WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | Document Number Override | Primary Crash D | Oocument # | | | | Investigating Officer/Deputy DEPUTY J. HUNTER | | | | |
|-----------------------------------|---|---------------------------|------------------|--------------------------------|-----------------------------------|------------|---|-----------------------|-----------------|---------------------|--|
| 5 | Crash Date 07/23/2023 | Crash Time 09:45 PM | | Date Arrived 07/23/2023 | | | Time Arrived 10:05 PM | | | | |
| 7 | Date Notified 07/23/2023 | Time Notified 09:51 PM | | Total Units 01 | | | Total Injured Total Kille 00 00 | | | | |
| | | t and Run Lane Closu | | | | | Trailer or Towed | | | Reporting Threshold | |
| Government Active School Zone | | | | School NO | School Bus Related Tags NO | | | · | | | |
| Crash Type DT4000 (STANDARD CRASH | | | Amen | | | Amende | ed | | Secondary Crash | | |
| | Description | | | | | | | | | | |
| | Diagram | | Stand Rock Ro | | | not to sa | cale | Photos LAKE | s By E DELTO | ON PD OFC. GORDON | |
| | 7 | 15 | | | | | | | | | |
| | , a sworn law enforceme | nt officer, agre | e that I have no | ot added | l any CJIS data in | n this rep | port. | | | | |
| | UNIT 1 WAS SOUTHBOUND ON ST ROADWAY UNTIL IT STRUCK A TR | | | | | | | | | | |
| | | ÷:= •• | | | · · · · · · · · · · · · · · · · · | | - ·· - | | | | |

