## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Override	Primary Crash	Document#	Agency	/ Crash Number	Investigating	Officer/Deputy	1			
	1 ' 1			PUTY S. MESSNER						
Crash Date 11/02/2022	Crash Time 06:38 PM	0.00.7 7		rived 2022	Time Arrived 06:45 PM					
Date Notified 11/02/2022	Time Notified 06:38 PM		Total U	nits	Total Injured	Total Killi	ed			
On Emergency	Hit and Run	✓ Lane Clos	ure	☐ Work Zone	Trailer	or Towed	Reporting  Threshold			
Government Property	Active Se	chool Zone	School NO	Bus Related	Tags		•			
<b>✓</b> Reportable	Crash Type DT4000 (STA	ANDARD CRASH	H)		Amend	ed	Secondary Crash			
<b>Description</b>										
			9	lot to scale		Photos By <b>DEP. S. ME</b> Additional Infe <b>PHOTOS</b>	SSNER #9134  ormation			
Unit 1 pass uni	t 2 pass the									
01 02		Unit 2 got into ends Unit 1	-		-					
	STH	136 eastbound	lane							
l, a sworn law enforcer	nent officer, agı	ree that I have n	ot adde	d any CJIS data in ti	nis report.					
ON 11/02/2022, AT APPROXIMAT BY BRANDON S. LEE. UNIT 1 W. PASSENGER CAROL L. BOCHLE AND UNIT 2 REAR-ENDED UNIT AMBULANCE. ALL INDIVIDUALS WARNING FOR FOLLOWING TO	AS BEHIND UNIT 2, R. UNIT 1, AFTER 1. THIS CAUSED F IDENTIFIED AND A	A 2004 BLACK FOR THE FIRST ROUND UNCTIONAL DAMAG ACCIDENT SCENE D	RD EXPEC -ABOUT, F GE TO UN DOCUMEN	ITION, BEARING WI#AC PASSED UNIT 2 IN THE F IT 1 AND NO DAMAGE T TED.HAROLD WAS CITE	GU2507, WAS BEIN FOUR LANE SECTI FO UNIT 2. ALL OC	G DRIVEN BY ON OF ROAD. CUPANTS DEN	HAROLD G. BOCHLER AND UNIT 1 SLOWED DOWN NIED WANTING AN			

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Crash Time 06:38 PM

	Location <b>——</b>										
Ī	ON STH33 EB					Latitude			Longitue	de	
	17 FT W					43.4747069		1 -	5298485		
	OF USH12 EB										
	IN THE VILLAGE OF WEST BARABOO					X Coordinate					
	IN SAUK COUNTY								401121	14.5	
						Structure 7					
١	Cuash Casus					NO OTICE	DOTORLE				
1	Crash Scene FirstHarmfulEvent					<b>=</b> :		.,			
	MOTOR VEH IN TRANSPO	net				ON ROA	nful Event Lo	cation			
ŀ	Manner of Collision	<u> </u>				Light Cond					
	03 - FRONT TO REAR					DARK/LI					
ł	Road Surface Condition(s)					Roadway Factoris)					
	DRY					,					
ł	Environment Factor(s)										
	NONE					NONE					
-	Weather Condition(s)										
	CLEAR										
ł	Animal Type					Relation T	o Trafficway	1			
	DEER						WAY - ON				
Ì	Crash Classification - Location					Crash Clas	ssification -	Jurisdiction			
	PUBLIC PROPERTY					NO SPE	CIAL JURI	SDICTION			
	TribalLand	Tribal Land					Access Control Special Study NO CONTROL				
ł	Within Interchange Area	Junction Location			Intersection	l ion Type					
	NO	- I				AN INTERSECTION					
	Closure Type  LANE CLOSURE			Reas	ons for Closi	NFORCEMENT					
	Date Initial Lane/Rd Closed	Time Initial Lane/Rd Clos	sed	LAW	ENFORCE						
	11/02/2022 Date All Lanes Open	06:38 PM Time All Lanes Open		D-t- (	Saara Olaar						
	11/02/2022	07:10 PM		Date Scene Cleared 11/02/2022			07:10 PM				
į	Unit Summary 💻	•									
	Unit Status		Vehi	cle Ope	erating As C	lassification		UnitType			
	IN TRANSIT		D C	LASS				AUTOMOBILE			
	Vehicle Type							Operating As Endorsements			
	PASSENGER CAR										
	Total Occs 1	Train/Bus#Recorded	Tota 0	I# Citat	ions Issued	t Total Traile 0		ilers Total Ha:		zMat Types	
ŀ	Insurance?	Direction Of Travel		Pre	CrashTire		Speed Lim	ìt	TotalLan	es	
	YES	EASTBOUND			Mark		35		4		
	Most Harmful Event: Collision \ MOTOR VEH IN TRANSPO			cial Fur <b>SPEC</b>	ction IAL FUNC	TION			Motor Veh	nicle Use	
ł	Traffic Way		Traff	fic Cont	rol			Traffic Con	rol Inopera	ative/Missing	
	Surface Type Ro			CONT	ROL			NO			
İ				d Curva				Road Grade	•		
	CONCRETE STRAIGHT				T			LEVEL			
Truck Bus or HazMat  NO											
	Vehicle										
-0-00-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-0-	License Plate Number  AKA4325			te Type <b>T - AU</b>	TOMOBIL	.E	St WI	Country of Issuance UNITED STATES			
(m) (m) (m)	Vehicle Identification Nu		Mal				Year	ear Model			
5	<b>5</b> SHHEP33675U503440 HONDA					2005 CIVIC					

