WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 07/11/2023

Crash Time 11:01 AM

Document Number Overr	ide	Primary Crash D	Oocument#	Agence 23-07	cy Crash Number 7 350	Investigati DEPUTY		icer/Deputy LVAN	
Crash Date 07/11/2023 Date Notified 07/11/2023		Crash Time 11:01 AM		Date Arrived 07/11/2023			Time Arrived 11:27 AM		
		Time Notified 11:03 AM		Total l	Units	Total Injur			al Killed
On Emergency	Hit	and Run	Lane Closu	ıre	₩ork Zone	Trail	er or	Towed	Reporting Threshold
Government Property		Active Sc	hool Zone	Schoo NO	l Bus Related	Tags			
✓ Reportable		Crash Type DT4000 (STA	NDARD CRASH)		Ame	nded		Secondary Crash
CLOSED S	-TH 136	A A A A	H 23			NOT TO SCALE	Ph I.G	otos By GALVAN ditional Infor	

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LOC	ation									
ON	STH23 WB				Latitude		Longitude			
31 F					43.5326	42957	-89.954490846			
	STH136 WB				X Coordinate			Y Coordinate		
	HE TOWN OF REEDS	BURG			261269.328125 4824208					
IN 5	AUK COUNTY				Structure Type					
					NO STRUCTURE					
_	sh Scene									
First	Harmful Event				First Harr	nful Event L	ocation			
MO	TOR VEH IN TRANSPO	ORT			ON ROA	ADWAY				
Manr	ner of Collision				Light Con	dition				
03 -	FRONT TO REAR				DAYLIG	HT				
Road	Surface Condition(s)				Roadway	Factor(s)				
DRY	•				-					
Envir	ronment Factor(s)									
NON	IE						REGULAR (I/MAINTENAI		TION, WORK ZONE	
Weat	ther Condition(s)				, 2 331				/	
CLE										
Anim	al Type				Relation	To Trafficwa	nv			
7	a. 1,500					CWAY - O	•			
Cras	h Classification - Location			Crash Classification - Jurisdiction						
PUB	LIC PROPERTY				NO SPECIAL JURISDICTION					
Triba	l Land				Access Control Special Study			Special Study		
				NO CONTROL						
	n Interchange Area	Junction Location		Intersectio	• • •					
NO		INTERSECTION-RELATED		T-INTERSECTION						
Work	Zone Crash Location			Work Zone Crash Type						
TRA	NSITION AREA		LANE SH	LANE SHIFT/CROSSOVER						
Work	ers Present		Law Enforce	Law Enforcement Present						
YES			NO	NO						
	Zone Speed Limit		latory Speed Li	• •			Speed Limit			
35		ADVISORY			55					
Unit	Summary =									
	Status		Vehicle Ope	erating As Cl	assificatio	1	Unit Type			
IN T	RANSIT		D CLASS				AUTOMOBILE			
Vehic	cle Type						Operating As	Operating As Endorsements		
PAS	SENGER CAR									
Total	Occs	Train/Bus # Recorded	Total # Cita	tions Issued		Total Tra	ilers	Total Haz	Mat Types	
1			0		0			0	J	
Insur	ance?	Direction Of Travel	Pro	CrashTire	Chandli		mit	Total Lanes		
YES		WESTBOUND		Mark	55		2			
Most	Harmful Event: Collision	- I With	Special Fur			1	Emergency I	Motor Vehi	icle Use	
	OR VEH IN TRANSPO		NO SPEC	IAL FUNC	TION		NOT APPL	NOT APPLICABLE		
Traff	c Way	-	Traffic Cont	trol			Traffic Contr	ol Inoperat	tive/Missina	
	D-WAY, NOT DIVIDED		TRAFFIC				NO	···- _F -· <i>5</i> ,9		
	ace Type		Road Curva				Road Grade			
	CKTOP (BITUMINOU	S)		STRAIGHT			LEVEL			
	R Bus or HazMat	<u> </u>	011041011	•			LLVLL			
NO	C Dus of Flaziviat									
1	/ehicle									
	License Plate Number		Plate Type	<u> </u>		St	Country of Iss	uance		
	AHF4867			, JTOMOBIL	E	WI	UNITED ST			
	Vehicle Identification Nur	mber	Make		_	Year	Model			
0	1D4GP25R03B32541		DODGE				2003 CARAVAN			

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23-07350

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		Color	Body Style		Bus Use						
		SIL - SILVER (ALUMINUM)	VN - VAN								
	쁘	Initial Contact Point	Vehicle Damage			7 8 9 10 11					
UNIT	≌	12 - FRONT	12 - FRONT			6 2 12					
 	VEHICLE	Extent Of Damage DISABLING DAMAGE	12 - FRUNT			5 4 3 2 1					
	>	Towed Due To Damage	Vehicle Removed By								
		TOWED DUE TO DISABLIN	STEVES AUTO SER	VICE							
		What Driver Was Doing		Vehicle Factors							
		GOING STRAIGHT									
		Driver Prior Action Other		NOT APPLICABLE							
		Driver Actions LOOKED BUT DID NOT SEE									
١. ا	VEHICLE	LOOKED BUT DID NOT SEI	=								
UNIT	<u>⊇</u>										
5	ᇤ										
	>										
		Owner Name		Owner Address							
		JAMES BEHNKE	608 LAVALLE ST								
01	2	(608) 495-2340		REEDSBURG, WI 53959 , US							
	:	Sequence Of Events									
		Event									
	2	MOTOR VEH IN TRANSPOR	RT								
	02	Event									
	0										
	03	Event									
	0										
	94	Event									
		D. II. II. I									
╘		Policy Holder									
UNIT		Insurance Company RURAL-MUTUAL-INS-CO-(A	ATTN:_CLAIMS_DEDT\	Individual JAMES BEHNKE							
			KITIKGLAIMG-DEFT)	JAMES BETTARE							
		Individual		10:1:1:							
		Driver JAMES BEHNKE			Citations Issued Sex MALE Date of Birth Race						
	¥	(608) 495-2340		Date of Birth							
	DUAI			Date of Birtin	WHITE						
LINO	₹	Address		Driver License Number							
1	INDIN	608 LAVALLE ST									
	=	REEDSBURG, WI 53959 , U	STATE: WISCONSIN COUNTRY: UNITED STATES								
	Sai	On Duty C	rash	Safety Equipment							
	Sai	ety Equipment									
		Row	Seat Position	SHOULDER & LA	P BELT						
		01 - FRONT ROW	07 - LEFT	11.1 10 1							
		Helmet Use		Helmet Compliance							
		Eye Protection		Tint Compliance							
		_, =, 0		Tim Compliance							
_	Ξ	Injury Seve	erity	Airbag							
01	00	Injury NO APP	ARENT INJURY	NON DEPLOYED							
		=	jection Path			Trapped/Extricated					
			OT EJECTED/NOT APP			NOT TRAPPED					
		Medical Transport		EMS Agency Identifie	er	EMS Run #					
		NOT TRANSPORTED									

