

6TL0C884K4  
23-03912

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

6TL0C884K4

Document Number Override		Primary Crash Document #		Agency Crash Number <b>23-03912</b>		Investigating Officer/Deputy <b>DEPUTY T. SUTHERLAND</b>	
Crash Date <b>04/21/2023</b>		Crash Time <b>04:45 PM</b>		Date Arrived <b>04/21/2023</b>		Time Arrived <b>04:58 PM</b>	
Date Notified <b>04/21/2023</b>		Time Notified <b>04:49 PM</b>		Total Units <b>02</b>		Total Injured <b>00</b>	Total Killed <b>00</b>
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure		<input type="checkbox"/> Work Zone		<input type="checkbox"/> Trailer or Towed	<input type="checkbox"/> Reporting Threshold
<input type="checkbox"/> Government Property		<input type="checkbox"/> Active School Zone		School Bus Related <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram		Reconstruction By	
<p>STH 33</p> <p>Not To Scale</p>		Photos By	
		Additional Information <b>NONE</b>	

I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

ON 04-21-23 UNIT 2 WAS WESTBOUND ON STH 33. UNIT 1 WAS ALSO WESTBOUND ON STH 33 DIRECTLY BEHIND UNIT 2. UNIT 1 REAR ENDED UNIT 2 IN THE WESTBOUND LANE OF TRAFFIC. NO INJURIES REPORTED.

6TL0C884K4  
23-03912

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

Location

<b>ON STH33 WB 0.27 MI E OF COUNTY LAND FILL LN IN THE TOWN OF EXCELSIOR IN SAUK COUNTY</b>	Latitude <b>43.531339313</b>	Longitude <b>-89.886408488</b>
	X Coordinate <b>266765.78125</b>	Y Coordinate <b>4823870</b>
	Structure Type <b>NO STRUCTURE</b>	

Crash Scene

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>		First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>03 - FRONT TO REAR</b>		Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>DRY</b>		Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>			
Weather Condition(s) <b>CLOUDY</b>			
Animal Type		Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>		Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land		Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>	

Unit Summary

<b>UNIT</b>	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>	
	Vehicle Type <b>(SPORT) UTILITY VEHICLE</b>				Operating As Endorsements	
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>1</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>YES</b>	Direction Of Travel <b>WESTBOUND</b>	<input type="checkbox"/> <b>Pre Crash Tire Mark</b>	Speed Limit <b>55</b>	Total Lanes <b>2</b>	
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>					

Vehicle

<b>UNIT</b>	<b>VEHICLE</b>	License Plate Number <b>ASB2973</b>				Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>3GNVKE09AG270036</b>				Make <b>CHEVROLET</b>	Year <b>2010</b>	Model <b>AVALANCHE</b>
		Color <b>SIL - SILVER (ALUMINUM)</b>				Body Style <b>4D - 4DR</b>		Bus Use
		Initial Contact Point <b>12 - FRONT</b>				Vehicle Damage		
		Extent Of Damage <b>MINOR DAMAGE</b>				<b>12 - FRONT</b>		



6TL0C884K4  
23-03912

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

UNIT	VEHICLE	Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OPERATOR</b>		
		What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors		
		Driver Prior Action Other	<b>NOT APPLICABLE</b>		
		Driver Actions <b>FAILURE TO CONTROL, OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER</b>			
01	01	Owner Name <b>JAYME KOWALKE (608) 370-1599</b>	Owner Address <b>619 SYCAMORE ST SAUK CITY, WI 53583 , US</b>		
		<b>Sequence Of Events</b>			
UNIT	INDIVIDUAL	Event <b>MOTOR VEH IN TRANSPORT</b>	Event		
		Event	Event		
		Event	Event		
		Event	Event		
01	001	<b>Policy Holder</b>			
		Insurance Company <b>WEST-BEND-MUTUAL-INS-CO</b>	Individual <b>JAYME KOWALKE</b>		
01	001	<b>Individual</b>			
		Driver <b>PARKER KOWALKE (608) 370-1599</b>	Citations Issued <b>1</b>	Sex <b>MALE</b>	
		Address <b>619 SYCAMORE ST SAUK CITY, WI 53583 , US</b>	Date of Birth	Race <b>WHITE</b>	
		Driver License Number			
01	001	<b>Safety Equipment</b>			
		On Duty Crash	Safety Equipment		
		Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>SHOULDER &amp; LAP BELT</b>	
		Helmet Use	Helmet Compliance		
01	001	Eye Protection	Tint Compliance		
		<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>	
		Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>	
		Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier	EMS Run #	
01	001	Hospital	Date of Death	Time of Death	
		<b>Distracted By</b>			
		Distracted By Source <b>HANDS-FREE MOBILE PHONE</b>	Distracted By Action <b>OTHER ACTION (LOOKING AWAY FROM TASK ETC)</b>		