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l		Color B			Body Style Bus Use							
		BLK - BLACK			3 - HATCHBACK							
	ш	Initial Contact Point			hicle Damage							
⊢	#	06 - REAR         (           Extent Of Damage         (           FUNCTIONAL DAMAGE         (           Towed Due To Damage         V			04 - RIGHT SIDE REAR, 05 - RIGHT REAR CORNER,							
NS.	¥				- REAR, 07 - LEFT			6 12				
⊃	VEHICL				EAR	neral connen		5 4 3 2 1				
	7				hicle Removed By							
					PERATOR							
		What Driver Was Doing		_	hicle Factors							
		GOING STRAIGHT			HOLE FACTORS							
				- NC	OT APPLICABLE							
		Driver Prior Action Other		"`	7							
		Driver Actions NO CONTRIBUTING ACTION										
ᆫ	Щ											
N N	EHIC											
⋽	ä											
	>											
		OwnerName			Owner Address							
2	5	BRANDON SCOTT LEE (608) 495-2404			308 E BROADWAY							
9	9	(000) 493-2404			ROCK SPRINGS, WI 53961 , US							
		Sequence Of Events										
	36171	Event										
	5	MOTOR VEH IN TRANSF	ORT									
		Event										
	8											
		Event										
		Event										
	8											
١.		L Policy Holder										
N		Insurance Company										
5		PROGRESSIVE-UNIVER	SAL INSHBANCE-COMP	Individual BRANDON LEE								
			OAL-IIIOOIIAIICE-COM									
		Driver			Citations Issued	Sex						
		BRANDON SCOTT LEE (608) 495-2404		- ['	0	MALE						
	B	(000) 480-2404		_ [ī	Date of Birth	Race						
⊨					WHITE							
3	NON	Address			Driver License Number							
-	9	308 E BROADWAY	24 110									
		ROCK SPRINGS, WI 539	CU, FO	STATE: WISCONSIN COUNTRY: UNITED STATES								
		On Dut	y Crash	1	Safety Equipment							
	Sai	fety Equipment										
		Row	Seat Position	<b>-</b>  :	SHOULDER & LAP E	BELT						
		01 - FRONT ROW	07 - LEFT									
		HelmetUse			Helmet Compliance							
		Eye Protection		1	Tint Compliance							
<u>-</u>		Injury S	Severity	1	Airbag							
2	8	<b>INJURY</b> NO AI	PPARENT INJURY		NON DEPLOYED							
		Ejected	Ejection Path				Trapped/Extricated					
		NOT EJECTED	NOT EJECTED/NOT AP	PLIC	CABLE		NOT TRAPPED					
		Medical Transport		1	EMS Agency Identifier		EMS Run#					
		NOT TRANSPORTED										

Crash Date 11/02/2022 Crash Time 06:38 PM

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Crash Date 11/02/2022

Crash Time 06:38 PM

		Hospital			Date of Death			Time of Death			
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)										
Distracted By Action NOT DISTRACTED											
		Non Motorist	ing Unit#	Location							
Prior Action											
	UAL										
L	NDWIDUAL										
	IND										
		Action Other							To/From School		
	1	Drug & Alcohol NO			Suspected Drug Use NO			·			
		Alcohol Test Given Alcohol TEST NOT GIVEN		Alcohol Test Type	тТуре		Alcohol Test Results				
		Drug Test Given TEST NOT GIVEN Drug Test Typ		Drug Test Type	e Drug Test Results			3			
5	001	Drug Type									
		Individual Condition									
		APPEARED NORMAL									
	Uni	t Summary ===									
	Unit	Status		l l	ehicle Operating As Class		UnitType				
		RANSIT		[	CLASS		TRUCK Operating As Endorsements				
02		cle Type ORT) UTILITY VEHICLE	1								
	Tota 2	lOccs	Train/Bus#Re	1.	Total # Citations Issued Total Trail 1 0			ilers Total Hazi		Mat Types	
<b>—</b>	Insu	rance?	Direction Of Tra		Pre CrashTire Mark		Speed Lin	mit Total Lanes		S	
LINO	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT				Special Function NO SPECIAL FUNCTION			Emergency Motor Vehicle Use NOT APPLICABLE			
	Traff	ic Way		Т	raffic Control			Traffic Control Inoperative/Missing			
		DED HWY MEDIAN W/E	BARRIER		NO CONTROL			NO			
	Surface Type CONCRETE			I .	Road Curvature STRAIGHT			Road Grade LEVEL			
Truck Bus or HazMat					TICAGITI			LEVEL			
	NO										
		Vehicle License Plate Number		T	Dieta Tura	T	St	Country of Issuance UNITED STATES			
		AGU2507			Plate Type  AUT - AUTOMOBILE		WI				
02	N	Vehicle Identification Number			Make		Year	Model			
0	02	1FMFU18L24LB27979			FORD		2004	EXPEDITION			
	Color BLK - BLACK				Body Style UT - SPORT UTILITY VEHICLE			Bus Use			

