6TL0D1PTN3 23-01142

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | Document Number Override | Primary Crash Document# | Agenc 23-01 | y Crash Number 142 | | _ | icer/Deputy ESSNER | |
|-------------------|---|---|--|--|---|--------------|---|--|
| N3 | Crash Date 02/03/2023 | Crash Time 02:59 PM | Date A 02/13/ | | Time Arri | | | |
| 1РТ | Date Notified 02/13/2023 | Time Notified 04:26 PM | Total U 01 | nits | Total Inju 00 | red | Total Killed | d |
| 6TL0D1PTN3 | On Emergency Hit | and Run Lane Close | ıre | ☐ Work Zone | Trai | ler or | Towed | Reporting Threshold |
| 9 1 1 | Government Property | Active School Zone | School NO | Bus Related | Tags | | | • |
| | Reportable | Crash Type PRIVATE PROPERTY/PARKI | NG LO | Г | Ame | nded | | Secondary Crash |
| | Description Diagram | | | | | I Ra | construction | a Rv |
| | Driveway of S6382 U | 0.40 | | (| \$ | Ph DE | otos By FP. S. MES | SNER |
| | U1 | Bird bath with house wellf underneath U1 Unit 1 enters driveway, turns and strikes the bird bath and hold well. Unit 1 then leaves. | | | | Ad Ph | ditional Infor | rmation |
| | ON 2/3/2023 AT APPROXIMATELY 2 WHILE MAKING A U-TURN IN THE I LEFT THE SCENE. THE OWNER OF JUSTIN REPORTED THE MATTER | nt officer, agree that I have no 2:59 PM, TYLER C. BRESCIA WAS O DRIVEWAY, UNIT 1 STRUCK A CON- THE PROPERTY REPORTED THE I TO THE BARABOO POST OFFICE. II PPERTY, I MADE CONTACT WITH BA THE INCIDENT. | PERATIN CRETE B MATTER, RESPONE | G A USPS LLV, UNIT 1. L IRD BATH AND RAN OVE JUSTIN T. BEARD. THE I DED TO THE SCENE, PHO | INIT 1 ENTERE R THE HOUSE INCIDENT WAS OTOGRAPHING | WELL OBSE | TO THE PRO RVED BY JU SCENE, JUST | OPERTY. UNIT 1 THEN ISTIN ON RING CAMERA. TIN DID NOT KNOW THE |

