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 22-127	Crash Number 50		Investigating DEPUTY A	•		/			
Crash Date 12/21/2022	Crash Time 06:10 PM		Date Ar			Time Arrived 06:17 PM						
Date Notified 12/21/2022	Time Notified 06:15 PM		Total Ur	iits		Total Injured	1 To	otal Killed				
On Emergency	Hit and Run	Lane Clos	ure	Work Zone		Trailer	or Tow	/ed	Reporting Threshold			
Government Property	Active Sc	hool Zone	School I	Bus Related		Tags		•	•			
✓ Reportable	Crash Type PRIVATE PR	OPERTY/PARK	ING LOT			Amend	led		Secondary Crash			
Walgr	reens		02	Not to	Sc	e W. Pine St	Photos DEPU	nal Informa	.HNKE #9182			

Form DT4000

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Crash Date 12/21/2022

	Loc	ation ——								
ł		KING LOT				Latitude			Longitu	de
		HBD NB LOT				43.47575	8742		-89.76	9692897
		HE VILLAGE OF WES AUK COUNTY	ST BARABOO			X Coordin 275991.7			Y Coore	
						Structure Type NO STRUCTURE				
	Cra.	sh Scene								
,		Harmful Event				F: (1)	(15 (1	··		
		TOR VEH IN TRANSP	OPT				nful Event Lo	cation OCATION U	NIKNOV	WNI
		ner of Collision	UKI			Light Cond		OCATION U	INKINOV	VIN
		REAR TO REAR				DARK/LI				
		d Surface Condition(s)				Roadway				
		r, snow				Noadway	i actor(3)			
	Envii	ronment Factor(s)								
	NONE				NONE					
	Weather Condition(s)									
	SNC	DW								
	Anim	nal Type					o Trafficway	r - PARKING	тот	
	Crash Classification - Location									
	PRIVATE PROPERTY					Crash Classification - Jurisdiction PRIVATE PROPERTY				
	Triba	I Land				Access Control Special Study NO CONTROL				
	\\/i+b	in Interchange Area	nange Area Junction Location Intersection				IKOL			
	NO	in interchange Area	NON-JUNCTION			INTERSE	CTION			
į	Unit	t Summary \blacksquare								
		Status		Vehicle Operating As Classification Unit Type						
	IN T	N TRANSIT D CLASS			AUTOMOBILE					
L O	Vehi	ehicle Type				Operating As Endorsements				
•	(SP	ORT) UTILITY VEHICL								
	Tota 4	Occs	Train/Bus # Recorded	Total # Cita	tions Issued		Total Traile		Total Ha 0	zMat Types
	Insu	rance?	Direction Of Travel NOT ON ROADWAY	Pre	CrashTire Mark		Speed Lim		Total Lar 2	nes
		Harmful Event: Collision \		Special Fun				Emergency N		nicle Use
1	MO	TOR VEH IN TRANSPO		NO SPEC	IAL FUNC	TION		NOT APPL	ICABLE	Ĭ.
		ic Way	TE DDODEDTY	Traffic Cont				Traffic Contro	oi inopera	ative/Missing
		KING LOT OR PRIVA	IE PRUPEKTY	NO CONT				NO Pood Grade		
		ACKTOP (BITUMINOU:	S)	Road Curva				Road Grade LEVEL		
		k Bus or HazMat	<u>~,</u>	Jonasa	•					
\dashv		Vehicle								
		License Plate Number		Plate Type	:		St	Country of Iss	uance	
		0PNDAY			ILWAUKE	E BRE		UNITED ST		
		Vehicle Identification Nur	mber	Make				Model		
5	5 1GKS2HKJ7KR236820			GENERA	L MOTOR	S COR	2019	YUKON XL		
		Color		Body Style				Bus Use		
		WHI - WHITE			RT UTILIT	Y VEHICI	LE			
-	CLE			Vehicle Da	nmage					7 8 9 10 11
5	VEHICL	Extent Of Damage MINOR DAMAGE	07 - LEF	T REAR C	ORNER, (08 - LEFT \$	SIDE REAR		5 4 3 2 1	

