WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 01/10/2023

Document Number Override	Primary Crash Document# Crash Time 07:17 AM		23-00324 DEP Date Arrived Time			vestigating Officer/Deputy EPUTY J. GREENWOOD			
Crash Date 01/10/2023					Time Arrived 07:32 AM				
Date Notified 01/10/2023	Time Notified 07:19 AM		Total∪ 02	Total Units 02			Total Killed	1	
On Emergency Hi	and Run	Lane Closu		☐ Work Zone	Trailer	or To	owed	Reporting Threshold	
Government Property	Active Sc	hool Zone	School NO	Bus Related	Tags				
▼ Reportable	Crash Type DT4000 (STA	NDARD CRASH)		Amend	ied		Secondary Crash	
Description Diagram						_	onstruction		
		USH 14	Drivev Parkir			Addit	os By PUTY GRI	EENWOOD	
Not to :	Scale								
UNIT 1 WAS EB USH 14 AND ATTE AVOID THE CRASH AND WAS UNA	MPTED TO ENTE					NIT 2 V	VAS WB US	SH 14 AND TRIED TO	

Location

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٠	ON USH14 EB 708 FT E OF STH60 EB			Latitude 43.1881 X Coordir			-90.067	7611478	
	IN THE TOWN OF SPRING IN SAUK COUNTY	GREEN		250720.			4786282		
				Structure NO STR	Type UCTURE				
(Crash Scene								
]	FirstHarmfulEvent MOTOR VEH IN TRANSPO	PT.		First Harn	nfulEventL	ocation			
	Manner of Collision	T. I		LightCon					
	01 - ANGLE			DAWN					
	Road Surface Condition(s)			Roadway	/Factor(s)				
	ICE								
	Environment Factor(s)								
	WEATHER CONDITIONS			NONE					
	Weather Condition(s)								
	FREEZING RAIN OR FREEZ	ZING DRIZZLE, FOG							
	Animal Type				To Trafficwa	•			
	Crash Classification - Location				TRAFFICWAY - ON ROAD Crash Classification - Jurisdiction				
	PUBLIC PROPERTY			NO SPE	CIAL JUR	ISDICTION			
	Tribal Land			Access Control NO CONTROL			Special Stud		
		Junction Location		ntersection Type					
Į		NON-JUNCTION	N	IOT AN INTERSE	CTION				
_	Unit Summary Unit Status		Vehicle Opera	ting As Classification	2	UnitType			
	IN TRANSIT		B CLASS	ang / to oldoomodato,	•	TRUCK			
-	Vehicle Type						Operating As Endorsements		
,	STRAIGHT TRUCK (INSER	T TRUCK) Train/Bus#Recorded	Total#Citation	an length of	Total Trai	lore	Total Har	zMat Types	
		Train/Dus#Trecolded		is issued	1	1015		Ziviat i ypes	
	1		0		0		0		
.	1 Insurance?	Direction Of Travel		ashTire	Speed Li	mit	TotalLan	nes	
,	1 Insurance? YES	EASTBOUND	Pre Cra	ark			Total Lan		
	1 Insurance? YES Most Harmful Event: Collision W MOTOR VEH IN TRANSPO	EASTBOUND /ith	Pre Cra Ma	ark	Speed Li	Emergency	TotalLan 2 MotorVeh	nicle Use	
	1 Insurance? YES Most Harmful Event: Collision W	EASTBOUND /ith	Pre Cra Ma	ark on L FUNCTION	Speed Li	Emergency NOT APPL	Total Lan 2 Motor Veh ICABLE	nicle Use	
	1 Insurance? YES Most Harmful Event: Collision W MOTOR VEH IN TRANSPOR Traffic Way TWO-WAY, NOT DIVIDED Surface Type	EASTBOUND /ith RT	Pre Cra Ma Special Function NO SPECIAL Traffic Control NO CONTRO Road Curvatur	ark on L FUNCTION	Speed Li	Emergency NOT APPI Traffic Cont NO Road Grade	Total Lan 2 Motor Veh ICABLE	nicle Use :	
	1 Insurance? YES Most Harmful Event: Collision W MOTOR VEH IN TRANSPORT Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS) Truck Bus or HazMat	EASTBOUND /ith RT	Pre Cra Ma Special Function NO SPECIAL Traffic Control NO CONTRO Road Curvatur STRAIGHT	ark on L FUNCTION	Speed Li	Emergency NOT APPI Traffic Cont	Total Lan 2 Motor Veh ICABLE	nicle Use :	
	Insurance? YES Most Harmful Event: Collision W MOTOR VEH IN TRANSPOR Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS) Truck Bus or HazMat TRUCK OR TRUCK COMBI	EASTBOUND /ith RT	Pre Cra Ma Special Function NO SPECIAL Traffic Control NO CONTRO Road Curvatur STRAIGHT	ark on L FUNCTION	Speed Li	Emergency NOT APPI Traffic Cont NO Road Grade	Total Lan 2 Motor Veh ICABLE	nicle Use :	
