WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Time 10:55 PM Time Notified 10:55 PM	0	Date Arrive 17/12/20: Fotal Units		Time Arrive	d		
	Т	Catal I Inita					
I IU.JO PIVI	10	10tai Units)1	3	Total Injured Total Killed		ed	
Hit and Run	Lane Closure		──Work Zone	00	00 r or Towed	Reporting	
J	Is	L		Tags		Threshold	
	nool Zone	10				Cocondon.	
PRIVATE PRO	PERTY/PARKING	G LOT		Amen	ded	Secondary Crash	
					Decemetry etic	on Du	
cale					Photos By DEP. S. ME	SSNER #9134	
En	Unit 1 turns exit lane, go against traff	s into the oing fic			Additional Info	ormation	
	Active Sch Crash Type PRIVATE PRO	Crash Type PRIVATE PROPERTY/PARKING cale Unit 1 turns exit lane, gagainst traf	Active School Zone Crash Type PRIVATE PROPERTY/PARKING LOT Cale ditch Entran Unit 1 turns into the exit lane, going against traffic Entrance to Mirror Lake State Park, E10320	Active School Zone Crash Type PRIVATE PROPERTY/PARKING LOT Cale Unit 1 turns into the exit lane, going against traffic Entrance to Mirror Lake State Park, E10320	Active School Zone Crash Type	Active School Zone Crash Type PRIVATE PROPERTY/PARKING LOT	

VEHICLE FROM THE DITCH. THE DRIVER WAS CITED FOR NON-REGISTRATION OF THE VEHICLE AND OPERATING WITHOUT A LICENSE.

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Crash Date 07/04/2023

	Loc	ation ====									
Ì		VATE PROPERTY				Latitude			Longitue	de	
		320 FERN DELL RD				43.56265	8914		_	7477962	
	(FIR	E E10320)									
	(,				_	X Coordinate		Y Coordinate		
	IN T	HE TOWN OF DELTO	ON .						482713	30	
	IN S	AUK COUNTY				Structure '	Туре				
						FIRE					
	Cra	sh Scene				•					
ì	-					T =:					
		Harmful Event			nful Event Lo						
	DIT				ER RIGH	Т					
	Manı	ner of Collision			Light Cond	dition					
	00 -	NO COLLISION W/VE	EHICLE IN TRANSPORT		DARK/U	NLIT					
	Road	d Surface Condition(s)			Roadway	Factor(s)					
	DRY	•									
	Envi	ronment Factor(s)				-					
	NON	NE				NONE					
	Wea	ther Condition(s)				1					
	CLE	AR									
	Anim	nal Type					o Trafficway				
	Cras	h Classification - Location	1				AFFICWA'	Y - OTHER			
		BLIC PROPERTY									
	Tribal Land					NO SPECIAL JURISDICTION Access Control Special Study					
	11100	Lana			NO CONTROL						
	With	in Interchange Area	Junction Location		Intersection	section Type					
	NO		NON-JUNCTION		NOT AN	N INTERSECTION					
	Ini	+ Cummon/			ı						
_ '		t Summary Status		IV-bi-l- O-							
				•	erating As C	lassification		Unit Type			
		RANSIT		D CLASS		AUTOMOBILE					
0.1	Vehi	cle Type				Operating As Endorsements				ments	
>	PAS	SENGER CAR									
	Tota	Occs	Train/Bus # Recorded	Total # Citations Issue 0 Pre CrashTire		0		ers	Total Haz	azMat Types	
	3							0 Limit Total L		Lanes	
	Insu	rance?	Direction Of Travel								
_	UNF	KNOWN	NOT ON ROADWAY		Mark	N/A		1			
		Harmful Event: Collision		Special Fur			<u> </u>	Emergency I		icle Use	
o	DIT		•		IAL FUNC	TION		NOT APPL			
		ic Way		Traffic Conf	rol			Traffic Contr	ol Inonera	tive/Missina	
		=						Traffic Control Inoperative/Missing		uvo/wiiooiiiy	
		-WAY TRAFFIC		NO CONT				NO			
		ace Type		Road Curva				Road Grade			
		CKTOP (BITUMINOU	IS)	CURVE L	EFT			LEVEL			
	Truc NO	k Bus or HazMat									
		Vehicle									
		License Plate Number		Plate Type	:		St	Country of Iss	uance		
		AU35341			JTOMOBIL			UNITED STATES			
		Vehicle Identification Nu	Make		•	Year					
		, voimoio iudiniintalitii Nu	Mano			2018	Model				
	7	1G17D59T0 IE10024		CHEVIDO	CHEVROLET			MALIBU			
	01	1G1ZD5ST9JF19821					2010				
	01	Color		Body Style	1		2010	Bus Use			
		Color RED - RED		Body Style	•		2010				
	Щ	Color RED - RED Initial Contact Point	4	Body Style	•		2010			7 8 9 10 11	
=	Щ	Color RED - RED Initial Contact Point 14 - UNDERCARRIA	4	Body Style 4D - 4DR Vehicle Da	amage		2010			7 8 9 10 11 6 ** 12	
IND	Щ	Color RED - RED Initial Contact Point 14 - UNDERCARRIA Extent Of Damage	4	Body Style 4D - 4DR Vehicle Da	•	IAGE	2010			6 12	
LIND		Color RED - RED Initial Contact Point 14 - UNDERCARRIA	4	Body Style 4D - 4DR Vehicle Da	amage	IAGE	2010				