6TL0CBQ6R4

22-12750

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Crash Date 12/21/2022

		Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER				
		What Driver Was Doing		Vehicle Factors				
		BACKING						
		Driver Prior Action Other		NOT APPLICABLE				
		Driver Actions						
_	LE	LOOKED BUT DID NOT SE	E					
UNIT	₽							
_	VEHICLE							
		O N						
		Owner Name BRANDON WEGNER		Owner Address S4158 WHISPERI	NG PINES DR			
0	01	(608) 434-5111		BARABOO, WI 53	913 , US			
		Sequence Of Events Event						
	01	MOTOR VEH IN TRANSPO	RT					
	02	Event						
	03	Event						
	04	Event						
		D. II. II. II.						
LIND		Policy Holder Insurance Company		Individual				
5		WISCONSIN-MUTUAL-INS-	-CO	BRANDON WEGNE	R			
	i	ndividual						
		Driver BRANDON WEGNER		Citations Issued	Sex			
	AL	(608) 434-5111		0 Date of Birth	MALE Race			
⊨	INDIVIDUAL			Date of Biltin	WHITE			
	<u>></u>	Address S4158 WHISPERING PINES	S DR	Driver License Number	Driver License Number			
	Z	BARABOO, WI 53913 , US		STATE: WISCONSIN COUNTRY: UNITED STATES				
	Saf	On Duty (Crash	Safety Equipment				
		Row	Seat Position	SHOULDER & LAP	BELT			
		01 - FRONT ROW	07 - LEFT					
		Helmet Use		Helmet Compliance				
		Eye Protection		Tint Compliance				
		Injury Sev	verity.	Airbag				
5	9		ARENT INJURY	NON DEPLOYED				
		=	Ejection Path			Trapped/Extricated		
		NOT EJECTED Medical Transport	NOT EJECTED/NOT APP	PLICABLE EMS Agency Identifier		NOT TRAPPED EMS Run #		
		NOT TRANSPORTED		LIVIS Agency Identifier		LINS IXIII #		
		Hospital		Date of Death		Time of Death		
		Distracted	d By Source					
		Distracted By NOT AP	PLICABLE (NOT DISTRA	ACTED)				
		Distracted By Action NOT DISTRACTED						

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

		<u> </u>										
		Non Motorist	Striking U	nit#	Location							
		Prior Action										
LINIT	INDIVIDUAL	Action										
		Action Other							To/From School			
	ı	Drug & Alcohol	NO Suspected	d Alcohol U	Jse	Suspected Drug Use NO						
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type	9		Alcohol Test Results				
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Results	S				
٦	004	Drug Type					-1					
		Individual Condition										
		APPEARED NORM	1AL									
	- 1	Individual				Towns 1						
	پ	Passenger KATELYN R WEGNER (608) 434-5111			Citations Issued 0	Sex FEMALE						
⊨	DO					Date of Birth	Race WHITE					
LINO	INDIVIDUAL	Address S4158 WHISPERING PINES DR BARABOO, WI 53913, US			Driver License Number							
	Sat	fety Equipment	On Duty C	Crash		Safety Equipment						
		Row 01 - FRONT ROW		Seat Po		SHOULDER & LAP BELT						
		Helmet Use		-1		Helmet Compliance						
		Eye Protection				Tint Compliance						
5	005	Injury	Injury Sev	ARENT II		Airbag NON DEPLOYED						
		Ejected NOT EJECTED		jection Pa	th CTED/NOT APP	LICABLE		Trapped/Extricated NOT TRAPPED				
		Medical Transport NOT TRANSPORT	ED			EMS Agency Identifie	er	EMS Run #				
		Hospital				Date of Death		Time of Death				
		Distracted By	Distracted	By Source	Э	- I						
		Distracted By Action										
		Non Motorist	Striking U	nit#	Location							