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

| | Loc | ation | | | | | | | | | |
|----------|--|-------------------------------|---------------------|------------------------------------|---------------------------|--------------|-----------------------------|-----------------|-------------------------------------|-------------------------|--|
| | | STAND ROCK RD | | | | Latitude | | | Longitud | de | |
| 731 FT S | | | | | 43.638630196 | | | _ | 3162596 | | |
| | OF I | BREW FARM RD/ CTH | IA NB | | L | | | | | | |
| | IN THE CITY OF WISCONSIN DELLS | | | | | | X Coordinate | | Y Coordinate 4835515.5 | | |
| | IN S | AUK COUNTY | L | 275104.90625 Structure Type | | | 40333 | | | | |
| | | | | | | | туре | | | | |
| | Cra | sh Scene | | | • | | | | | | |
| | First | Harmful Event | | | | First Harm | nful Event L | ocation | | | |
| | TRE | E | | | | | DER RIGH | | | | |
| | Manner of Collision | | | | | Light Con | | | | | |
| | 00 - NO COLLISION W/VEHICLE IN TRANSPORT | | | | | DARK/UNLIT | | | | | |
| | | d Surface Condition(s) | | | | Roadway | | | | | |
| | | . , | | | | , | | | | | |
| | DRY | (| | | | | | | | | |
| | Envii | ronment Factor(s) | | | | | | | | | |
| | пои | NE | | | NONE | | | | | | |
| | | | | | | | | | | | |
| | Wea | ther Condition(s) | | | | | | | | | |
| | CLE | AR | | | | | | | | | |
| | Anim | nal Type | | | | Polation T | o Trafficwa | ·/ | | | |
| | / | iai Typo | | | | | | , OT ON ROA | ND. | | |
| | Croc | h Classification - Location | | | | | | Jurisdiction | \D | | |
| | | BLIC PROPERTY | | | | | | ISDICTION | | | |
| | | al Land | | | | | | ISDICTION | | Special Study | |
| | TIDE | a Lanu | | | Access Control NO CONTROL | | | | Special Study | | |
| | Withi | in Interchange Area | Junction Location | | Intersection Type | | | I | | | |
| | NO | J | NON-JUNCTION | | NOT AN I | | CTION | | | | |
| | llni | t Summary | | | | | | | | | |
| | Unit | Status — | | Vehicle One | erating As Cla | assification | 1 | Unit Type | | | |
| | | RANSIT | | | | | | AUTOMO | BII F | | |
| | | cle Type | DOLAGO | | | | Operating A | | ments | | |
| 5 | PASSENGER CAR | | | | | | | Operating / | to Endorse | nono | |
| | Total Occs Train/Bus # Recorded | | | Total # Citat | Total # Citations Issued | | 1 Total Traile | | Total HazMat Types | | |
| | 10ta | I Occs Frain/Bus # Recorded | | 2 | | 0 | | o Total Hazivia | | wat Types | |
| | | rance? | Direction Of Travel | | | | Speed Lin | nit | Total Lan | 00 | |
| | NO | ance: | SOUTHBOUND | | Pre CrashTire | | 45 | | 2 | | |
| • | | | | Mark Special Function | | 43 | Emergency Motor Vehicle Use | | icle I Ise | | |
| 200 | Most Harmful Event: Collision With TREE | | | | NO SPECIAL FUNCTION | | | NOT APPLICABLE | | | |
| | Traff | ic Way | | Traffic Contr | Traffic Control Train | | | Traffic Con | Traffic Control Inoperative/Missing | | |
| | TWO | D-WAY, NOT DIVIDED | | NO CONTI | ROL | | | NO | | | |
| | Surface Type | | | Road Curvat | Road Curvature | | | Road Grade | | | |
| | | CKTOP (BITUMINOUS | | STRAIGHT | | LEVEL | | | | | |
| | Truck Bus or HazMat | | | | | | | | | | |
| | NO NO | | | | | | | | | | |
| | ' | Vehicle | | | | | | | | | |
| | | License Plate Number | | Plate Type | Plate Type | | St | Country of Is | suance | | |
| | | ATS5631 | AUT - AU | AUT - AUTOMOBILE | | WI | UNITED STATES | | | | |
| _ | | Vehicle Identification Nun | Make | Make | | Year | Model | | | | |
| 5 | 01 | WBA3B3C56DF5361 | BMW | | | 2013 | 328 | | | | |
| | Color | | | Body Style | Body Style | | | Bus Use | | | |
| | BLK - BLACK | | | SD - SED | SD - SEDAN | | | | | | |
| | Щ | | | | Vehicle Damage | | | | | 7 0 0 10 11 | |
| | C | | | | | | | | | 7 8 9 10 11 6 2 3 12 | |
| | 12 - FRONT Extent Of Damage DISABLING DAMAGE | | | 12 - FRO | 12 - FRONT | | | | | 3 | |
| - | | | | | | | | | | 5 4 3 2 1 | |
| | | | | • | | | | | | | |
| | | Motor Vehicle Crash | Thi | s report does not | | CJIS data. | | | Crash Date | | |
| uH) | DT400 | UU | | 2 | of 4 | | | | crash 11m | e 09:45 PM | |