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					Vehicle Removed By BILLS TOWING					
		What Driver Was Doing	NG DAMA		Vehicle Factors					
		GOING STRAIGHT			reflicie i actors					
		Driver Prior Action Other		N	NOT APPLICABLE					
		Driver Frior Action Other								
		Driver Actions WRONG SIDE OR WRON	G WAY	•						
\vdash	VEHICLE									
L N	\exists									
ر ر	Æ									
		Owner Name			Owner Address					
	0									
	0				, ,					
		Sequence Of Events Event								
	01	RUN OFF ROADWAY RIG	нт							
	02	Event DITCH								
	03	Event								
	_	Event								
	04									
	i	Individual								
		Driver JADA SIMS (774) 996-1627			Citations Issued	Sex				
	7				2	FEMALE				
⊢	INDIVIDUAL	(111) 666 1621			Date of Birth	Race BLACK/AFRICA	AN AMERICAN			
FIN	Ž	Address			Driver License Number	•				
_	N	6557 S. NORMAL BLVD CHICAGP, IL 60621, US								
		,								
		On Duty	Crash		Safety Equipment					
	Saf	ety Equipment	Oldon		Salety Equipment					
		Row Seat Position			RESTRAINT USE U	NKNOWN				
		01 - FRONT ROW	07 - LI	EFT						
		Helmet Use			Helmet Compliance					
		Eye Protection			Tint Compliance					
_	_	Injury S	everity		Airbag					
5	00	Injury NO AP	PARENT I	NJURY	NON DEPLOYED					
		Ejected	Ejection Pa	ath			Trapped/Extricated			
		NOT EJECTED	NOT EJE	CTED/NOT APPL			NOT TRAPPED			
		Medical Transport NOT TRANSPORTED			EMS Agency Identifier		EMS Run #			
		Hospital			Date of Death		Time of Death			
					Bate of Beatin		Time of Boath			
		Distracted By UNKN	ed By Sourc DWN	e						
		Distracted By Action UNKNOWN	_							
		Non Motorist Striking	Unit#	Location						
		Non Motorist								

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ı									
		Prior Action							
UNIT	To/From School								
		Suspected Alcohol Use Drug & Alcohol NO			Suspected Drug Use				
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	e		Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	3		
2	001	Drug Type				1			
		Individual Condition							
		APPEARED NORMAL							
	i	Individual							
	7	Passenger TYSHAWN HINES (773) 494-6191			Citations Issued 0	Sex MALE			
⊢	DUA				Date of Birth	Race BLACK/AFRIC	AN AMERICAN		
LINO	INDIVIDUAL	Address 4 1807 223RD ST SAUK VILLAGE, IL 60411	, US		Driver License Number				
	Sat	On Duty fety Equipment	Crash		Safety Equipment				
		Row 01 - FRONT ROW	Seat Position V 09 - RIGHT		RESTRAINT USE U	NKNOWN			
		Helmet Use			Helmet Compliance				
		Eye Protection			Tint Compliance				
2	002	Injury Se	everity PARENT I	NJURY	Airbag NON DEPLOYED				
		Ejected	Ejection Pa	ath			Trapped/Extricated		
		NOT EJECTED Medical Transport	NOT EJE	CTED/NOT APPL	EMS Agency Identifier		NOT TRAPPED EMS Run #		
		NOT TRANSPORTED							
		Hospital			Date of Death Time of Death				
		Distracted By	ed By Sourc	е					
		Distracted By Action							
		Non Motorist Striking	Unit#	Location					
		Prior Action		1					

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									,	
Action Action										
		Action Other							To/From School	
									Toy rom concer	
	L	Orug & Alcohol	Suspected . NO	Alcohol U	se	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	<u> </u>		
01	002	Drug Type			1		1			
		Individual Condition								
		APPEARED NORM	IAL							
	1	ndividual								
		Passenger TESIA WILLIAMS				Citations Issued Sex 0 FEMALE				
⊢	DUA					Date of Birth	Race BLACK/AFRICA	AN AMERICAN		
LINO	INDINIDUAL	Address 4 1907 223RD ST SAUK VILLAGE, IL 60411 , US				Driver License Number				
	Sat	On Duty Crash fety Equipment				Safety Equipment				
		Row 02 - SECOND ROW	Seat Position 7 - LEFT			RESTRAINT USE UN	NKNOWN			
		Helmet Use	et Use			Helmet Compliance				
		Eye Protection				Tint Compliance				
5	Injury Severity NO APPARENT INJURY				JURY	Airbag NON DEPLOYED				
		Ejected NOT EJECTED		ection Pat OT EJE(th CTED/NOT APPL	ICABLE		Trapped/Extricated NOT TRAPPED		
		Medical Transport NOT TRANSPORT	ED			EMS Agency Identifier		EMS Run #		
		Hospital				Date of Death Time of Death				
	,	Distracted By	Distracted E	By Source						
		Distracted By Action								
		Non Motorist	Striking Uni	t #	Location					
		Prior Action			L					

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LIND	INDIVIDUAL	Action Action Other					To/From School
							TO/FIOITI SCHOOL
	L	Drug & Alcohol NO	Jse	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		
5	003	Drug Type					
		Individual Condition					
		APPEARED NORMAL					