	1 Insurance? YES Most Harmful Event: Collision W MOTOR VEH IN TRANSPORT Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS) Truck Bus or HazMat	EASTBOUND /ith RT	Pre Cra Ma Special Function NO SPECIAL Traffic Control NO CONTRO Road Curvatur STRAIGHT WR/GCWR	ark on L FUNCTION DL e	Speed Lii 45	Emergency NOT APPL Traffic Cont NO Road Grade LEVEL Country of is:	Total Lan 2 Motor Veh LICABLE rol Inopera	nicle Use :	
	Insurance? YES Most Harmful Event: Collision W MOTOR VEH IN TRANSPOI Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS) Truck Bus or HazMat TRUCK OR TRUCK COMBI Vehicle License Plate Number PB9615	EASTBOUND /ith RT) NATION > 10,000LBS GVV	Pre Cra Ma Special Function NO SPECIAL Traffic Control NO CONTRO Road Curvatur STRAIGHT WR/GCWR Plate Type HTK - HEAV	ark on L FUNCTION DL e	Speed Lii 45	Emergency NOT APPL Traffic Cont NO Road Grade LEVEL Country of Is: UNITED ST	Total Lan 2 Motor Veh LICABLE rol Inopera	nicle Use :	
	Insurance? YES Most Harmful Event: Collision W MOTOR VEH IN TRANSPOR Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS) Truck Bus or HazMat TRUCK OR TRUCK COMBITURED License Plate Number	EASTBOUND //ith RT NATION > 10,000LBS GVV	Pre Cra Ma Special Function NO SPECIAL Traffic Control NO CONTRO Road Curvatur STRAIGHT WR/GCWR	ark on L FUNCTION DL e	Speed Lii 45	Emergency NOT APPL Traffic Cont NO Road Grade LEVEL Country of is:	Total Lan 2 Motor Veh LICABLE rol Inopera	nicle Use :	
	Insurance? YES Most Harmful Event: Collision W MOTOR VEH IN TRANSPORT Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS) Truck Bus or HazMat TRUCK OR TRUCK COMBITURE OF TRUCK COMBITURE OF TRUCK COMBITURE OF TRUCK OR TRUCK COMBITURE OF TRUCK COMBITURE O	EASTBOUND //ith RT NATION > 10,000LBS GVV	Pre Cra Ma Special Function NO SPECIAL Traffic Control NO CONTRO Road Curvatur STRAIGHT WR/GCWR Plate Type HTK - HEAV Make FREIGHTLIII Body Style	ATR OT L FUNCTION DL THE OT OT OT OT OT OT OT OT OT O	Speed Lii 45 St Wi Year	Emergency NOT APPL Traffic Cont NO Road Grade LEVEL Country of Is: UNITED ST	Total Lan 2 Motor Veh LICABLE rol Inopera	nicle Use :	
	Insurance? YES Most Harmful Event: Collision W MOTOR VEH IN TRANSPORT Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS) Truck Bus or HazMat TRUCK OR TRUCK COMBITURE Vehicle License Plate Number PB9615 Vehicle Identification Num 3ALHCYD28LDLN4594 Color WHI - WHITE	EASTBOUND //ith RT NATION > 10,000LBS GVV	Pre Cra Ma Special Function NO SPECIAL Traffic Control NO CONTRO Road Curvatur STRAIGHT WR/GCWR Plate Type HTK - HEAV Make FREIGHTLII	ARK DOT L FUNCTION DL THE THE THE THE THE THE THE THE	Speed Lii 45 St Wi Year	Emergency NOT APPI Traffic Cont NO Road Grade LEVEL Country of Is: UNITED ST Model M2	Total Lan 2 Motor Veh LICABLE rol Inopera	nicle Use	
	Insurance? YES Most Harmful Event: Collision W MOTOR VEH IN TRANSPORT Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS) Truck Bus or HazMat TRUCK OR TRUCK COMBITURE Vehicle License Plate Number PB9615 Vehicle Identification Num 3ALHCYD28LDLN4594 Color WHI - WHITE	EASTBOUND //ith RT INATION > 10,000LBS GVV	Pre Cra Ma Special Function NO SPECIAL Traffic Control NO CONTRO Road Curvatur STRAIGHT WR/GCWR Plate Type HTK - HEAV Make FREIGHTLII Body Style ST - STAKE Vehicle Dama	ARK DOT L FUNCTION DL THE THE THE THE THE THE THE THE	St WI Year 2020	Emergency NOT APPI Traffic Cont NO Road Grade LEVEL Country of Is: UNITED ST Model M2	Total Lan 2 Motor Veh LICABLE rol Inopera	nicle Use :	