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		Hospital			Date of Death			Time of Dea	th			
		Distracted By	Distracted By Source OTHER DISTRAC	TION (ANIMAL, I	FOOD, GROOMING)							
		OTHER ACTION (LC	OOKING AWAY F	ROM TASK ETC	;)							
	•	Non Motorist	Striking Unit #	Location								
		Prior Action										
LIND	INDIVIDUAL	Action										
		Action Other								To/From School		
	L	Orug & Alcohol	Suspected Alcohol U NO	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 Type Drug Test Result:							
01	001	Drug Type										
		Individual Condition APPEARED NORMAL										
	Llnit	Summary =										
		Status —		W	ehicle Operating As Classi	ification		1 1 m it Trum -				
					· -	ilication		Unit Type				
		ND RUN			D CLASS			AUTOMOBILE				
02		icle Type SSENGER CAR						Operating As Endorsements				
	Total	al Occs Train/Bus # Recorded		0	0 0			0		,		
		urance? Direction Of Travel			Pre CrashTire	Speed Lim	Speed Limit Total L		S			
╘	UNK	KNOWN	D	Mark 55				2				
UNIT	MO				Special Function NO SPECIAL FUNCTION			Emergency Motor Vehicle Use NOT APPLICABLE				
		ic Way		Tr	affic Control			Traffic Contr	ol Inoperati	ve/Missing		
		D-WAY, NOT DIVIDE	D	TI	RAFFIC SIGNAL			NO				
		асе Туре		Ro	Road Curvature STRAIGHT			Road Grade LEVEL				
		CKTOP (BITUMINO	JS)	S.								
	Truci NO	k Bus or HazMat										
	,	Vehicle										
		License Plate Number		F	Plate Type		St	Country of Issuance				
05	02	Vehicle Identification No	umber	N	/lake		Year	Model				
		Color		E	Body Style			Bus Use				

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23-07350

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Crash Time 11:01 AM

	Ш	Initial Contact Point			Vel	nicle Damage					
╘	VEHICLE	06 - REAR Extent Of Damage VEHICLE NOT AT SCENE							7 8 9 10 11		
LINO	Ĭ				16	- VEHICLE NOT AT	6 2 12				
_	8								5 4 3 2 1		
		Towed Due To Damag	е		Vehicle Removed By						
		NOT TOWED			OF	ERATOR					
		What Driver Was Doing	g		Vel	nicle Factors					
		STOP IN TRAFFIC									
		Driver Prior Action Other	er		UNKNOWN						
		Driver Actions									
	쁘	UNKNOWN									
LNU	<u>၁</u>										
5	VEHICL										
	>										
		Owner Name				Owner Address					
		UNKNOWN UNKNO	OWN			Owner Address					
02	02					, ,					
	9	Sequence Of Ev	ents								
		Event									
	2	MOTOR VEH IN TR	RANSPOR	T							
	8	Event									
	05										
	03	Event									
	0										
	9	Event									
		Individual									
		Driver UNKNOWN UNKNO	NWN		Citations Issued Sex						
	뒽	UNKNOWN UNKNOWN					Race				
	Ž	Address				Date of Birth					
	INDIVIDUAL					Driver License Number					
5		Addiess			l'	onver Electise (variber					
	Z	, ,									
			On Duty C	ash	- 5	Safety Equipment					
	Sai	fety Equipment									
		Row		Seat Position	RESTRAINT USE UNKNOWN Helmet Compliance						
		01 - FRONT ROW		07 - LEFT							
		Helmet Use									
		Eur Danta etian									
		Eye Protection				Fint Compliance					
٠.	7	<u> </u>	Injury Seve	rity	-	Airbag					
05	002	Injury	NO APPA	RENT INJURY		NOT APPLICABLE					
		Ejected		ection Path	!_			Trapped/Extricated			
		NOT APPLICABLE	N	OT EJECTED/NOT APP	PLIC	ABLE		NOT APPLICABL	.E		
		Medical Transport	1		E	EMS Agency Identifier		EMS Run #			
		NOT TRANSPORTE	ED								
		Hospital				Date of Death		Time of Death			
			Dietroeteel	By Source							
		Distracted By	Distracted	by Source							

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		Distracted By Action					
		Non Motorist Striking Unit #	Location				
		Prior Action					
TINO	INDIVIDUAL	Action					TT-/T Ochool
		Action Other					To/From School
	L	Drug & Alcohol		Suspected Drug Use			
		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	
02	005	Drug Type	1				
		Individual Condition NOT OBSERVED					