WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Over	ide Primary Crash	Primary Crash Document# Agency Crash Number 22-09092				Investigating Officer/Deputy SERGEANT T. CLAUER			
Crash Date 09/10/2022	Crash Time 04:05 PM		Date Ar 09/10/		Time Arrived	Time Arrived 04:07 PM			
Crash Date 09/10/2022 Date Notified 09/10/2022 On Emergency Government Property	Time Notified 04:07 PM		Total U	nits	Total Injured	Total Kille	ed		
On Emergency	Hit and Run	Lane Closu	ıre	Work Zone	Trailer	or Towed	Reporting Threshold		
Government Property	Active So	chool Zone	School NO	Bus Related	Tags				
Reportable	Crash Type DT4000 (STA	ANDARD CRASH)		ed	Secondary Crash			
Description =									
Not to Scale		STH 154		Parked m	otor vehicles	Photos By SGT CLAUE Additional Info PHOTOS, O	ormation THER DOCUMENTS		
UNIT ONE WAS ATTEMPT STH 154. UNIT ONE DIDN'	forcement officer, agr TING TO BACK SOUTH ACI T SEE UNIT TWO UNTIL L OF THE ROADWAY ON S	ROSS STH 154 OUT INIT TWO STRUCK I	OF A PA	RKING SPOT TO TRAVI OULD BE NOTED THERI	EL EAST ON STH	ON BOTH SIDE			

SWERVE TO AVOID A COLLISION. UNIT ONE OPERATOR CITED FOR FAILURE TO YIELD RIGHT AWAY. CRAIGS TOWING REMOVED UNIT TWO. ONE WITNESS VIEWED THE CRASH AND CONFIRMED THE ABOVE.

