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 23-024	Crash Number 62		Investigating Officer/Deputy SERGEANT T. CLAUER						
ם כ	Crash Date 03/12/2023	Crash Time 10:50 AM		Date Ar 03/12/2		Time Arrived 10:57 AM							
9	Date Notified	Time Notified		Total U	nits	Total Injured	I	ed					
ŏ	03/12/2023	10:50 AM		02		02	00						
ב ק	On Emergency Hi	t and Run	Lane Clos		☐ Work Zone		or Towed	Reporting Threshold					
	Government Property	Active Sch	nool Zone	School NO	Bus Related	Tags							
	Reportable	Crash Type DT4000 (STA	NDARD CRASH	l)		Amend	Amended						
	Description	scription											
	Diagram		Photos By SGT CLAUER										
							55,52,52.						
			4				Additional Information PHOTOS						
		S Lake Rd	······································										
	[U2]	Tu)	Tun,										
	Not to Sca	ale											
	▼ I, a sworn law enforceme	ent officer, agre	e that I have n	ot added	I any CJIS data in ti	nis report.							
	UNIT ONE WAS A MARKED DNR V LAKE RD WITH EMERGENCY LIGH UNIT TWO PULLED TO THE SIDE OF TWO BACKWARDS FOR AN EXTEN PORTION OF THE ROADWAY INTO	ITS ACTIVATED. UI OF THE ROAD AND NDED DISTANCE B	NIT TWO WAS TR STOPPED. UNIT EFORE UNIT ONE	AVELING ONE DRO CAME U	WEST ON SLAKE RD A IVE DIRECTLY HEAD OI NATTACHED FROM UNI	ND OBSERVED T N INTO UNIT TWO T TWO. AT THIS	HE MARKED DI). UNIT ONE CO TIME UNIT ONE	NR UNIT APPROACHING. INTINUED TO PUSH UNIT RAN OFF THE PAVED					

REFUSED MEDICAL TREATMENT AT THIS TIME HOWEVER HAD LEG INJURIES. VEHICLES WERE REMOVED FROM THE SCENE BY CRAIGS TOWING.

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Crash Date 03/12/2023

Crash Time 10:50 AM

L	_ocation 											
ſ	ON S LAKE RD 345 FT W		Latitude 43.40764	41148		Longitu -89.72	de 2385515					
	OF DEVIL'S LAKE STATE IN THE TOWN OF SUMPT IN SAUK COUNTY				-	X Coordin 279570.0	dinate 84.5					
	M DAGN COOK!					Structure Type NO STRUCTURE						
(Crash Scene											
Ī	First Harmful Event					First Harmful Event Location						
	MOTOR VEH IN TRANSPO	ORT				ON ROADWAY						
ſ	Manner of Collision					Light Condition						
ļ	02 - FRONT TO FRONT	DAYLIGHT										
	Road Surface Condition(s) SNOW	Roadway	Factor(s)									
ŀ	Environment Factor(s)											
	NONE					NONE						
ŀ	Weather Condition(s)											
	CLOUDY											
ŀ	Animal Type			Relation To Trafficway TRAFFICWAY - ON ROAD								
ŀ	Crash Classification - Location					Crash Classification - Jurisdiction						
	PUBLIC PROPERTY					NO SPE	CIAL JUR	SDICTION				
	TribalLand				Access Control Special Study NO CONTROL Ion Type I INTERSECTION							
	Within Interchange Area NO			Intersection								
ľ	Closure Type			Reasons for Closure								
	FULL CLOSURE											
	Date Initial Lane/Rd Closed 03/12/2023	Time Initial Lane/Rd Clos	ed	LAW ENFORCEMENT								
Ī	Date All Lanes Open	Time All Lanes Open		l	Scene Cleare	ed		ne Scene Clea	ared			
ļ	03/12/2023	12:00 PM		03/12	2/2023		12	:00 PM				
_	Jnit Summary Unit Status		I \/ehi	icle One	erating As Cla	accification	.	UnitType				
	STOLEN			LASS	riading As Oil	255111021011	•	TRUCK				
ĺ	Vehicle Type			Operating As Endorsements								
ļ	UTILITY TRUCK/PICKUP											
	Total Occs 01	Train/Bus#Recorded	Tota 05	Total#Citations Issued			Total Traile		l otalHa:	zMat Types		
ŀ	Insurance?	Direction Of Travel		Pre	CrashTire					nes		
L	YES	***************************************		Mark	25		02					
	Most Harmful Event: Collision V MOTOR VEH IN TRANSPO		cial Fun SPEC	iction IAL FUNCT	TION		Emergency Motor Vehicle Use EMERGENCY OPERATOR, EMERGENC					
Ī	Traffic Way		fic Cont				Traffic Control Inoperative/Missing					
ļ	· ·				ROL			NO				
					d Curvature Road Grade							
ŀ	Truck Bus or HazMat	-						1				
_	Vehicle											
\$00mm(m)	License Plate Number		l Dia	te Type			St	Country of le	suance			
- Section (E9907				JNICIPAL C	'						
Section Section 1	Vehicle Identification Nun	nber	Mai				Year	Model				
5 1FTFX1E89MFB80477 FORD						2021 F150						