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Location

PRIVATE PROPERTY

WISCONSIN MOTOR VEHICLE CRASH REPORT

Latitude

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

Crash Time 02:59 PM

Longitude

| S6382 USH12 WB | | | | 43.41348654 | 7 | -89.7 | 72033646 | |
|---|-------------------------------|-----------------------------------|---------------------------|---|------------------|-------------------------------------|---------------------|--|
| (FIRE S6382) | | | | X Coordinate | - | l l | rdinate | |
| IN THE TOWN OF SUM | PTER | | 275572.09375 | | 5 | 4810 | 466 | |
| IN SAUK COUNTY | | | Structure Type FIRE | | | | | |
| Crash Scene | | | | 1 | | | | |
| First Harmful Event | | | | First Harmful E | conti continu | | | |
| OTHER FIXED OBJECT | | | | OFF ROADW | | ON UNKNO | WN | |
| Manner of Collision | | | | Light Condition | , | | | |
| 00 - NO COLLISION W/\ | EHICLE IN TRANSPORT | | | | DAYLIGHT | | | |
| Road Surface Condition(s) | | | | Roadway Fact | or(s) | | | |
| DRY | | | | | | | | |
| Environment Factor(s) | | | | | | | | |
| NONE | | | | | | | | |
| Weather Condition(s) | | | | | | | | |
| CLOUDY | | | | | | | | |
| Animal Type | | | | Relation To Trafficway | | | | |
| | | | | NON TRAFFICWAY - OTHER | | | | |
| Crash Classification - Locati | on | | | Crash Classification - Jurisdiction | | | | |
| PRIVATE PROPERTY Tribal Land | | | | | PRIVATE PROPERTY | | | |
| Tibarcand | | | | Access Control Special Study NO CONTROL | | | Special Study | |
| Within Interchange Area | Junction Location | | Intersection | | | | _ I | |
| NO | NON-JUNCTION | N NOT AN | | | NINTERSECTION | | | |
| Unit Summary - | | | | | | | | |
| Unit Status Vehicle Operating As C | | | | Classification | UnitTy | • | | |
| Vehicle Type | | | | CLASS | | TRUCK Operating As Endorsements | | |
| (SPORT) UTILITY VEHIC | CLE | | | | Operat | ing As Endon | 56111611165 | |
| Total Occs | Train/Bus#Recorded | Total#Cita | Citations Issued Total Tr | | al Trailers | TotalH | azMat Types | |
| 1 | | 0 | 0 | | | 0 | | |
| Insurance? YES | Direction Of Travel WESTBOUND | Pre ✓ | CrashTire | | ed Limit | | TotalLanes 0 | |
| Most Harmful Event: Collisio | | Special Fur | Mark nction | N/A | | ency Motor V | ehicle Use | |
| OTHER FIXED OBJECT | | | | TION | NOT APPLICA | | CABLE | |
| Traffic Way | | | | | Traffic | Traffic Control Inoperative/Missing | | |
| PARKING LOT OR PRIV | | NO CONTROL | | NO | | | | |
| Surface Type BLACKTOP (BITUMINO | | Road Curvature STRAIGHT | | Road Grad | | | | |
| Truck Bus or HazMat | STRAIGH | - | | LEVE | _ | | | |
| NO | | | | | | | | |
| ···· Vehicle | | | | | ****** | | | |
| License Plate Number | | Plate Type | Plate Type | | Country | Country of Issuance | | |
| | | | 26-1 | | | Model | | |
| | | 3.61 | | 11/ | | | | |
| Vehicle Identification N | | Make GM | | Yea 190 | l l | | | |
| る 1GBCS10A6N2918 | | GM | | Yea 199 | 2 LLV | . | | |
| | | | | | l l | 1 | | |
| Color WHI - WHITE Initial Contact Point | | GM Body Style | ł . | | 2 LLV | · | 7. 8 9 10 H | |
| Color WHI - WHITE Initial Contact Point | | GM Body Style 2D - 2DR Vehicle Da | amage | | 2 LLV | | 7 8 9 10 11 6 12 | |
| Color WHI - WHITE Initial Contact Point | | GM Body Style 2D - 2DR Vehicle Da | ł . | | 2 LLV | 2 | | |

