WISCONSIN MOTOR VEHICLE CRASH REPORT

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

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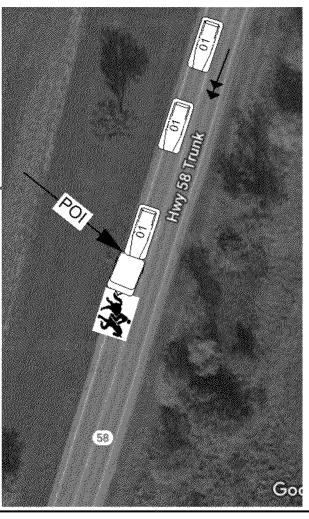
	Document Number Override	Primary Crash	Primary Crash Document# Crash Time 07:30 PM Time Notified 07:31 PM t and Run		Crash Number 341	Investigating Officer/Deputy DEPUTY G. AKERS Time Arrived 07:42 PM			
⋛	Crash Date 08/30/2022				rrived 2022				
GS	Date Notified 08/30/2022				nits	Total Injured 01	1 1		
000	On Emergency	Hit and Run			☐ Work Zone			Reporting Threshold	
6TL	Government Property	Active So	Active School Zone		Bus Related	Tags			
_	▼ Reportable	Crash Type DT4000 (STA	NDARD CRASH	RASH)Amended			Secondary Crash		

Description

Diagram



V1 traveling south on HWY 58 when it struck the horse & buggy in the rear. D1 cited for inattentive driving, no insurance, and driving while revoked.



Reconstruction By

Photos By **GA/JG**

Additional Information **PHOTOS**

Crash Date 08/30/2022

Crash Time 07:30 PM

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

V1 WAS TRAVELING SOUTH ON HWY 58 JUST NORTH OF RABUCK RD, WHEN IT STRUCK A THE REAR OF HORSE AND BUGGY. D1 WAS CITED FOR INATTENTIVE DRIVING, NO INSURANCE, AND DRIVING WHILE REVOKED. PASSENGERS OF THE BUGGY ONLY HAD MINOR INJURIES AND NOT TRANSPORTED.

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Crash Date 08/30/2022

Crash Time 07:30 PM

L	ocation ====									
_	ON STH58 SB					Latitude			Longitud	de
	429 FT N	43.555093037 -90.135851541								
1 '	OF RABUCK LN		X Coordin	X Coordinate Y Coordinate						
	N THE TOWN OF LA VALL	E				246708.265625 4827238.5				
1	N SAUK COUNTY					Structure 7	Type			
						NO STR				
С	rash Scene									
F	First Harmful Event					FirstHarm	fulEventLo	ocation		
1	MOTOR VEH IN TRANSPO	RT				ON ROA	DWAY			
٨	Manner of Collision					Light Cond	dition			
(03 - FRONT TO REAR					DUSK				
F	Road Surface Condition(s)					Roadway	Factor(s)			
E	DRY									
E	Environment Factor(s)					†				
١	NONE					NONE				
V	Weather Condition(s)					1				
(CLEAR									
7	Animal Type					Relation T	o Trafficwa	/		
					TRAFFICWAY - ON ROAD					
1	Crash Classification - Location PUBLIC PROPERTY		Intersectio			Crash Classification - Jurisdiction NO SPECIAL JURISDICTION Access Control NO CONTROL Special Study				
ī	Tribal Land									
_	ACH Salara and an and American	Junction Location								
	Within Interchange Area NO				NINTERSECTION					
1	Closure Type			Reasons for Closure						
ш	LANE CLOSURE		Date Scene Clear							
1	Date Initial Lane/Rd Closed 08/30/2022	Time Initial Lane/Rd Closed 07:42 PM				EMENI				
1	Date All Lanes Open	Time All Lanes Open				red		ne Scene Cleared		
Ш	08/30/2022	09:04 PM		08/30	0/2022		09	:04 AM		
	Init Summary		I.V1-	-1-0-		1:CC		Lecon		
	Jnit Status		- 1		erating As C	lassification		Unit Type AUTOMOBILE		
	N TRANSIT		טט	D CLASS						
l	Vehicle Type PASSENGER VAN							Operating A	s <u>E</u> ndorsei	ments
1	Fotal Occs	Train/Bus#Recorded	Tota	Total#Citations Issued Total			Total Trail	ilers Total HazMat Types		MatTypes
l	1		3			0			0	
ŀ	nsurance?	Direction Of Travel		Pre	CrashTire	,	Speed Lin	nit	TotalLan	es
1	NO	SOUTHBOUND	~		Mark		55		2	
	Most Harmful Event: Collision W OTHER NON-MOTORIST	ith		cial Fur SPEC	nction IAL FUNC	TION		Emergency NOT APPL		
ᆫ	Fraffic Way		Traf	fic Con	trol			Traffic Control Inoperative/Missing		
7	TWO-WAY, NOT DIVIDED			CONT	ROL			NO Road Grade		
S	Surface Type	·			ature					
BLACKTOP (BITUMINOUS)				RAIGH	T			LEVEL		
	Truck Bus or HazMat									
ſ	NO .									
	Vehicle									
	License Plate Number			te Type		.,	St	Country of Iss		
	SU1251				SHT TRUC	'n	WI	UNITED ST	AIES	
	Vehicle Identification Num 1D4HN11H18B186200		Mai				Year	Model	54	
	Ď │1D4HN11H18B186200		DO	DGE			2008	GRAND CA	KA	

