6TL0D5DXZW 22-10439

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash Docume	Agency 22-104	y Crash Number 439	1 -	ng Officer/Dep C. FRANK	uty
NZ Z	Crash Date 10/20/2022	Crash Time 07:15 AM	Date A 10/20/		Time Arrive		
X	Date Notified	Time Notified	TotalU	nits	Total Injure	l l	Killed
2	10/20/2022	07:36 AM	02	Т	00	00	—
0.	On Emergency	Hit and Run	ane Closure	☐ Work Zone	l	r or Towed	Reporting Threshold
6TL0D5DXZW	Government Property	Active School Z		Bus Related	Tags		
	Reportable	Crash Type DT4000 (STANDAR	D CRASH)		Amen	ded	Secondary Crash
	Description —	•			•		•
	Diagram					Reconstruct Photos By	ction By
		Cr	Н		(D)	9198	
	S2237	Dewey Ave		N ot to	o scale	Additional I PHOTOS	nformation
	i a sworn law onfor	coment officer gares the	t I have not adde	d any C IIS data in t	thic raport		
	5	cement officer, agree that				BELWNE	NAC - 100 -
	BUS CONTINUED SOUTH UN STRUCK REAR DRIVER SIDE WITH UNIT 1 OPERATOR MA	FIME UNIT 1 AND UNIT 2 WERE HITS ACCELERATED SOUTHBO E OF UNIT 2. UNIT 1 PULLED O JOE. UNIT 1 OPERATOR DENIE O SOUTH. UNIT 1 OPERATOR S	UND. UNIT 1 CROSS VER AND UNIT 2 CO D KNOWLEDGE OF 3	ED LEFT OF CENTER A INTINUED SOUTH, UNIT STRIKING UNIT 2, UNIT	AND STRUCK UNI T 1 OPERATOR OI T 1 OPERATOR ST	T 2. FRONT P. BTAINED UNIT ATED HE STO	ASSENGER SIDE OF UNIT 1 F1 REGISTRATION, CONTACT PPPED BEHIND UNIT 2 BEHIND

SOUTHBOUND IN THE NORTHBOUND LANE. UNIT 1 OPERATOR BRAKED AND TURNED RIGHT TO REMAIN IN SOUTHBOUND LANE. THIS IS WHEN UNIT 1

STRUCK UNIT 2. UNIT 1 STATED HE WAS UNAWARE HE STRUCK UNIT 2.