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

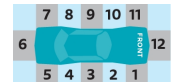
UNIT	INDIVIDUAL	<b>Non Motorist</b>		Striking Unit #	Location		
		Prior Action					
		Action					
		Action Other					
		To/From School					
		<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>		
		Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type		Alcohol Test Results	
		Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type		Drug Test Results	
		Drug Type					
		Individual Condition <b>APPEARED NORMAL</b>					
01	001	<b>Violations</b>					
		UTC Number <b>BD759606</b>	Issue To? <b>001</b>	Statute Number <b>346.89(1)</b>	Description <b>INATTENTIVE DRIVING</b>		

**Unit Summary**

UNIT	02	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>		
		Vehicle Type <b>PASSENGER CAR</b>					Operating As Endorsements	
		Total Occs <b>1</b>	Train/Bus # Recorded		Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
		Insurance? <b>YES</b>	Direction Of Travel <b>WESTBOUND</b>		<input type="checkbox"/> <b>Pre Crash Tire Mark</b>	Speed Limit <b>55</b>	Total Lanes <b>2</b>	
		Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>			Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
		Traffic Way <b>TWO-WAY, NOT DIVIDED</b>			Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
		Surface Type <b>BLACKTOP (BITUMINOUS)</b>			Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
		Truck Bus or HazMat <b>NO</b>						

**Vehicle**

02	02	License Plate Number <b>724ZRP</b>		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
		Vehicle Identification Number <b>3FA6P0HDXGR299283</b>		Make <b>FORD</b>	Year <b>2016</b>	Model <b>FUSION</b>	
		Color <b>RED - RED</b>		Body Style <b>4D - 4DR</b>		Bus Use	
		Initial Contact Point <b>06 - REAR</b>					



6TL0C884K4

23-03912

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

UNIT VEHICLE	Vehicle Damage		
	Extent Of Damage <b>MINOR DAMAGE</b>	<b>06 - REAR</b>	
	Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OPERATOR</b>	
	What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors <b>NOT APPLICABLE</b>	
UNIT VEHICLE	Driver Actions <b>NO CONTRIBUTING ACTION</b>		
	Owner Name <b>MICHELLE MCSWEENEY (608) 370-1599</b>	Owner Address <b>S324 LAVALLE RD LA VALLE, WI 53941 , US</b>	
<b>Sequence Of Events</b>			
UNIT VEHICLE	01	Event <b>MOTOR VEH IN TRANSPORT</b>	
	02	Event	
	03	Event	
	04	Event	
<b>Policy Holder</b>			
UNIT INDIVIDUAL	Insurance Company <b>WADENA-INSURANCE-CO</b>	Individual <b>MICHELLE MCSWEENEY</b>	
	<b>Individual</b>		
UNIT INDIVIDUAL	Driver <b>MICHELLE MCSWEENEY (608) 370-1599</b>	Citations Issued <b>0</b>	Sex <b>FEMALE</b>
		Date of Birth	Race <b>WHITE</b>
	Address <b>S324 LAVALLE RD LA VALLE, WI 53941 , US</b>	Driver License Number	
UNIT INDIVIDUAL	<b>Safety Equipment</b>		On Duty Crash
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	<b>Injury</b>		Airbag
<b>NO APPARENT INJURY</b>		<b>NON DEPLOYED</b>	
UNIT INDIVIDUAL	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
	Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier
	Hospital		EMS Run #
	Date of Death		Time of Death

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT	INDIVIDUAL	<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>					
		<b>Distracted By Action</b>		<b>NOT DISTRACTED</b>					
		<b>Non Motorist</b>	Striking Unit #	Location					
			Prior Action						
		Action							
		Action Other				To/From School			
		02	002	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>		Suspected Drug Use <b>NO</b>	
				Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type		Alcohol Test Results	
				Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type		Drug Test Results	
				Drug Type					
Individual Condition <b>APPEARED NORMAL</b>									