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23-00324

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	*******	Towed Due To Damage		Vehicle Removed By								
		NOT TOWED		OPERATOR								
		What Driver Was Doing		Vehicle Factors								
		LEFT TURN		NOT APPLICABLE								
		Driver Prior Action Other		NOT ATTEROADEE								
		Driver Actions										
	щ	SPEED TOO FAST/COND										
INI	<u>0</u>											
5	VEHICLE											
	7											
		Owner Name		Owner Address								
_		TOWN & COUNTRY SAN!	TATION INC	104 N PARK ST								
2	5			PO BOX 7 BOSCOBEL, WI 53805 , US								
		Sequence Of Events										
	5	Event MOTOR VEH IN TRANSPORT										
	8	Event										
		Event										
	8	Lyant										
	2	Event										
		Policy Holder										
INN		Insurance Company		Organization/Compar								
5		SECURA-INS-CO		TOWN & COUNTRY SANITATION INC								
		İndividual										
		Driver		Citations Issued Sex								
	4	KEVIN JAMES GRISWOLI (608) 379-4949)	0 MALE								
_	NDIVIDUAL	,		Date of Birth	Race WHITE							
LNO	2	Address		Driver License Number								
_	2	401 W CHERRY ST LANCASTER, WI 53813	110	STATE: WISCONSIN COUNTRY: UNITED STATES								
		LANCASTER, W. 55675	00	OWNER WOODING OOGHING ONLINE OWNER								
		On Duty	Crash	Safety Equipment								
	Sai	fety Equipment	0.00.7	Carety Equipment								
		Row	Seat Position	SHOULDER & LAI	P BELT							
		01 - FRONT ROW	07 - LEFT									
		Helmet Use		Helmet Compliance								
		Eye Protection		Tint Compliance								
		Injury Se	everity	Airbag								
2	8	Injury _{NO API}	PARENT INJURY	NON DEPLOYED								
		Ejected	Ejection Path	•		Trapped/Extricated						
		NOT EJECTED	NOT EJECTED/NOT AF			NOT TRAPPED						
		Medical Transport NOT TRANSPORTED		EMS Agency Identifie	er -	EMS Run#						
		Hospital		Date of Death		Time of Death						
		Distracted By NOT A	ed By Source PPLICABLE (NOT DISTE	RACTED)								
		Distracted By Action NOT DISTRACTED										
		MOIDISTRACTED										

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		Non Motorist	Striking U	Init#	Location							
		Prior Action										
UNIT	INDIVIDUAL	Action										
		Action Other									Т	o/From School
	L	Drug & Alcohol	Suspecte NO	d Alcohol U	se	Suspe NO	ected Drug Use					
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test 7	уре				Alcohol Test	Results	
		Drug Test Given TEST NOT GIVEN			Drug Test Typ	e		Drug To	est Results			
10	001	Drug Type										
		Individual Condition										
		APPEARED NORMAL										
	Carrier Use Vehicle Owner Same as Carrier					Source DRIVER						
10	10	Name TOWN & COUI USDOT# 49558		SANITAT	FION INC	Address 104 N PARK ST PO BOX 7 BOSCOBEL, WI 53805, US						
_	BUS				onfiguration UNIT TRUCK	(3 OR MC	DRE AXLES)		- 1	o Body Type	ISE	
UNIT		US DOT# Carrier Ty							Permitted Load NOT APPLICABLE			
	TRUCK	OS/OW Load W! Permit Number		Number	Permitted Vehicle Permitted Route					icle Required Permit		cort Vehicle Present
		Measured Height		Measu	red Length		Measured Wid	th		Measured We	eight	
	Uni	t Summary										
		Status RANSIT				Vehicle O	perating As Clas S	sification		UnitType AUTOMOB	ILE	
05		cle Type DRT) UTILITY VEHI	CLE							Operating As Endorsements		
	2	lOccs		n/Bus#Re		Total#Cit	tations Issued		Total Traile 0	i	Total HazMa 0	tTypes
E	YES		WE	ction Of Tra STBOUNI			e CrashTire Mark		Speed Lim 45		TotalLanes 2	
TINO		:HarmfulEvent:Collisio				Special F	unction CIAL FUNCTION	ON		Emergency Motor Vehicle Use NOT APPLICABLE		
	TWO	ic Way D-WAY, NOT DIVIDI	ĒD			Traffic Co	ITROL			Traffic Control Inoperative/Missing		
	Surface Type BLACKTOP (BITUMINOUS)				Road Curvature STRAIGHT			Road Grade LEVEL				