UNIT

6TL0B8M80B

23-02462

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Crash Date 03/12/2023

		Color		Bo	Body Style Bus Use							
		BLK - BLACK		Pi	(- PICKUP							
	Щ	Initial Contact Point		Ve	Vehicle Damage 7.8 9 10 10							
NS.	ō	12 - FRONT			01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE							
🗲	VEHIC	Extent Of Damage			FRONT, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT							
	5	DISABLING DAMAGE			ORNER, 12 - FROM	4 I						
		Towed Due To Damage			hicle Removed By							
		TOWED DUE TO DISABI	LING DAMAGE		RAIGS TOWING							
		What Driver Was Doing		Ve	Vehicle Factors							
		GOING STRAIGHT		No	NOT APPLICABLE							
		Driver Prior Action Other		"	HO I ALL ELONDEE							
		Driver Actions										
	111		SPEED TOO FAST/COND, FAILURE TO CONTROL, FAILED TO KEEP IN DESIGNATED LANE, OPERATED MOTOR VEHICLE IN									
⊢	VEHICLE	AGGRESSIVE/RECKLES										
	Ĭ											
_	Щ											
		Owner Name			Owner Address							
_		WISCONSIN DEPARTME	NT OF NATURAL		S7560 USH 12 BLDG 207							
2	5	RESOURCES (608) 963-7332			NORTH FREEDOM, WI 53951 , US							
		1000,000										
		Sequence Of Events										
		Event										
	5	MOTOR VEH IN TRANSPORT										
	8	Event										
	•	DITCH										
	8	Event										
	3	Event										
l⊨		Policy Hölder										
		Insurance Company	CELE INCLINED		Government	DTMENT OF NA						
-		STATE OF WISCONSIN	SELF INSURED		WISCONSIN DEPA	RINENIOFNA	URAL RESOURCE	E8				
		Individual										
		Driver			Citations issued Sex							
		DARRICK J DESIDERIO (608) 477-3407		ļ	05 MALE							
	DUA	(,			Date of Birth	Race WHITE						
Ę		A 1.1										
5	NON	Address 232 WATER STREET		l	Driver License Number							
	Z	BARABOO, WI 53913 , I	US	[STATE: WISCONSIN COUNTRY: UNITED STATES							
		l On Du	ty Crash		Safety Equipment							
	Sai	ety Equipment	¥		duraty Equipment							
		Row	Seat Position		NONE USED - VEH	HCLE OCCUPANT	-					
		01 - FRONT ROW	07 - LEFT									
		HelmetUse			Helmet Compliance							
		Eye Protection			Tint Compliance							
2	8	Injury .	Severity	T	Airbag							
-		Injury Poss			NON DEPLOYED		I 15 · · · ·	i				
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/N	OT APPLY	CARLE		Trapped/Extricated NOT TRAPPED	J				
		Medical Transport	MOT EVECTED/M		CABLE EMS Agency Identifie	у	EMS Run#					
		NOT TRANSPORTED			Ewo Agency Identifie	1	LIWO RUIT#					
	THE PERSONS	ı		- 1			1					