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Crash Date 09/10/2022

	Location ——									
ſ	INTERSECTION ON W BROADWAY/ STH1	54 EB			Latitude 43.47789	94452		Longitus -89.917	de 7930186	
- 1	AT 1ST ST IN THE TOWN OF EXCEL IN SAUK COUNTY	SIOR			X Coordinate Y Coordinate 4818023					
					Structure Type NO STRUCTURE					
(Crash Scene				•					
_ `	First Harmful Event				FirstHarm	ful Event L	ocation			
	MOTOR VEH IN TRANSP	ORT			ON ROA	DWAY				
- 1	Manner of Collision				Light Cond					
L	05 - REAR TO SIDE				DAYLIGI					
	Road Surface Condition(s)	Roadway	Factor(s)							
	WET									
ſ	Environment Factor(s)]					
	NONE				NONE					
ŀ	Weather Condition(s)				1					
	RAIN									
ŀ	Animal Type				Relation T	o Trafficwa	BV			
					TRAFFIC	WAY - C	N ROAD			
Ī	Crash Classification - Location				Crash Classification - Jurisdiction					
Ļ	PUBLIC PROPERTY Tribal Land				NO SPECIAL JURISDICTION Access Control Special Study					
					NO CON				Special Study	
	Within Interchange Area NO	Junction Location NON-JUNCTION		Intersection	n Type INTERSE	CTION				
L		NON-SONCTION		NOT AN	MIEKSE	CHON				
ļ	Unit Summary Unit Status		LV-bi-l- 0-		1		1			
	IN TRANSIT		D CLASS	erating As C	Classification UnitType TRUCK					
	Vehicle Type				Operating As Endorsements					
	(SPORT) UTILITY VEHICI	LE								
	Total Occs	Train/Bus#Recorded	Total#Citat	tions Issued	ued Total Trail				łazMatTypes	
		l l			0		1 ^			
L	04	Direction Of Travel	01				4	0		
ŀ	Insurance?	Direction Of Travel	Pre	CrashTire Mark	1	Speed Li	mit	TotalLan	es	
		SOUTHBOUND	Pre	Mark			mit Emergency	TotalLan		
	Insurance? YES	SOUTHBOUND With	Pre	Mark		Speed Li		TotalLan 02 MotorVeh	nicle Use	
	Insurance? YES Most Harmful Event: Collision MOTOR VEH IN TRANSP Traffic Way	SOUTHBOUND With ORT	Pre Special Fur NO SPEC Traffic Conf	Mark notion IAL FUNC		Speed Li	Emergency NOT APP	Total Lan 02 Motor Veh LICABLE	nicle Use	
	Insurance? YES MostHarmful Event: Collision MOTOR VEH IN TRANSP: Traffic Way TWO-WAY, NOT DIVIDED	SOUTHBOUND With ORT	Pre Special Fur NO SPEC Traffic Cont	Mark nction IAL FUNC trol		Speed Li	Emergency NOT APP Traffic Con	Total Lan 02 Motor Veh LICABLE	nicle Use	
	Insurance? YES Most Harmful Event: Collision MOTOR VEH IN TRANSP. Traffic Way TWO-WAY, NOT DIVIDED Surface Type	SOUTHBOUND With ORT	Special Fur NO SPEC Traffic Cont NO CONT Road Curva	Mark nction IAL FUNC trol ROL ature		Speed Li	Emergency NOT APP Traffic Con NO Road Grade	Total Lan 02 Motor Veh LICABLE	nicle Use	
	Insurance? YES Most Harmful Event: Collision MOTOR VEH IN TRANSP Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOU Truck Bus or HazMat	SOUTHBOUND With ORT	Pre Special Fur NO SPEC Traffic Cont	Mark nction IAL FUNC trol ROL ature		Speed Li	Emergency NOT APP Traffic Con	Total Lan 02 Motor Veh LICABLE	nicle Use	
-	Insurance? YES Most Harmful Event: Collision MOTOR VEH IN TRANSP Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOU Truck Bus or HazMat NO	SOUTHBOUND With ORT	Special Fur NO SPEC Traffic Cont NO CONT Road Curva	Mark nction IAL FUNC trol ROL ature		Speed Li	Emergency NOT APP Traffic Con NO Road Grade	Total Lan 02 Motor Veh LICABLE	nicle Use	
-	Insurance? YES Most Harmful Event: Collision MOTOR VEH IN TRANSP: Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOU Truck Bus or HazMat NO Vehicle	SOUTHBOUND With ORT	Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curve STRAIGH	Mark nction IAL FUNC trol ROL ature T		Speed Li 25	Emergency NOT APP Traffic Con NO Road Grade LEVEL	Total Lan 02 Motor Veh LICABLE crol Inopera	nicle Use	
-	Insurance? YES Most Harmful Event: Collision MOTOR VEH IN TRANSP Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOU Truck Bus or HazMat NO	SOUTHBOUND With ORT	Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH	Mark nction IAL FUNC trol ROL ature T	TION	Speed Li	Emergency NOT APP Traffic Con NO Road Grade	Total Lan 02 Motor Veh LICABLE crol Inopera	nicle Use	
	Insurance? YES Most Harmful Event: Collision MOTOR VEH IN TRANSP: Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOU Truck Bus or HazMat NO Vehicle License Plate Number AQU1LA Vehicle Identification Nu	SOUTHBOUND With ORT S)	Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH	Mark nction IAL FUNC trol ROL ature T	TION	Speed Li 25	Emergency NOT APP Traffic Con: NO Road Grade LEVEL	Total Lan 02 Motor Veh LICABLE crol Inopera	nicle Use	
	Insurance? YES Most Harmful Event: Collision MOTOR VEH IN TRANSP Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOU Truck Bus or HazMat NO Vehicle License Plate Number AQU1LA Vehicle Identification Nu 1C4BJWDG4EL2307	SOUTHBOUND With ORT S)	Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curve STRAIGH Plate Type AUT - AU Make JEEP	Mark nction IAL FUNC trol ROL ature T	TION	Speed Li 25	Emergency NOT APP Traffic Con- NO Road Grade LEVEL Country of is UNITED ST Model WRANGLE	Total Lan 02 Motor Veh ICABLE rol Inopera	nicle Use	
	Insurance? YES Most Harmful Event: Collision MOTOR VEH IN TRANSP. Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOU Truck Bus or HazMat NO Vehicle License Plate Number AQU1LA Vehicle Identification Nu	SOUTHBOUND With ORT S)	Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AU Make	Mark nction IAL FUNC trol ROL ature T	TION	Speed Li 25 St WI Year	Emergency NOT APP Traffic Con NO Road Grade LEVEL Country of is UNITED S	Total Lan 02 Motor Veh ICABLE rol Inopera	nicle Use	
	Insurance? YES Most Harmful Event: Collision MOTOR VEH IN TRANSP: Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOU Truck Bus or HazMat NO Vehicle License Plate Number AQU1LA Vehicle Identification Nu 1C4BJWDG4EL2307 Color BLU - BLUE	SOUTHBOUND With ORT S)	Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AU Make JEEP Body Style	Mark nction IAL FUNC trol ROL ature T	TION	Speed Li 25 St WI Year	Emergency NOT APP Traffic Con- NO Road Grade LEVEL Country of is UNITED ST Model WRANGLE	Total Lan 02 Motor Veh ICABLE rol Inopera	tive/Missing	
	Insurance? YES Most Harmful Event: Collision MOTOR VEH IN TRANSP: Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOU Truck Bus or HazMat NO Vehicle License Plate Number AQU1LA Vehicle Identification Nu 1C4BJWDG4EL2307 Color BLU - BLUE	SOUTHBOUND With ORT S)	Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curve STRAIGH Plate Type AUT - AU Make JEEP Body Style 4D - 4DR Vehicle Da	Mark nction IAL FUNC trol ROL ature T	TION	Speed Li 25 St WI Year 2014	Emergency NOT APP Traffic Con- NO Road Grade LEVEL Country of is UNITED ST Model WRANGLE	Total Lan 02 Motor Veh LICABLE crol Inopera	nicle Use	