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

Crash Date 02/03/2023

Crash Time 02:59 PM

| | | Towed Due To Damage | | Vehicle Removed By | | | | | | | | | |
|-----------|--------------|--|---|--|--------------------------------|---|--|--|--|--|--|--|--|
| | | NOT TOWED | | OPERATOR Webiele Feeben | | | | | | | | | |
| | | What Driver Was Doing U TURN | | Vehicle Factors | | | | | | | | | |
| | | Driver Prior Action Other | | NOT APPLICABLE | | | | | | | | | |
| | | Diver From Addition Other | | TO LAIL EVANEE | | | | | | | | | |
| LINI | VEHICLE | Driver Actions OPERATED MOTOR VEHI | CLE IN INATTENTIVE, C | ARELESS OR ERRATIC MANNER | | | | | | | | | |
| 7 | 5 | Owner Name UNTIED STATES POSTAL | SERVICE | Owner Address 303 BROADWAY STREET BARABOO, WI 53913 , US | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | Sequence Of Events | | | 161161161161161161161161 | | | | | | | | |
| | 5 | OTHER FIXED OBJECT | | | | | | | | | | | |
| | 8 | Event OTHER FIXED OBJECT | | | | | | | | | | | |
| | 8 | Event | | | | | | | | | | | |
| | 2 | Event | | | | | | | | | | | |
| | | Policy Holder | | | | | | | | | | | |
| INN | | Insurance Company | | Government | | | | | | | | | |
| 5 | | SELF-INSURED | | UNTIED STATES POSTAL SERVICE | | | | | | | | | |
| | 32423333 | | | | | Individual | | | | | | | |
| | | Individual | | | | | | | | | | | |
| | | Individual Driver TYLER CHASE BRESCIA | | Citations Issued | Sex MALE | | | | | | | | |
| | | Driver | | I | | | | | | | | | |
| HI | | Driver TYLER CHASE BRESCIA | | 0 Date of Birth | MALE Race WHITE | | | | | | | | |
| TINO | | Driver TYLER CHASE BRESCIA Address 620 4TH AVE | | 0 | MALE Race WHITE | TED STATES | | | | | | | |
| TINO | INDIVIDUAL | Driver TYLER CHASE BRESCIA Address | 3 | O Date of Birth Driver License Number | MALE Race WHITE | TED STATES | | | | | | | |
| TINO | INDIVIDUAL | Driver TYLER CHASE BRESCIA Address 620 4TH AVE BARABOO, WI 53913 , US | | O Date of Birth Driver License Number | MALE Race WHITE | TED STATES | | | | | | | |
| TINO | INDIVIDUAL | Driver TYLER CHASE BRESCIA Address 620 4TH AVE BARABOO, WI 53913 , US | | Driver License Number STATE: WISCONSII Safety Equipment | MALE Race WHITE N COUNTRY: UNI | TED STATES | | | | | | | |
| TINO | INDIVIDUAL | Driver TYLER CHASE BRESCIA Address 620 4TH AVE BARABOO, WI 53913 , US | | Driver License Number | MALE Race WHITE N COUNTRY: UNI | TED STATES | | | | | | | |
| TINO | INDIVIDUAL | Driver TYLER CHASE BRESCIA Address 620 4TH AVE BARABOO, WI 53913 , US fety Equipment Row | Crash Seat Position | Driver License Number STATE: WISCONSII Safety Equipment | MALE Race WHITE N COUNTRY: UNI | TED STATES | | | | | | | |
| TINO | INDIVIDUAL | Driver TYLER CHASE BRESCIA Address 620 4TH AVE BARABOO, WI 53913 , US fety Equipment Row 01 - FRONT ROW | Crash Seat Position | Date of Birth Driver License Number STATE: WISCONSI Safety Equipment SHOULDER & LAP | MALE Race WHITE N COUNTRY: UNI | TED STATES | | | | | | | |
| | S INDIVIDUAL | Driver TYLER CHASE BRESCIA Address 620 4TH AVE BARABOO, WI 53913 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection | Crash Seat Position 07 - LEFT | Driver License Number STATE: WISCONSI Safety Equipment SHOULDER & LAP Helmet Compliance | MALE Race WHITE N COUNTRY: UNI | TED STATES | | | | | | | |
| UNIT UNIT | INDIVIDUAL | Address 620 4TH AVE BARABOO, WI 53913 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Injury Se | Crash Seat Position 07 - LEFT Everity PARENT INJURY | Driver License Number STATE: WISCONSI Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance | MALE Race WHITE N COUNTRY: UNI | | | | | | | | |
| | S INDIVIDUAL | Driver TYLER CHASE BRESCIA Address 620 4TH AVE BARABOO, WI 53913 , US FETY Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Ejected | Crash Seat Position 07 - LEFT | Driver License Number STATE: WISCONSI Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED | MALE Race WHITE N COUNTRY: UNI | Trapped/Extricated NOT TRAPPED | | | | | | | |
| | S INDIVIDUAL | Address 620 4TH AVE BARABOO, WI 53913 , US fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Se NO APF Ejected NOT EJECTED Medical Transport | Seat Position 07 - LEFT Everity PARENT INJURY Ejection Path | Driver License Number STATE: WISCONSI Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED | MALE Race WHITE N COUNTRY: UNI | Trapped/Extricated | | | | | | | |
| | S INDIVIDUAL | Address 620 4TH AVE BARABOO, WI 53913 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Se Injury NO APP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED | Seat Position 07 - LEFT Everity PARENT INJURY Ejection Path | Driver License Number STATE: WISCONSH Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier | MALE Race WHITE N COUNTRY: UNI | Trapped/Extricated NOT TRAPPED EMS Run# | | | | | | | |
| | S INDIVIDUAL | Driver TYLER CHASE BRESCIA Address 620 4TH AVE BARABOO, WI 53913 , US FOR Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Se NO APF Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital | Seat Position 07 - LEFT everity PARENT INJURY Ejection Path NOT EJECTED/NOT APP | Driver License Number STATE: WISCONSII Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED | MALE Race WHITE N COUNTRY: UNI | Trapped/Extricated NOT TRAPPED | | | | | | | |
| | S INDIVIDUAL | Driver TYLER CHASE BRESCIA Address 620 4TH AVE BARABOO, WI 53913 , US FOR Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Se NO APF Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital | Crash Seat Position 07 - LEFT Everity PARENT INJURY Ejection Path NOT EJECTED/NOT APP | Driver License Number STATE: WISCONSII Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier Date of Death | MALE Race WHITE N COUNTRY: UNI | Trapped/Extricated NOT TRAPPED EMS Run# | | | | | | | |