Crash Date 12/21/2022
Crash Time 06:10 PM

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

Crash Date 12/21/2022

		Prior Action									
		Action									
	INDIVIDUAL										
╘	DO										
UNIT	<u>></u>										
	N										
		A satisfies Oath and					T-/ C-b				
		Action Other					To/From School				
		Suspected Alcohol U	se	Suspected Drug Use							
	L	Drug & Alcohol NO		NO							
		Alcohol Test Given	Alcohol Test Type			Alcohol Test Results					
		TEST NOT GIVEN	Drug Test Type		I D T4 D						
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results						
10	002	Drug Type									
	0										
		Individual Condition									
		APPEARED NORMAL									
		n divide al									
		ndividual Passenger		Citations Issued	Sex						
	_	TAYLOR L WEGNER		0	FEMALE						
	INDIVIDUAL	(608) 434-5111	Date of Birth	Race WHITE							
L N N	M	Address		Driver License Number							
⊃	N	S4158 WHISPERING PINES DR BARABOO, WI 53913 , US									
	_	BARABOO, WI 33913 , 03									
	ا	On Duty Crash		Safety Equipment							
	Sai	ety Equipment		CHOW BED A LAB BELT							
		Row Seat Po 02 - SECOND ROW 07 - LE		SHOULDER & LAP BELT							
		Helmet Use		Helmet Compliance							
		Eye Protection		Tint Compliance							
2	003	Injury Severity		Airbag							
٦	ŏ	Injury NO APPARENT IN		NON DEPLOYED		I Tanana ad Estada a tand					
		Ejection Pa NOT EJECTED NOT EJEC	UI CTED/NOT APPL	_ICABLE		Trapped/Extricated NOT TRAPPED					
		Medical Transport	-	EMS Agency Identifier		EMS Run #					
		NOT TRANSPORTED									
		Hospital		Date of Death		Time of Death					
		Distracted By Source)	1		l					
		Distracted By Action									
		Distracted by Action									
		Non Motorist Striking Unit #	Location								
		Prior Action									

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Crash Date 12/21/2022

	_											
		Action										
_	INDIVIDUAL											
LNO	JDI											
5												
	Z											
		Action Other						To/From School				
		Suspec	ted Alcohol l	Jse	Suspected Drug Use							
	L	Drug & Alcohol NO			NO							
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results					
		TEST NOT GIVEN Drug Test Given				Drug Test Results						
		TEST NOT GIVEN		9		Brag root results	•					
7	003	Drug Type										
	0											
		dividual Condition										
		APPEARED NORMAL	PPEARED NORMAL									
		ndividual										
		Passenger			Citations Issued	Sex						
	إـ	ELLA R WEGNER (608) 434-5111			0	FEMALE						
	INDIVIDUAL	(655) 161 6111			Date of Birth	Race WHITE						
LNO	M	Address			Driver License Number							
–	ND		S4158 WHISPERING PINES DR BARABOO, WI 53913 , US									
		2,40,200,111,000,10										
	0-4	On Dut	y Crash		Safety Equipment							
	Sat	fety Equipment			SHOULDER & LAP BELT							
		Row 02 - SECOND ROW	Seat P		SHOULDER & LAF	RELI						
		Helmet Use			Helmet Compliance							
		Tvo Protection			Tito							
		Eye Protection			Tint Compliance							
5	004	Injury S	Severity		Airbag							
_	0	Injury NO AI	PPARENT I	NJURY	NON DEPLOYED		Trapped/Extricated					
		NOT EJECTED		CTED/NOT APPL	ICABLE		NOT TRAPPED					
		Medical Transport	1		EMS Agency Identifier	r	EMS Run #					
		NOT TRANSPORTED Hospital			Date of Death		Time of Death					
		Поэрна			Date of Death		Time of Death					
		Distracted By Distract	ted By Sourc	е	-		-					
		Distracted By Action										
		Non Motorist	Unit#	Location								
		Prior Action										