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22-08641

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Crash Date 08/30/2022

		Color WHI - WHITE		Body Style VN - VAN	Bus Use							
	ij	Initial Contact Point		Vehicle Damage			7 8 9 10 11					
UNIT	VEHICLE	12 - FRONT Extent Of Damage		01 - RIGHT FRONT	CORNER, 12 - FR	ONT	6 12					
_ ا	ME	MINOR DAMAGE			,		5 4 3 2 3					
		Towed Due To Damage TOWED BUT NOT DUE T	O DISABLING DAMAG	Vehicle Removed By SHIELDS TOWING								
		What Driver Was Doing		Vehicle Factors								
		GOING STRAIGHT Driver Prior Action Other		NOT APPLICABLE								
		Dividufina										
	Щ	Driver Actions OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER										
UNIT	VEHICLE											
n	VE											
		Owner Name		Owner Address								
_	0.1	DEREK ANTHONY LONG (608) 495-9722		301 3RD ST	2044 110							
9	0	(000) 493-9122		LA VALLE, WI 53941 , US								
		Sequence Of Events										
	02	Event										
	03	Event										
	94	Event										
		Driver		Citations Issued	Sex							
	7	DEREK ANTHONY LONG		3	MALE	MALE Race						
⊨	8			Date of Birth Race WHITE								
UNI	NDIVIDUAL	Address 301 3RD ST		Driver License Numb	er							
	Z	LA VALLE, WI 53941 , US	3	STATE: WISCONSIN COUNTRY: UNITED STATES								
		On Duty	· Crash	Safety Equipment								
	Sat	ety Equipment										
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LA	PBELT							
		HelmetUse		Helmet Compliance								
		Eye Protection		Tint Compliance								
01	8	Injury S Injury NO AP	everity PARENT INJURY	Airbag NON DEPLOYED								
		Ejected	Ejection Path	MON DE LOTED		Trapped/Extricated						
		NOT EJECTED Medical Transport	NOT EJECTED/NOT AP	PLICABLE EMS Agency identific	<u> </u>	NOT TRAPPED EMS Run#						
		NOT TRANSPORTED		geney identific		Time storem						
		Hospital		Date of Death		Time of Death						

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Crash Date 08/30/2022

		Distracted By Source Distracted By VEHICLE-INTEGRATED DEVICE										
		Distracted By Action OTHER ACTION (I	LOOKING	AWAY F	ROM TASK ET	C)						
		Non Motorist	Striking U	nit#	Location							
		Prior Action										
		Action										
	JAL											
UNIT	NDIVIDUAL											
	ON											
		Action Other								To/From School		
	ı	Drug & Alcohol	Suspecte NO	d Alcohol U	jse	Suspected Drug Use NO				'		
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Typ	e			AlcoholTes	t Results		
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Di		Test Results					
01	100	Drug Type				I						
		Individual Condition APPEARED NORMAL										
		 Violations										
		UTC Number	Issue To?	- Ts+a	tute Number	Description		erecentrices.				
	9	BG023938	001	343	3.44(1)(b)	OPERATING WHIL		KED (FOR	FEITURE)			
	02	UTC Number BG023939	Issue To?		tute Number 5.89(1)	Description INATTENTIVE DRIV	VING					
	03	UTC Number BG023940	Issue To? 001	Sta 344	tute Number 4.62(1)	Description OPERATE MOTOR	VEHIC	LE W/O IN	SURANCE			
	Uni	t Summary •										
		Status RANSIT			I .				UnitType EQUIPMENT			
02	Vehi	icle Type RSE AND BUGGY				O GEAGG			Operating As Endorsements			
	Tota	IOccs	Trair	n/Bus#Re	1	Fotal # Citations Issued		Total Traile	rs	Total HazMat Types		
		rance?		ction Of Tr	avel	Pre CrashTire		0 Speed Lim	it	0 TotalLanes		
LINO	NO	M16-15		JTHBOU	1.1	Mark Special Function		55		2 Motor Vehicle Use		
ā	MO.	tHarmfulEvent: Collision TOR VEH IN TRANS			1	NO SPECIAL FUNCTION	ON		NOT APP	ICABLE		
		fic Way O-WAY, NOT DIVID I	ED			Fraffic Control NO CONTROL			Traffic Control Inoperative/Missing NO			
		ace Type ACKTOP (BITUMING	DUS)			Road Curvature STRAIGHT			Road Grade LEVEL			
		k Bus or HazMat	<u> </u>		I				l			
		Vehicle										