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Crash Date 10/20/2022

	Location —									
	ON S2237 CTHH SB			Latitude			Longitu	ide		
	684 FT S			43.564	73902		-89.97	1962263		
	OF KEENEN CT			X Coord	dinate		Y Coor	dinate		
	(FIRE \$2237)			25998	259985.03125		48278	23		
	IN THE TOWN OF WINFIE	Structu FIRE	Structure Type							
	Crash Scene			•						
	FirstHarmfulEvent			FiretHa	ırmful Eventi	ocation				
	MOTOR VEH IN TRANSP	ORT			DADWAY					
	Manner of Collision			Liaht C	ondition					
	07 - SIDESWIPE/SAME D	IRECTION		DAYLI						
	Road Surface Condition(s)			Roadw	ay Factor(s)					
	DRY				•					
	Environment Factor(s)									
	NONE			BACK	UP DUE TO	REGULAR	CONGES	TION		
	Weather Condition(s)									
	CLEAR									
	Animal Type			Relatio	n To Trafficw	av				
					FICWAY - C	-				
	Crash Classification - Location	1		Crash C	Classification	-Jurisdiction				
	PUBLIC PROPERTY			NO SP	NO SPECIAL JURISDICTION					
	Tribal Land			Access Control Special Stu NO CONTROL			Special Study			
	Within Interchange Area	-				ction Type IN INTERSECTION				
		NON-OUNC FOR		NOT AN INTERC	SECTION.					
	Unit Summary Unit Status		I Vahiala Onau	atina Aa Classifiaat		1				
	IN TRANSIT		D CLASS	ating As Classificat	Classification Unit Type AUTOMOBILE					
	Vehicle Type				Operating As Endorsements			ements		
5	PASSENGER CAR			oporaumy.						
	Total Occs	Train/Bus#Recorded	Total#Citatio	ns Issued	d Total Trail		Total Ha	zMat Types		
	1		0		0 Speed Lin		0	••		
	Insurance?	Direction Of Travel	Pre C	rashTire			imit Total Lanes			
—	YES	SOUTHBOUND		Mark	55		2			
TINO	Most Harmful Event: Collision	With	Special Func				Emergency Motor Vehicle Use			
_	MOTOR VEH IN TRANSPORT NO S			NO SPECIAL FUNCTION		NOT APPLICABI				
				Traffic Control				ol Inoperative/Missing		
	TWO-WAY, NOT DIVIDED)		NO CONTROL		NO				
	Surface Type	10)	Road Curvatu			Road Grade				
	BLACKTOP (BITUMINOUS) STRAIGHT					LEVEL				
		•								
	Truck Bus or HazMat	·	I							
	Truck Bus or HazMat NO				SSSSSSSSSSS	X S S S S S S S S S S S S S S S S S S S				
	Truck Bus or HazMat		Plate Type		TSt	Country of Is	suance			
	Truck Bus or HazMat NO Vehicle		Plate Type AUT - AUT	OMOBILE	St WI	Country of Is				
	Truck Bus or HazMat NO Vehicle License Plate Number APZ1392 Vehicle Identification Nu	ımber	AUT - AUT Make	OMOBILE	WI Year	UNITED ST				
	Truck Bus or HazMat NO Vehicle License Plate Number APZ1392 Vehicle Identification Nu KL5VM52L74B09744	ımber	AUT - AUT Make SUZUKI	OMOBILE	WI	Model VERONA				
	Truck Bus or HazMat NO Vehicle License Plate Number APZ1392 Vehicle Identification Nu KL5VM52L74B09744 Color	ımber	AUT - AUT Make SUZUKI Body Style		WI Year	UNITED ST				
	Truck Bus or HazMat NO Vehicle License Plate Number APZ1392 Vehicle Identification Nu KL5VM52L74B09744 Color BLU - BLUE	ımber	AUT - AUT Make SUZUK! Body Style SD - SEDA	.N	WI Year	Model VERONA				
	Truck Bus or HazMat NO Vehicle License Plate Number APZ1392 Vehicle Identification Nu KL5VM52L74B09744 Color BLU - BLUE Initial Contact Point	umber 40	AUT - AUT Make SUZUKI Body Style SD - SEDA Vehicle Dam	.N nage	WI Year 2004	Model VERONA Bus Use		7 8 9 10 11		
LIND	Truck Bus or HazMat NO Vehicle License Plate Number APZ1392 Vehicle Identification Nu KL5VM52L74B09744 Color BLU - BLUE Initial Contact Point	umber 40 CORNER	AUT - AUT Make SUZUKI Body Style SD - SEDA Vehicle Dam	.N	WI Year 2004	Model VERONA Bus Use		7 8 9 10 11 6 12 5 4 3 2 1		

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Crash Date 10/20/2022

		Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR					
		What Driver Was Doing		Vehicle Factors					
		GOING STRAIGHT Driver Prior Action Other		7 GROUS BOOKS					
				NOT APPLICABLE					
UNIT	VEHICLE	Driver Actions FOLLOWING TOO CLOSE, IMPROPER OVERTAKING / PASSING LEFT, OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER							
		Owner Name		Owner Address					
	5	GABRIEL OREN BROOKS (608) 415-7272		S1049 TOWN HALL RD LYNDON STATION, WI 53944 , US					
		 Seguance Of Events							
		Event							
	9	MOTOR VEH IN TRANSPORT							
	8	Event							
	8	Event							
	3	Event							
_		Policy Holder							
N		Insurance Company		Individual					
_		AMERICAN-FAMILY-INS-C	0	GABRIEL BROOKS	S				
		section and administration of the section of the se			ateriotes est est est est est est est est est 				
		Driver GABRIEL OREN BROOKS		Citations Issued Sex MALE					
	Z	(608) 415-7272		Date of Birth	Race				
╘	NDIVIDUA				WHITE				
EN D	ā	Address S1049 TOWN HALL RD		Driver License Number					
	Z	LYNDON STATION, WI 53944 , US		STATE: WISCONSIN COUNTRY: UNITED STATES					
	Sai	On Duty Crash fety Equipment		Safety Equipment					
		Row	SeatPosition	SHOULDER & LAP BELT Helmet Compliance					
		01 - FRONT ROW HelmetUse	07 - LEFT						
				пенте сотриалсе					
		Eye Protection		Tint Compliance					
2	8	Injury Severity NO APPARENT INJURY		Airbag NON DEPLOYED					
		Ejected	Ejection Path	MON DEFECTED		Trapped/Extricated			
		NOT EJECTED	NOT EJECTED/NOT AP	PLICABLE		NOT TRAPPED			
		Medical Transport NOT TRANSPORTED		EMS Agency Identifie	r	EMS Run#			
	2015HH	INCLIMANSFORIED							
		Hospital		Date of Death		Time of Death			
		Hospital		Date of Death		Time of Death			
		Hospital	ed By Source LE-INTEGRATED DEVICE			Time of Death			