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

Crash Date 09/10/2022

		Towed Due To Damage		Vehicle Removed By									
		NOT TOWED		OWNER									
		What Driver Was Doing		Vehicle Factors									
		LEAVING A PARKED POS	TION	NOT APPLICABLE									
		Driver Prior Action Other		NOT ALL ELOADEE									
LINO	VEHICLE	Driver Actions FAILED TO YIELD RIGHT-	OF-WAY, FAILURE TO C	CONTROL									
2	5	OwnerName NICOLE MICHELLE KRON (262) 442-0022	SHAGEN	Owner Address 6218 N 105TH ST MILWAUKEE, WI									
		l Seguence Of Events					********						
	5	Event REENTERING ROADWAY				1914 (1914 (1914 (1914 (1914 (1914 (1914 (1914 (1914 (1914 (1914 (1914 (1914 (1914 (1914 (1914 (1914 (1914 (19	10010000						
		Event											
	8	MOTOR VEH IN TRANSPO	ORT										
	8	Event											
	3	Event											
_		Policy Holder											
IN N		Insurance Company FARMERS-INS-CO-INC		Individual NICOLE KRONSHA	GEN								
		Individual											
		Driver		Citations Issued	T Sex								
		NICOLE MICHELLE KRON (262) 442-0022	ISHAGEN	01									
⊢	8	,,		Date of Birth	Date of Birth Race WHITE								
ENO.	INDIVIDUAL	Address 6218 N 105TH ST MILWAUKEE, WI 53225 ,	us	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES									
		On Duty	Crash	Safety Equipment									
	oa!	fety Equipment	T	-	DEL T								
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP	BELI								
		Helmet Use	•	Helmet Compliance									
		Eye Protection		TintCompliance									
2	B	Injury Se Injury NO API	everity PARENT INJURY	Airbag NON DEPLOYED									
		Ejected	Ejection Path			Trapped/Extricated							
		NOT EJECTED	NOT EJECTED/NOT AP			NOT TRAPPED							
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run#							
		Hospital		Date of Death		Time of Death							
		Distracted By NOT A	ed By Source	ACTED)		I							
		Distracted By Action		,									
		NOT DISTRACTED											

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

Crash Date 09/10/2022

		Striking U Non Motorist	init#	Location							
		Prior Action									
		Action									
	Ŧ										
FINS	INDIVIDUAL										
j⋽	9										
		Action Other			To/From School						
		Suspecte	d Alcohol Us	5e	Suspected Drug Use						
		Drug & Alcohol YES Alcohol Test Given		Alcohol Test Type	NO		Alcohol Test Results				
		TEST GIVEN		PRELIMINARY	BREATH TEST (PBT)		07				
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results					
2	50	Drug Type									
		Individual Condition									
		APPEARED NORMAL	APPEARED NORMAL								
		Individual									
		Passenger KELLEY SUZANNE KRONSHAGEN (262) 527-2775			Citations ssued	Sex					
	¥				0 FEMALE Date of Birth Race WHITE						
N	INDIVIDUAL	Address			Driver License Number	WHITE					
	2	425 UNION ST HARTFORD, WI 53027 , US	S		STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sa	On Duty C fety Equipment	Crash		Safety Equipment						
		Row 01 - FRONT ROW	Seat Pos 09 - RIC		SHOULDER & LAP I	BELT					
		HelmetUse	·		Helmet Compliance						
		Eye Protection			TintCompliance						
٤	8	Injury Sev	verity	IIIDV	Airbag						
		Ejected E	Ejection Pat	h	NON DEPLOYED		Trapped/Extricated				
		NOT EJECTED Medical Transport	MOLEJEC	TED/NOT APPL	EMS Agency Identifier		NOT TRAPPED EMS Run#				
		NOT TRANSPORTED Hospital			Date of Death		Time of Death				
			15.0		5410 (1.5001))		, and or Debut				
		Distracted By	d By Source								
		Distracted By Action									
		Non Motorist	Init#	Location							

