

6TL092T5T7
SC23-05146A

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

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Document Number Override		Primary Crash Document#		Agency Crash Number SC23-05146A		Investigating Officer/Deputy DEPUTY A. KING	
Crash Date 05/22/2023		Crash Time 04:18 PM		Date Arrived 05/22/2023		Time Arrived 04:31 PM	
Date Notified 05/22/2023		Time Notified 04:19 PM		Total Units 02		Total Injured 00	Total Killed 00
<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 NO		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

Description

<p>Diagram</p> <p>Not to scale</p>	Reconstruction By
	Photos By A. KING
	Additional Information PHOTOS

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

U1 WAS TRAVELING WESTBOUND ON CTH H FROM LAKE DELTON WHEN OPERATOR BEGAN HAVING A SEIZURE. OPERATOR OF U1 WAS UNABLE TO MAINTAIN CONTROL OF THE VEHICLE, RESULTING IN DRIFTING TOWARDS ONCOMING TRAFFIC(EASTBOUND). U1 THEN ENTERED THE ONCOMING LANE AND STRUCK THE REAR PASSENGER SIDE OF U2. OPERATOR OF U2 SAID SHE OBSERVED U1 COMING TOWARDS HER AND TRIED TO SWERVE TO AVOID GETTING STRUCK HEAD ON. OPERATOR OF U2 SAID SHE WAS HIT ON THE REAR PASSENGER SIDE OF THE VEHICLE. OPERATOR OF U2 DENIED ANY INJURIES AND EMS. U1 THEN PROCEEDED PAST U2 AND THEN SIDESWIPE THE A GUARD RAIL WITH THE DRIVER SIDE OF THE VEHICLE UNTIL DRIFTING BACK TOWARDS THE WESTBOUND LANE OF TRAFFIC. U1 THEN HAD A FINAL RESTING PLACE IN THE NORTH SIDE DITCH OF CH H. OPERATOR OF U1 WAS TRANSPORTED TO RAMC DUE TO THE ONGOING MEDICAL ISSUE THAT RESULTED IN THE CRASH. OPERATOR OF U1 RECEIVED NO INJURIES FROM THE CRASH. U1 WAS REMOVED FROM THE SCENE BY STEVE'S TOWING AND U2 WAS REMOVED FROM SCENE BY OPERATOR.

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Location

ON CTHH WB 1180 FT W OF CHERRY LN IN THE TOWN OF DELLONA IN SAUK COUNTY	Latitude 43.594566259	Longitude -89.936918726
	X Coordinate 262932.4375	Y Coordinate 4831035.5
	Structure Type	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 06 - SIDESWIPE/OPPOSITE DIRECTION	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLEAR		
Animal Type	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION

Unit Summary

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

Vehicle

01 UNIT VEHICLE	License Plate Number 843PHA	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1G11C5SL5FF272316	Make CHEVROLET	Year 2015	Model MALIBU 1LT
	Color GRY - GRAY	Body Style 4D - 4DR	Bus Use	
	Initial Contact Point 02 - RIGHT SIDE FRONT	Vehicle Damage 09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT		
Extent Of Damage MINOR DAMAGE				

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UNIT VEHICLE	Towed Due To Damage TOWED BUT NOT DUE TO DISABLING DAMAG		Vehicle Removed By STEVES AUTO SERVICE	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions OTHER CONTRIBUTING ACTION			
01	Owner Name CAITLIN MARIE BUBLA (608) 495-4553		Owner Address 340 N GROVE ST REEDSBURG, WI 53959 , US	
	Sequence Of Events			
01	01	Event MOTOR VEH IN TRANSPORT		
	02	Event GUARDRAIL FACE		
	03	Event DITCH		
	04	Event		
UNIT	Policy Holder			
	Insurance Company AMERICAN-FAMILY-INS-CO		Individual BRIAN BUBLA	
UNIT INDIVIDUAL	Individual			
	Driver KIRA NICHOLE NIEDERKLOPFER (608) 495-4553		Citations Issued 0	Sex FEMALE
	Address 340 N GROVE ST REEDSBURG, WI 53959 , US		Date of Birth [REDACTED]	Race WHITE
	Driver License Number [REDACTED]		STATE: WISCONSIN COUNTRY: UNITED STATES	
01	Safety Equipment		On Duty Crash	
	Row 01 - FRONT ROW		Seat Position 07 - LEFT	
	Helmet Use		Safety Equipment SHOULDER & LAP BELT	
	Eye Protection		Helmet Compliance	
	Injury NO APPARENT INJURY		Airbag NON DEPLOYED	
	Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE	
Medical Transport NOT TRANSPORTED		Trapped/Extricated NOT TRAPPED		
Hospital		EMS Agency Identifier		
Date of Death		EMS Run #		
Time of Death		Hospital		
Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				

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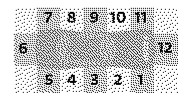
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UNIT INDIVIDUAL 01 001	Non Motorist		Striking Unit #	Location		
	Prior Action					
	Action					
	Action Other				To/From School	
	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO		
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type		Alcohol Test Results	
	Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	
	Drug Type					
	Individual Condition CONFUSED OR DISORIENTED (NON LUCID)					

Unit Summary

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

UNIT VEHICLE 02 02	Vehicle				
	License Plate Number 772VRS		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1FMCU9J9XEUC17537		Make FORD	Year 2014	Model ESCAPE TIT
	Color BLK - BLACK		Body Style LL - CARRYALL		Bus Use
	Initial Contact Point 04 - RIGHT SIDE REAR		Vehicle Damage		
	Extent Of Damage MINOR DAMAGE		04 - RIGHT SIDE REAR		
Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR			



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UNIT VEHICLE	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
	Owner Name BONITA L NABAR (224) 600-3452		Owner Address S589 OAK HILL LN WISCONSIN DELLS, WI 53965 , US	
UNIT VEHICLE	Sequence Of Events			
	01	Event MOTOR VEH IN TRANSPORT		
	02	Event		
	03	Event		
UNIT VEHICLE	04	Event		
	Policy Holder			
	Insurance Company STATE-FARM-MUTUAL-AUTOMOBILE-INS-CO		Individual BONITA NABAR	
	Individual			
UNIT INDIVIDUAL	Driver SAMANTHA LYNN NABAR (224) 600-3452		Citations Issued 0	Sex FEMALE
	Address S589 OAK HILL LN WISCONSIN DELLS, WI 53965 , US		Date of Birth [REDACTED]	Race WHITE
			Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
	Safety Equipment			
UNIT INDIVIDUAL	On Duty Crash		Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
UNIT INDIVIDUAL	Injury		Airbag	
	Injury Severity NO APPARENT INJURY		NON DEPLOYED	
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #
Hospital		Date of Death	Time of Death	
UNIT INDIVIDUAL	Distracted By			
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)			
	Distracted By Action NOT DISTRACTED			
UNIT INDIVIDUAL	Non Motorist		Striking Unit #	
			Location	

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UNIT INDIVIDUAL 02 002	Prior Action		
	Action		
	Action Other		To/From School
	Drug & Alcohol	Suspected Alcohol Use 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
	Drug Type		
	Individual Condition APPEARED NORMAL		