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Crash Date 03/12/2023

	Hospital					Date of Death		Time of Death						
		Distracted By	Disti UNI	racted By S KNOWN	ource									
	Distracted By Action UNKNOWN													
		Non Motorist	Strik	ing Unit#		Location								
		Prior Action												
		Action												
	JAL													
IND	NDWIDUAI													
	IND													
		A (C - O(I											7.5	
		Action Other											To/From School	
	L	Drug & Alcohol YES						Suspected Drug Use YES						
		Alcohol Test Given TEST REFUSED BUT OBTAINED			D	Alcohol Test Ty BLOOD	/pe				Alcohol Test Results PENDING			
		Drug Test Given TEST REFUSED			Drug Test Type		Drug Test Results		est Results	;				
7	001	Drug Type												
		Individual Condition												
		UNDER THE INFL	UEN	CE OF ME	EDIC	ATIONS/DRU	GS/	ALCOHOL						
	,	/iolations												
	0.1	UTC Number BG1137135	sst	₄e To? I	State 346	ute Number .63(2)(a)1	Description CAUSE INJURY/OPERATE WHILE UNDER INFLUENCE 1ST							
	02	UTC Number BG1137161	sst	ie To?		ute Number .62(3)		Description RECKLESS DRIVING-CAUSE BODILY HARM						
	03	UTC Number BG1137146	lsst 001	ıе То? I		ute Number .05(1)		Description OPERATING LEFT OF CENTER						
	84	UTC Number BG1137150	lsst 001	ie To?	State 346	ute Number . 935(2)		Description POSSESS OPEN INTOXICANTS IN MV-DRIVER						
	05	UTC Number BG1137172	sst	ie To?	State 347	ute Number .48(2m)(b)		Description VEHICLE OPERATO	R FAIL	_/WEAR SI	EAT BELT			
	Uni	Summary •												
		Status					Ve	hicle Operating As Classi	fication		UnitType			
	IN T						D	CLASS			AUTOMO	BILE		
02		cle Type	E								Operating A	s Endorsem	ents	
_		ORT) UTILITY VEHI	CLE	Train/Bus	#Rec	orded	Τ.	otal#Citations Issued		Total Traile	re	TotalHazN	fat Tynes	
	01	Occs		11811111203	# 1 10 0	corded To		rtai# Citations issued	0 lotal I raile		ers Iotal Haz/\ 0		at Types	
Е	Insu	ance?		Direction (Pre CrashTire Speed Li Mark 25		Speed Lim 25	mit Total Lane:		5	
LNO		Harmful Event: Collision (COR VEH IN TRANS						Special Function NO SPECIAL FUNCTION			Emergency Motor Vehicle Use NOT APPLICABLE			
	Traffic Way				ı	affic Control CONTROL		Traffic Control Inoperative/Missing NO						

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	Surface Type				Curvature			Road Grade					
		CKTOP (BITUMINOUS)	AIGHT	HT			LEVEL						
	NO.	k Bus or HazMat											
		Vehicle				h(Haliba)							
		License Plate Number 131VTH			eType Γ-AUTOMOBILE		St WI	Country of Issuance UNITED STATES					
05	8	Vehicle Identification Number JF2GTHMC6P8217865	1	Make Year Model SUBARU 2023 CROSSTREK									
		Color WHI - WHITE			Body Style Bus Use 4D - 4DR								
LIND	VEHICLE	Initial Contact Point 12 - FRONT	01 -	Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE									
Ś	VEH	Extent Of Damage DISABLING DAMAGE		FRONT, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT 5 4 3 2 3									
		Towed Due To Damage TOWED DUE TO DISABLING	1	icle Removed By NGS TOWING									
		What Driver Was Doing SLOW/STOPPING		icle Factors									
		Driver Prior Action Other		NO	F APPLICABLE								
Driver Actions NO CONTRIBUTING ACTION													
02	02	OwnerName LAURA MARIE ZELLER (608) 333-9367		Owner Address 1834 HELENA ST MADISON, WI 53704 , US									
		l Sequence Of Events											
	10	Event MOTOR VEH IN TRANSPOR	T			35235235253253							
	05	Event											
	63	Event											
	7	Event											
_		Policy Holder		********		Y 17 Y 17 Y 18							
IN N		Insurance Company AMERICAN-FAMILY-INS-CO		Individual LAURA ZELLER									
		Individual											
		Driver LAURA MARIE ZELLER		0	Citations Issued Sex								
⊨	DUA	(608) 333- 9 367		Đ	Date of Birth Race WHITE								
LNO	INDIVIDUA	Address 1834 HELENA ST MADISON, WI 53704 , US	Drivert icense Number STATE: WISCONSIN COUNTRY: UNITED STATES										
	Sai	On Duty Cr ety Equipment	ash	Si	afety Equipment								
		Row 01 - FRONT ROW	SeatPosition 07 - LEFT	S	HOULDER & LAP B	BELT							

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		Helmet Use			HelmetCompliance								
		Eye Protection			Tint Compliance								
02	002	Injury Suspe	everity ECTED MINOR	INJURY	Airbag DEPLOYED-COMBINATION								
		Ejected	Ejection Path				Trapped/Extricated						
		NOT EJECTED	NOT EJECT	ED/NOT APPL	ICABLE		NOT TRAPPED						
		Medical Transport			EMS Agency Identifier	EMS Run#							
		NOT TRANSPORTED											
		Hospital			Date of Death Time of Death								
		Distract	ed By Source										
		Distracted By NOT APPLICABLE (NOT DISTRACTED)											
	Distracted By Action NOT DISTRACTED												
		Non Motorist Striking	Unit# Lo	cation									
		Prior Action	,										
		Action											
UNIT	INDIVIDUAL												
		Action Other						To/From School					
	L	Drug & Alcohol NO	ted Alcohol Use		Suspected Drug Use NO								
		Alcohol Test Given TEST NOT GIVEN	Al	cohol Test Type			Alcohol Test Results						
		Drug Test Given TEST NOT GIVEN	Di	ug Test Type		Drug Test Results	3						
02	002	Drug Type	'		'								
		Individual Condition											
		APPEARED NORMAL											
l													