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Crash Date 09/10/2022

		Prior Action										
TO/From Sch												
	1	Drug & Alcohol NO		Suspected Drug Use NO								
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	e		Alcohol Test Results						
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results							
2	200	Drug Type										
		Individual Condition APPEARED NORMAL										
		l Individual										
		Passenger ANGELA ROSE GRACZYK		Citations issued 0	FEMALE							
<u>_</u>	B			Date of Birth	Race WHITE							
TINO	INDIVIDUAL	Address 6425 W FAIRVIEW AVE MILWAUKEE, WI 53213 , L	JS.	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES								
	Sai	On Duty (Crash	Safety Equipment								
		Row 02 - SECOND ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT								
		Helmet Use		Helmet Compliance								
		Eye Protection		Tint Compliance								
2	8		CTED MINOR INJURY	Airbag NON DEPLOYED								
		1 '	Ejection Path NOT EJECTED/NOT APP	LICABLE		Trapped/Extricated NOT TRAPPED						
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run#						
		Hospital		Date of Death		Time of Death						
		Distracted By Distracte	d By Source	1								
		Distracted By Action										
		Non Motorist	Init# Location									
	MI	PriorAction										

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Crash Date 09/10/2022

UNIT	NDIVIDUAL	Action									
5	NDIV	Action Other To/From School									
		Suspec Drug & Alcohol NO	cted Alcohol	Use	Suspected Drug Use						
		Alcahol Test Given		Alcohol Test Type			Alcohol Test Results				
		TEST NOT GIVEN		Accitor restrippe	•		Alcohol Fasti (aschia				
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	3				
2	003	Drug Type									
		Individual Condition									
		APPEARED NORMAL ndividual									
		Passenger			Citations Issued	Sex					
	AL	MAVERICK Z MARTELL			0 Date of Birth	MALE Race	ALE				
 _	8				Date of Billin	WHITE					
TIND	NDWIDUAL	Address 425 UNION STREET HARTFORD, WI 53027	US		Driver License Number						
	Saf	On Dut	y Crash IRST-RES	PONDER	Safety Equipment						
		Row 02 - SECOND ROW	SeatP 09 - R		CHILD RESTRAINT SYSTEM - FORWARD FACING						
		HelmetUse			Helmet Compliance						
		Eye Protection Injury S	overity.		Tint Compliance Airbag						
٤	Š	Injury NO AF	PARENT	INJURY	NON DEPLOYED						
		Ejected NOT EJECTED	Ejection P		ICABLE		Trapped/Extricated NOT TRAPPED				
		Medical Transport NOT TRANSPORTED			EMS Agency Identifier		EMS Run#				
		Hospital			Date of Death		Time of Death				
		Distracted By	ted By Sourc	ce							
		Distracted By Action									
		Non Motorist	Unit#	Location							
		Prior Action									