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UNIT	VEHICLE	Initial Contact Point 12 - FRONT Extent Of Damage NO DAMAGE		/ehicle Damage 00 - NO DAMAGE	7 8 9 10 H 5 12 5 4 8 2 1						
		Towed Due To Damage NOT TOWED		ehicle Removed By							
		What Driver Was Doing	\	ehicle Factors							
		GOING STRAIGHT  Driver Prior Action Other	Þ	OT APPLICABLE							
TINO	VEHICLE	Driver Actions FOLLOWING TOO CLOSE									
03	05	Owner Name HAROLD GEORGE BOCHLE (608) 522-4846	ER.	Owner Address S4548 BELTER DR NORTH FREEDOM							
	Event MOTOR VEH IN TRANSPORT  Event  Event										
	Event										
	3	Event									
		Policy Holder									
N		Insurance Company	Individual								
_		GEICO-GENERAL-INS-CO		HAROLD BOCHLER							
		Individual Driver		Citations Issued							
	4	HAROLD GEORGE BOCHLE (608) 522-4846	ER .	1	MALE						
⊨	DIVIDUAL			Date of Birth	Race WHITE						
N N	8	Address S4548 BELTER DR NORTH FREEDOM, WI 53951 , US On Duty Crash ety Equipment		Driver License Number							
	<b>Z</b>			STATE: WISCONSIN COUNTRY: UNITED STATES							
	Sai			Safety Equipment							
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP I	BELT						
		HelmetUse	•	Helmet Compliance							
		Eye Protection		Tint Compliance							
05	8	Injury Seve Injury NO APPA	Airbag NON DEPLOYED								
		Ejected E	jection Path OT EJECTED/NOT APPL	ICABLE		Trapped/Extricated NOT TRAPPED					
		Medical Transport	O. EVECTED/ROT AFFE	EMS Agency Identifier		EMS Run#					
		NOT TRANSPORTED		Date of Death		Time of Death					
		Hospital		Date of Death		Time of Death					

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2000		Distracted By Source  Distracted By NOT APPLICABLE (NOT DISTRACTED)											
		Distracted By Action NOT DISTRACTED											
888888888888888888888888888888888888888		Non Motorist	Init# Location										
SS11100cc		Prior Action	•										
75 (S)		Action											
	Z												
LIND	NDIVIDUAL												
_	<u> </u>												
(S)Hitzuwo		Action Other					To/From School						
	1	Drug & Alcohol NO	d Alcohol Use	Suspected Drug Use	<b>1</b>		1						
		Alcohol Test Given TEST NOT GIVEN	pe De		Alcohol Test Results								
		Drug Test Given Drug Test Type TEST NOT GIVEN			3								
02	805	Drug Type											
) ::::::::::::::::::::::::::::::::::::	0												
		Individual Condition  APPEARED NORMAL											
2000		Individual		I Children land at I Care									
335555	_	Passenger CAROL L BOCHLER (608) 522-4846	Citations Issued  0	Sex FEMALE	FEMALE								
E	NDMDUA	(000,022 1010		Date of Birth	Race WHITE								
LNO	<b>À</b>	Address		Driver License Number									
_	Z	S4548 BELTER DR NORTH FREEDOM, WI 539	51 , US	STATE: WISCONSIN COUNTRY: UNITED STATES									
9888		On Duty C	Crash	Safety Equipment									
WHEN SE	sai	ety Equipment	Seat Position	SHOULDER & LAP BELT									
332000000000000000000000000000000000000		01 - FRONT ROW	09 - RIGHT										
HERENESS AND		HelmetUse		Helmet Compliance									
300000000		Eye Protection	Tint Compliance										
02	8	Injury Sev Injury NO APP	Airbag NON DEPLOYED										
		Ejected I	PLICABLE		Trapped/Extricated NOT TRAPPED								
		Medical Transport NOT TRANSPORTED		EMS Agency Identifi	er	EMS Run#							
000000000000000000000000000000000000000		Hospital		Date of Death		Time of Death							
22		Distracted											

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		Distracted By Action						
	l	Non Motorist	Striking Unit#	Location				
3		Prior Action						
UNIT	IDUAL	Action						
5	INDIVIDUAL							
		Action Other						To/From School
	L	Drug & Alcohol	Suspected Alco NO	phol Use	Suspected Drug Use NO			
		AlcoholTestGiven TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		
02	003	Drug Type						
		Individual Condition  APPEARED NORM	141					
		/: _ 1 _ 4:						
	0.1	UTC Number BG024447	Issue To?	Statute Number 344.62(2)			OOF OF INSURANCE	