07 - LEFT						
		Helmet Use	et Use		Helmet Compliance				
		Eye Protection			Tint Compliance				
2	001	Injury Seve Injury NO APPA	-	Airbag NON DEPLOYED					
	0			N					
			Ejection Path				Trapped/Extricated NOT TRAPPED		
		NOT EJECTED NOT EJECTED/NOT AP Medical Transport			EMS Agency Identifier		EMS Run #		
					and Agency reentinel				
		Hospital		D	Date of Death		Time of Death		
		Distracted By NOT APP	By Source PLICABLE (NOT DISTRA	ACT	ED)				
		Distracted By Action							
		NOT DISTRACTED							

6TL0CX0Q9T 22-07617

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Non Motor	Striking Unit #	Location							
		Prior Action									
		Action									
	AL										
UNIT	DQ										
5	INDIVIDUAL										
	Z										
		Action Other						To/From School			
		Action Other						10/From School			
	1	Drug & Alcol			Suspected Drug Use						
		Alcohol Test Give		Alcohol Test Type	3	Alcohol Test Results					
		Drug Test Given TEST NOT GIV	EN	Drug Test Type		Drug Test Results	5				
2	001	Drug Type				-					
		Individual Condition									
		APPEARED NO	DRMAL								
·	Property Owner										
0	Organization/Company SMITH WELL DRILLING				Address E10704B STH 136						
PROP OWNER	(608	3) 356-3372			BARABOO, WI 53913	, US					
	Fixe	ed Objects S									
	01	Striking Unit 01	Struck Object MAILBOX				Structure Number	Damage Tag Number			