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

Crash Date 02/03/2023

Crash Time 02:59 PM

| l | | | Striking Unit# | Location | | | | | | | |
|-------------------------|--|---|---------------------|-------------------|--|---------|-------------------------|-------------------|--|--|--|
| | | Non Motor | ist | | | | | | | | |
| | | Prior Action | Ministrativitie 1 | ı | | | | | | | |
| | | A -4: | | | | | | | | | |
| | | Action | | | | | | | | | |
| | 4 | | | | | | | | | | |
| <u></u> | Ĭ | | | | | | | | | | |
| UNIT | 3 | | | | | | | | | | |
| _ | NDWDVAL | | | | | | | | | | |
| | = | | | | | | | | | | |
| | | | | | | | | | | | |
| | | Action Other | | | | | | To/From School | | | |
| | | | Suspected Alcohol U | lse | Suspected Drug Use | | | | | | |
| | Ĺ | Drug & Alcol | NO NO | | NO | | | | | | |
| | | Alcohol Test Given | | Alcohol Test Type | | | Alcohol Test Results | | | | |
| | | TEST NOT GIVEN | | Drug Test Type | Dwg Task Basylli | | | | | | |
| | | Drug Test Given TEST NOT GIVEN Drug Test Type | | Diag restrype | Drug Test Result | | | | | | |
| 01 | 001 | Drug Type | | | | | | | | | |
| | | | | | | | | | | | |
| | | Individual Conditi | on | | | | | | | | |
| | | NOT OBSERVE | ĒD | | | | | | | | |
| | | roperty Owner | | | | | | | | | |
| | | <u> </u> | er ===== | | A d d | | | | | | |
| 01 | | ridual STIN T BEARD | | | Address S6382 US HIGHWAY 1 | 2 | | | | | |
| PROP OWNER | (608 | 3) 963-4037 | | | BARABOO, WI 53913 | , us | | | | | |
| | | | | | | | | | | | |
| | FIXE | Fixed Objects Struck | | | | | | | | | |
| | Striking Unit Struck Object OTHER FIXED OBJECT | | | | | | Damage Tag Number NA | | | | |
| l | | | | | | | | | | | |
| Property Owner Address | | | | | | | | | | | |
| , 02 | JUS (608 | ridual STIN T BEARD 3) 963-4037 | | | Address S6382 US HIGHWAY 1 BARABOO, WI 53913 | 2 US | | | | | |
| PROP OWNER | ,,,,, | ,, 000 400, | | | Driving of the cools | , 55 | | | | | |
| | Eiwa | ed Objects S | Tueral | | | | | 8 | | | |
| | | Striking Unit | Struck Object | | | | Structure Number [| Damage Tag Number | | | |
| | 8 | 01 | OTHER FIXED OBJE | СТ | | | | NA | | | |
| | | S | | | | | | | | | |