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22-08641

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Crash Date 08/30/2022

		License Plate Number		Plate Type	St	Country of Issuance					
03	8	Vehicle Identification Number		Make	Year	Model					
		Color BLK - BLACK		Body Style HE - HORSE-BUGGY	·	Bus Use					
⊨	OIE	Initial Contact Point 06 - REAR		Vehicle Damage		•	7 8 9 10 11				
TIND	VEHICLE	Extent Of Damage DISABLING DAMAGE		15 - ALL AREAS			5 4 3 2 1				
		Towed Due To Damage NOT TOWED									
		What Driver Was Doing GOING STRAIGHT		Vehicle Factors							
		Driver Prior Action Other		NOT APPLICABLE							
_	4	Driver Actions NO CONTRIBUTING ACTION									
EN C	VEHICLE										
	7	Owner Name		Oursey Orlehoos							
07	8	ELI R BORNTRAGER (608) 985-7441		Owner Address S2394 HWY 58 LAVALLE, WI 53941 , US							
		Sozuoneo Offivante									
	8	Sequence Of Events Event MOTOR VEH IN TRANSPO									
	8	Event									
	8	Event									
	2	Event									
		Individual									
		Driver FRIEDA BORNTRAGER		Citations issued 0	Sex FEMALE						
_	DUA	(608) 985-7441		Date of Birth	Race WHITE						
5		Address S2394 HWY 58		Driver License Number							
	=	LAVALLE, WI 53941 , US									
	Sa	On Duty (Safety Equipment					
		Row Seat Position 98 - NOT APPLICABLE		NOT APPLICABLE							
		HelmetUse		Helmet Compliance							
		Eye Protection		Tint Compliance							
05	8		CTED MINOR INJURY	Airbag NOT APPLICABLE							
		·	Ejection Path OTHER PATH (E.G., BAC	CK OF PICKUP TRUCK	, TRAILER)	Trapped/Extricated NOT TRAPPED					

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		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run#	#S Run#				
		Hospital			Date of Death Time of Death						
		Distracted By	By Source	+							
		Distracted By Action									
		Non Motorist	it#	Location							
		Prior Action									
		Action									
	INDIVIDUAL										
ENS.											
_	QN										
		Action Other						To/From School			
		Drug & Alcohol NO			Suspected Drug Use NO						
		TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results				
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results					
07	002	Drug Type									
		Individual Condition									
		APPEARED NORMAL									
		Individual Occupant Of Non-Motor Vehicle Transportation Device KATIE ANN BORNTRAGER (608) 985-7441									
					Citations issued 0	Sex FEMALE	IALE				
—	DUA				Date of Birth	Race WHITE					
N		Address \$2394 HWY 58			Driver License Number	'					
		LAVALLE, WI 53941 , US									
	Sai	On Duty Crash [ety Equipment]			Safety Equipment						
		Row 98 - NOT APPLICABLE	SeatPo	sition	NOT APPLICABLE						
		Helmet Use		Helmet Compliance							
		Eye Protection			Tint Compliance						
05	600	Injury Severity Injury NO APPARENT INJURY			Airbag						
-	7	Ejected Ej	ection Pa	th	NOT APPLICABLE	TDAY ==:	Trapped/Extricated				
		Medical Transport	THER P	ATH (E.G., BACK	COF PICKUP TRUCK EMS Agency Identifier	, TRAILER)	NOT TRAPPED EMS Run#				
		NOT TRANSPORTED									

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	Hospital		Date of Death		Time of Death	
	110spies		Date of Death		Tanie Or Deads	
	Distracted By So	ource				
	Distracted By Action					
	Non Motorist Striking Unit#	Location				
	Prior Action	-				
	Action					
¥						
UNIT						
_ {						
	Action Other					To/From School
1	Drug & Alcohol NO	Suspected Drug Use				
	Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type			Alcohol Test Results	
	Drug Test Given Drug Test Type TEST NOT GIVEN		Drug Test Result		s	
02 003	Drug Type	'		•		
	Individual Condition					
	APPEARED NORMAL					