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Crash Date 09/10/2022

TINO	INDIVIDUAL	Action											
		Action Other											To/From School
	ı	Orug & Alcohol	Sus NO	pected Alco	ohol Us	Suspected Drug Use NO				·			
		Alcohol Test Given TEST NOT GIVEN				Alcohol Test Ty	ype	•			Alcohol Tes	t Results	
		Drug Test Given TEST NOT GIVEN			Drug Test Type	е		Dru	g Test Results	•			
0	904	Drug Type											
Individual Condition APPEARED NORMAL													
	,	Violations	****	SISISISISISISISI	81818181818	. RESERVED SERVED S	6/6/6/	***************	ererere		SESSESSES	SSSSSSSSS	KISISISISISISISISISISISISISISISISISISIS
	10	UTC Number BG115234	00'	ue To? 1	346.	ite Number 18(5)		Description FAIL/YIELD RT/WAY	FR	OM PARKE	POSITION	l	
	Uni	t Summary 🗨											
	Unit	Status					1	ehicle Operating As Class	fication	on	UnitType		
		RANSIT					D	D CLASS			AUTOMO		
05		cle Type ORT) UTILITY VEHI	CLE	i .							Operating As Endorsements		
	Tota	lOccs		Train/Bus			Total # Citations Issued 0			Total Trailers 0		0	
⊨	Insu YES	rance?		Direction (Pre CrashTire Mark		Speed Limit 25		TotalLanes 02		
LINO	MO.	tHarmfulEvent: Collision of the Collisio						Special Function NO SPECIAL FUNCTION			Emergency Motor Vehicle Use NOT APPLICABLE		
		ic Way D-WAY, NOT DIVIDI	ΞD				1	raffic Control O CONTROL			Traffic Conf	rol Inoperat	ve/Missing
		ace Type						oad Curvature			Road Grade		
	Truc	k Bus or HazMat	<i>.</i> US)	<u>'</u>			5	TRAIGHT			LEVEL		
	NO,	Vehicle							ererere				
		License Plate Number	<u>illillillillillillillillillillillillill</u>				ΤF	Plate Type		TSt T	Country of Is	suance	
		689ACE						AUT - AUTOMOBILE		WI	UNITED ST		
05	ß	Vehicle Identification 5J6RM4H78EL023					- 1	Make HONDA		Year 2014	Model CRV		
		Color RED - RED					E	Body Style			Bus Use		
	ш	Initial Contact Point						/ehicle Damage					
LIND	XXXXIII	01 - RIGHT FRONT	ı cc	RNER				01 - RIGHT FRONT CO				.	7 8 9 10 11 5
5	VEHICL	Extent Of Damage DISABLING DAMA					1	FRONT, 03 - RIGHT SI REAR, 12 - FRONT	DE V	WIIDULE, U4	- KIGHT SIL	/E	5 4 3 2 1
Towed Due To Damage Vehicle Removed By TOWED DUE TO DISABLING DAMAGE CRAIGS TOWING													

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		What Driver Was Doing		V	ehicle Factors					
		GOING STRAIGHT								
		Driver Prior Action Other		N	IOT APPLICABLE					
INI	VEHICLE	Driver Actions NO CONTRIBUTING ACT	ON	1						
		Owner Name			Owner Address					
05	02	KAY ANN BEHN (608) 220-4300			1122 WOODVALE MADISON, WI 537					
		l Sequence Of Events			I					
	5	Event MOTOR VEH IN TRANSP	ORT							
	23	Event								
		Event								
	8	Event								
2 Event										
⊨		Policy Holder								
HNO.		Insurance Company STATE-FARM-GENERAL	INS-CO		Individual KAY BEHN					
		mdividual								
		Driver KAY ANN BEHN			Citations Issued 0	Sex FEMALE				
	M	(608) 220-4300			Date of Birth	Race				
LNO	ē					WHITE				
Ś	INDIVIDUAL	Address 1122 WOODVALE DR MADISON, WI 53716 , US			Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
	Sai	ւ On Duty fety Equipment	Crash		Safety Equipment					
		Row	SeatPo		SHOULDER & LAP BELT					
		01 - FRONT ROW HelmetUse	07 - LE	:FT	Helmet Compliance					
		Eye Protection			Tint Compliance					
05	88	Injury S Injury Possi	everity BLE INJUR	ťΥ	Airbag DEPLOYED-FRONT	г				
		Ejected NOT EJECTED	Ejection Pa		ICABLE		Trapped/Extricated NOT TRAPPED			
		Medical Transport			EMS Agency Identifier		EMS Run#			
		NOT TRANSPORTED			D-11-15D-11		Time of Death			
		Hospital			Date of Death		i ime of Death			
		Distracted By NOT A	ed By Source PPLICABL	E (NOT DISTRAC	TED)					
		Distracted By Action NOT DISTRACTED								
		Non Motorist Striking	Unit#	Location						

Crash Date 09/10/2022 Crash Time 04:05 PM

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Crash Date 09/10/2022

		Prior Action								
TIND	INDIVIDUAL	Action								
		Action Other					To/From School			
	1	Suspected Alcohol U Drug & Alcohol NO	lse	Suspected Drug Use						
		Alcohol Test Ty TEST NOT GIVEN Alcohol Test Ty								
		DrugTestGiven TEST NOT GIVEN	Drug Test Type							
03	902	Drug Type								
		Individual Condition APPEARED NORMAL								
		ness								
WITN 01 ESS 01	LIBOS	ridual SLEY KEVIN POWERS 3) 770-8917		Address 420 LYNN AVE BARABOO, WI 53913	, us	Da	ate of Birth			