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		Action								
		7100011								
	_									
	INDIVIDUAL									
╘	7									
UNIT	₹									
_	՝									
	Z									
										1
		Action Other								To/From School
		Drug & Alcohol NO	spected Alcohol U	lse	Suspected Drug Use NO					
	-		,		_					
		Alcohol Test Given		Alcohol Test Typ	De .			Alcohol Tes	Results	
		TEST NOT GIVEN								
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug T	est Results	5		
01	004	Drug Type								
0	ŏ									
		1 11 10 111								
		Individual Condition								
		APPEARED NORMAL								
•	llni	t Summary								
	Unit	Status			Vehicle Operating As Classi	fication		Unit Type		
		RANSIT			D CLASS			TRUCK		
		cle Type			DOLAGO			Operating A	s Endorser	nents
02		LITY TRUCK/PICKUP 1	BIICK					Operating A	3 LIIGOI3EI	nents
			Train/Bus # Re	corded	Total # Citations Issued		Total Trail	ere	Total Haz	Mat Types
						0	1015		wat Types	
	1		Direction Of Tra		Co and Lin		nit	0 Total Lane	20	
		rance?			- Fie Clasiffie			TIIL		es
=	YES		NOT ON ROA		Mark N/A		1-	2		
UNIT		t Harmful Event: Collision V			Special Function NO SPECIAL FUNCTION			Emergency Motor Vehicle Use NOT APPLICABLE		
		TOR VEH IN TRANSPO	PRI					Traffic Control Inoperative/Missing		
		ic Way	E DOODEDTY		Traffic Control			NO		
		KING LOT OR PRIVAT	E PROPERTY		NO CONTROL					
		ace Type			Road Curvature			Road Grade		
		ACKTOP (BITUMINOUS	5)		STRAIGHT			LEVEL		
		k Bus or HazMat								
	NO									
	,	Vehicle								
		License Plate Number			Plate Type		St	Country of Is	suance	
		NP9732			LTK - LIGHT TRUCK		WI	UNITED ST	ATES	
~	٠.	Vehicle Identification Num	ber		Make		Year	Model		
02	02	3TMLU4EN8DM10751	0		TOYOTA		2013	TACOMA		
		Color			Body Style			Bus Use		
		BRO - BROWN			PK - PICKUP					
	Щ	Initial Contact Point			Vehicle Damage					
╘	占	06 - REAR								7 8 9 10 11
UNIT	Ĭ	Extent Of Damage			06 - REAR					6 2 12
_	VEHICL	MINOR DAMAGE								5 4 3 2 1
		Towed Due To Damage			Vehicle Removed By				I	
		NOT TOWED			OWNER					
		What Driver Was Doing			Vehicle Factors					
		BACKING								
		Driver Prior Action Other			NOT APPLICABLE					

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							`	,					
		Driver Actions		_									
	Щ	LOOKED BUT DID	NOT SE	E									
╘	VEHICL												
LNO	Ĭ												
ر ر	Œ	<u> </u>											
	>												
		2 11			To 4.11								
		Owner Name DAVID OGREN			Owner Address	OW DD							
7	02				S4597B HIGHLO								
05	0	(608) 393-3347			ROCK SPRING	S, WI 53961 , US							
		Sequence Of Ev	vonte										
		Event	VEIILO										
	01	MOTOR VEH IN TI	RANSPO	RT									
	02	Event											
	0												
	~	Event											
	03												
		Event											
	04	ဝိ											
	Policy Holder												
╘	Policy Holder												
LIND		Insurance Company			Individual								
_		CINCINNATI-INS-C	CO,-THE		DAVID OGREN								
		Individual											
		Driver			Citations Issued	Sex							
		DAVID OGREN (608) 393-3347				MALE							
	1				0								
	'n	(000)			Date of Birth	Race WHITE							
╘╽	₽					WHILE							
	INDIVIDUAL	Address			Driver License Numb	per							
_		S4597B HIGHLOW		110	STATE: WISCON	CINI COUNTRY, UN	ITED STATES						
	=	ROCK SPRINGS,	WI 53961	, 05	STATE. WISCON.	SIN COUNTRY: UN	ILED STATES						
	_ '		On Duty C	Crash	Safety Equipment								
	Sat	ety Equipment											
		Row		Seat Position	SHOULDER & LAP BELT								
		01 - FRONT ROW		07 - LEFT									
		Helmet Use		V. 22	Helmet Compliance								
		Tiennet 03e			Tielinet Compilance								
		Eye Protection			T' 10 "								
		Eye Protection			Tint Compliance								
			Indiana Carr	:.t .	Aint								
02	900	Injury	Injury Sev	enty	Airbag								
	0			ARENT INJURY	NON DEPLOYED								
		Ejected		jection Path			Trapped/Extricated						
		NOT EJECTED	1	NOT EJECTED/NOT APPL	LICABLE		NOT TRAPPED						
		Medical Transport			EMS Agency Identific	er	EMS Run #						
		NOT TRANSPORT	ED										
		Hospital			Date of Death		Time of Death						
	Distracted By Source												
	Distracted By NOT APPLICABLE (NOT DISTRACTED)												
	Distracted By Action												
		NOT DISTRACTED)										
			Striking U	nit # Location									
		Non Motorist	Juking U	IIII T LOGALION									
		Prior Action											

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LINO	INDIVIDUAL	Action					T-War Orbert
		Action Other					To/From School
	L	Orug & Alcohol NO		Suspected Drug Use NO			
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type			Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results		
02	002	Drug Type					
		Individual Condition APPEARED NORMAL					