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

		Non Motorist	ing Unit#	Location						
		Prior Action								
		Action								
	UAL									
	INDIVIDUAL									
		A () 50								I
		Action Other								To/From School
	Ĺ	Drug & Alcohol NO	pected Alcohol U	lse	Suspected Drug Use NO					
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type				Alcohol Test I	Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Tes	t Results			
10	100	Drug Type								
		Individual Condition								
		APPEARED NORMAL								
		Summary ===								
		Status RANSIT		I .	ehicle Operating As Classi CLASS	fication		Unit Type AUTOMOB	ILE	
05		hicle Type PORT) UTILITY VEHICLE						Operating As	Endorsem	nents
	Tota 1	Occs	Train/Bus#Re	corded To	otal#Citations Issued	Total Trail 0 Speed Lir 55		ailers Total Hazi		Mat Types
╘	YES		Direction Of Tra	D D	Pre CrashTire Mark			2		
LINO		Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT Traffic Way TWO-WAY, NOT DIVIDED			Special Function NO SPECIAL FUNCTION			Emergency Motor Vehicle Use NOT APPLICABLE		
					Traffic Control NO CONTROL			Traffic Control Inoperative/Missing NO		
					Road Curvature STRAIGHT			Road Grade		
		k Bus or HazMat		-						
		/ehicle		eckessessesses		·eeeeeee	KKKKKKKK		SSSSSSSS	
	ľ	License Plate Number 487DAY		I	Plate Type St AUT - AUTOMOBILE WI			Country of Issuance UNITED STATES		
	2	Vehicle Identification Number			Make			Model		
	•	1GNDT13S542438266 Color			CHEVROLET Body Style	20	004	Bus Use		
	Щ	GRN - GREEN Initial Contact Point		\	/ehicle Damage					
UNIT		07 - LEFT REAR COR	NER			.==	. === .			7 8 9 10 11 6 12
⋾	VEHICL	Extent Of Damage MINOR DAMAGE			07 - LEFT REAR CORM	¥EK, UÖ -	·LEFIS	NUE KEAK		5 4 3 2 1
		Towed Due To Damage NOT TOWED			Vehicle Removed By OPERATOR					

Crash Date 10/20/2022
Crash Time 07:15 AM

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		What Driver Was Doing		٧	ehicle Factors						
		GOING STRAIGHT Driver Prior Action Other			NOT APPLICABLE						
	ш	Driver Actions NO CONTRIBUTING ACTION									
N	VEHICLE										
	VE										
		OwnerName EDWARD EARL SMITH				Owner Address S1368 COON BLUFF RD					
	2	(608) 434-2630			WISCONSIN DELLS, WI 53965 , US						
		Sequence Of Events									
	5	Event MOTOR VEH IN TRANSPO	ORT								
	8	Event									
	63	Event									
	Event										
–		Policy Holder									
LIND		Insurance Company STATE-FARM-GENERAL-INS-CO		Individual EDWARD SMITH							
		Individual									
		Driver EDWARD EARL SMITH (608) 434-2630		Citations Issued Sex 0 MALE							
_	INDIVIDUA			Date of Birth	Race WHITE						
ENO.	30	Address S1368 COON BLUFF RD		Driver License Number	1						
	=	WISCONSIN DELLS, WI 53965 , US		STATE: WISCONSIN COUNTRY: UNITED STATES							
	Sai	On Duty Crash fety Equipment			Safety Equipment						
		Row Seat Position			SHOULDER & LAP BELT						
		01 - FRONT ROW		EFT .	HelmetCompliance						
		Eye Protection		TintCompliance							
۵.	7	injury Severity			Airbag						
05	22	Injury _{NO AP}	PARENT I		NON DEPLOYED						
		Ejected NOT EJECTED	Ejection Pa	th CTED/NOT APPL	ICABLE		Trapped/Extricated 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 PPLICABL	E (NOT DISTRAC	I CTED)		I				
		Distracted By Action NOT DISTRACTED		<u> </u>	·						
		Nan Motarist	Unit#	Location							

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	Prior Action					
	Action					
MAL						
2						
	Action Other					To/From School
	Suspected Alcohol to Suspected Alcohol to Suspected Alcohol NO	Jse	Suspected Drug Use			
	Alcohol Test Given	Alcohol Test Type			Alcohol Test Results	
	Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results		
005	Drug Type					
	Individual Condition					
	APPEARED NORMAL					
	002 E INDIVIDUAL	Action Other Drug & Alcohol Alcohol Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Type Individual Condition	Action Other Drug & Alcoho Suspected Alcohol Use NO Alcohol Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Type Individual Condition	Action Other Drug & Alcohol Suspected Alcohol Use No	Action Other Drug & Alcoho Suspected Alcohol Use No Suspected Drug Use No No No No No No No N	Action Other Drug & Alcohol Suspected Alcohol Use No