Crash Date 01/10/2023
Crash Time 07:17 AM

6TL0B3P3JM

23-00324

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	Truc	sk Bus or HazMat							
		License Plate Number ASE3293		Plate Type AUT - AUTOMOBILE	St WI	Country of issuance UNITED STATES			
05	8	Vehicle Identification Number KL7CJPSB2MB343594	I	Make CHEVROLET	Year 2021	Model TRAX			
	ш	Color GRY - GRAY Initial Contact Point 07 - LEFT REAR CORNER Extent Of Damage MINOR DAMAGE		Body Style UT - SPORT UT!L!TY \ Vehicle Damage	VEHICLE	Bus Use			
UNIT	VEHICLE			7 8 9 10 H					
		Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR						
		What Driver Was Doing GOING STRAIGHT Driver Prior Action Other	Vehicle Factors						
LIND	VEHICLE	Driver Actions NO CONTRIBUTING ACTION	i						
05	02	OwnerName LUKAS SCOTT MELVIN (608) 739-2832		Owner Address 134 E FOREST ST LONE ROCK, WI 5					
	5	Sequence Of Events Event MOTOR VEH IN TRANSPOR							
	2	Event Event	1						
	ာ စ	Event							
	8	Event							
=		Policy Holder							
S		Insurance Company PROGRESSIVE-CLASSIC-IN	s-co	Individual LUKAS MELVIN					
	4	Driver LUKAS SCOTT MELVIN (608) 739-2832		Citations Issued 0	Sex MALE				
⊨	3	(000,7700 2002		Date of Birth	Race WHITE				
TINO	INDIVIDUAL	Address 134 E FOREST ST # 35 LONE ROCK, WI 53556, US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sa	On Duty Cre fety Equipment	ash	Safety Equipment					
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT					
Helmet Use Helmet Compliance									

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				17.40								
	Eye Protection			Tint Compliance								
62	65	Injury Se	everity PARENT I	NJURY	Airbag NON DEPLOYED							
		Ejected NOT EJECTED	Ejection Pa	ith CTED/NOT APPL	Trapped/Ext PLICABLE NOT TRAF							
		Medical Transport			EMS Agency Identifier		EMS Run#					
		NOT TRANSPORTED Hospital			Date of Death							
			15.0									
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED) Distracted By Action											
NOT DISTRACTED												
		Non Motorist	Unit#	Location								
		Prior Action										
		Action										
	¥											
LINI	INDIVIDUA											
5	20											
	Z											
		Action Other			To/From School							
	1	Suspected Alcohol Use Drug & Alcohol NO			Suspected Drug Use NO							
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	Alcohol Test Type		Alcohol TestResults					
				Drug Test Type	.g TestType							
 	~		:N									
05	80	Drug Type										
		Individual Condition										
		APPEARED NORMAL										
		Individual										
	Ш	Passenger MIKALAH BROOKE MELV	'IN		Citations issued 0	Sex FEMALE						
_	NDWIDUA	(608) 459-0996			Date of Birth	Race WHITE						
Š	Z	Address 134 E FOREST ST # 35			Driver License Number							
	Z	LONE ROCK, WI 53556	US		STATE: WISCONSIN	I COUNTRY: UNI	TED STATES					
	Sai	ety Equipment On Duty	Crash		Safety Equipment							
		Row 01 - FRONT ROW	Seat Po		SHOULDER & LAP I	BELT						
		HelmetUse	1		Helmet Compliance							
		Eye Protection			Tint Compliance							
					,							

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02	Injury Severity NO APPARENT INJURY				Airbag NON DEPLOYED						
		Ejected NOT EJECTED	Ejection Pa	th CTED/NOT APPL	ICABLE		Trapped/Extricated NOT TRAPPED				
		Medical Transport NOT TRANSPORTED	•		EMS Agency Identifier						
		Hospital			Date of Death		Time of Death				
		Distracted By Distract	ted By Source	•	•						
		Distracted By Action									
		Non Motorist Striking	J Unit#	Location							
		Prior Action	Prior Action								
TINO	INDIVIDUAL	Action									
		Action Other						To/From School			
	1	Drug & Alcohol NO	cted Alcohol U		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	683	Drug Type									
		Individual Condition APPEARED NORMAL									