2 of 4

SC23-07878

Page 2 of 4

Crash Time 09:45 PM

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

| | | Towed Due To Damage | | | ehicle Removed By | | | | |
|--------|------------|---|---------------|----------|-------------------------|--------------|---------------|--|--|
| | | TOWED DUE TO DISABI | ING DAM | | ATTS WRECKER | | | | |
| | | What Driver Was Doing GOING STRAIGHT | | V | ehicle Factors | | | | |
| | | Driver Prior Action Other | | N | IOT APPLICABLE | | | | |
| | | Diver Filor Action Other | | - | | | | | |
| | | Driver Actions | | | | | | | |
| | щ | DAN OFF DOADWAY | | | | | | | |
| ╘ | CL | | | | | | | | |
| UNIT | VEHICLE | | | | | | | | |
| | 7 | | | | | | | | |
| | | Owner Name | | | Owner Address | | | | |
| | | NIRMAL MOWLASEE | | | E9430 DELLWOOD RD # 107 | | | | |
| 7 | 0 | (608) 495-5931 | | | REEDSBURG, WI | | | | |
| | | | | | | | | | |
| | | Sequence Of Events | | | | | | | |
| | 10 | Event DITCH | | | | | | | |
| | 0 | | | | | | | | |
| | 02 | TREE | | | | | | | |
| | 03 | Event | | | | | | | |
| | | Event | | | | | | | |
| | 04 | | | | | | | | |
| | ı | Individual | | | | | | | |
| | | Driver | | | Citations Issued Sex | | | | |
| | INDIVIDUAL | NIRMAL MOWLASEE (608) 495-5931 | | | 2 | MALE Race | | | |
| | | , | | | Date of Birth | Race | | | |
| N | | Address | | | Driver License Number | | | | |
| \neg | ₫ | E9430 DELLWOOD RD # 107 REEDSBURG, WI 53959 , US | | | | | | | |
| | = | | | | | | | | |
| | | | | | 0.64.5-1 | | | | |
| | Saf | ety Equipment | y Crash | | Safety Equipment | | | | |
| | | Row | Seat P | osition | SHOULDER & LAP | BELT | | | |
| | | 01 - FRONT ROW | 07 - L | | | | | | |
| | | Helmet Use | | | Helmet Compliance | | | | |
| | | Eye Protection | | | Tint Compliance | | | | |
| | | Injury S | Severity | | Airbag | | | | |
| 6 | 9 | Injury NO Al | PARENT | INJURY | DEPLOYED-COMBI | NATION | | | |
| | | Ejected | Ejection Pa | | Trapped/Extricated | | | | |
| | | NOT EJECTED NOT EJECTED/NOT APPLIC | | | ICABLE | | NOT TRAPPED | | |
| | | | | | EMS Agency Identifier | | EMS Run # | | |
| | | NOT TRANSPORTED | | | Date of Death | | | | |
| | | Hospital | | | | | Time of Death | | |
| | | Distracted By UNKN | ted By Source | e | | | | | |
| | | Distracted By Action | | | | | | | |
| | | UNKNOWN | I Init # | Location | | | | | |
| | | Non Motorist Striking | Unit# | Location | | | | | |

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data. $\begin{tabular}{ll} 3 & of & 4 \end{tabular}$

Crash Date 07/23/2023
Crash Time 09:45 PM

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

| | | Prior Action | | | | | | | |
|-----|------------|-------------------------------|-------------------------|------------------------------------|-----------------------------|-------------------|--------------------------|----------------|--|
| | | | | | | | | | |
| | | Action | | | | | | | |
| | _ | | | | | | | | |
| | ¥ | | | | | | | | |
| IND | ₫ | | | | | | | | |
| 5 | INDIVIDUAL | | | | | | | | |
| | Ξ | | | | | | | | |
| | | | | | | | | | |
| | | Action Other | | | | | | To/From School | |
| | | | | | | | | | |
| İ | | Drug & Alcohol | Suspected Alco | hol Use | | | | | |
| | | | TES | | NO | | | | |
| | | Alcohol Test Given TEST GIVEN | | Alcohol Test Type | BREATH TEST (PBT) | | Alcohol Test Results 15 | | |
| | | Drug Test Given | | Drug Test Type | BREATH TEST (FBT) | Drug Test Results | 13 | | |
| | | TEST NOT GIVEN | | 3 33 31 | | | | | |
| 2 | 001 | Drug Type | | | | | | | |
| | ŏ | | | | | | | | |
| | | Individual Condition | | | | | | | |
| | | UNDER THE INFL | HENCE OF MI | | | | | | |
| | | ONDER THE INTE | | | | | | | |
| | , | Violations | | | | | | | |
| | 2 | UTC Number | Issue To? 001 | Statute Number 344.62(1) | Description OPERATE MOTOR V | /EHICLE W/O IN: | SURANCE | | |
| | 0 | BG110199 | | . , | | ZINGEL WON | OUNANDE | | |
| | 02 | UTC Number BG110198 | Issue To? 001 | Statute Number 346.63(1)(a) | Description OPERATING WHILE | UNDER THE IN | FLUENCE | | |
| l | | | | | | | | | |