

6TL0F2KRB4
23-08673

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 23-08673		Investigating Officer/Deputy DEPUTY I. GALVAN		
Crash Date 08/11/2023		Crash Time 02:20 PM		Date Arrived 08/11/2023		Time Arrived 02:39 PM		
Date Notified 08/11/2023		Time Notified 02:22 PM		Total Units 01		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

Diagram		Reconstruction By	
		Photos By ISAAC GALVAN	
		Additional Information PHOTOS	
		<input checked="" type="checkbox"/> I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.	
UNIT 1 TRAVELING EASTBOUND ON CTH O NEAR E9452 CTH O SAUK CITY, WI. UNIT 1 STATED SHE HAD REACHED BEHIND HER TO PICK UP A CHILD'S CUP AND STRUCK A MAIL BOX ON THE SIDE OF THE ROAD. NO INJURIES WERE REPORTED. UNIT 1 WAS REMOVED BY OPERATOR.			

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Location

ON CTHO EB 0.41 MI W OF CHURCH RD IN THE TOWN OF TROY IN SAUK COUNTY	Latitude 43.275088846	Longitude -89.849722949
	X Coordinate 268756.8125	Y Coordinate 4795307.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MAILBOX	First Harmful Event Location ROADSIDE	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	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

UNIT 01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE		
	Vehicle Type PASSENGER CAR	Operating As Endorsements			
	Total Occs 6	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With MAILBOX	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 CURVE LEFT	Road Grade LEVEL		
	Truck Bus or HazMat NO				

UNIT 01 VEHICLE	Vehicle			
	License Plate Number 448PLS	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 2D4RN3DG7BR623967	Make DODGE	Year 2011	Model CARAVAN
	Color BLU - BLUE	Body Style MV - MINI VAN	Bus Use	
	Initial Contact Point 01 - RIGHT FRONT CORNER	Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 04 - RIGHT SIDE REAR		
Extent Of Damage FUNCTIONAL DAMAGE				



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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER			
01	01	Owner Name DUSTYN SMITH (714) 625-9251		Owner Address W7835 28TH ST NEW LISBON, WI 53950 , US
		Sequence Of Events		
01	01	01	Event MAILBOX	
		02	Event	
		03	Event	
		04	Event	
UNIT	Policy Holder			
	Insurance Company PROGRESSIVE-UNIVERSAL-INSURANCE-COMP		Individual CHANTE HAREMZA	
UNIT	Individual			
	Driver CHANTE D HAREMZA (608) 716-1398		Citations Issued 0	Sex FEMALE
	Address 1000 HEMLOCK ST. SAUK CITY, WI 53583 , US		Date of Birth	Race WHITE
01	001	On Duty Crash		Safety Equipment
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT
Helmet Use		Helmet Compliance		
Eye Protection		Tint Compliance		
Injury		Injury Severity NO APPARENT INJURY	Airbag 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
Distracted By		Distracted By Source PASSENGER/OTHER NON-MOTORIST		
Distracted By Action OTHER ACTION (LOOKING AWAY FROM TASK ETC)				

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UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
		Action Other				To/From School	
01	001	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					
		Individual					
		Passenger BRAXON HAREMZA (608) 716-1398			Citations Issued 0	Sex MALE	
		Address 1000 HEMLOCK ST. SAUK CITY, WI 53583 , US			Date of Birth	Race WHITE	
		Driver License Number			Safety Equipment		
		Safety Equipment		On Duty Crash	CHILD RESTRAINT SYSTEM - FORWARD FACING		
Row 02 - SECOND ROW		Seat Position 07 - LEFT	Helmet Compliance				
Helmet Use		Eye Protection					
Tint Compliance		Airbag					
01	002	Injury		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		
		Distracted By		Distracted By Source			
		Distracted By Action					
		Non Motorist		Striking Unit #	Location		

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		Action		
		Action Other		To/From School
01	002	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		
UNIT	INDIVIDUAL	Individual		
		Passenger PARCEL HAREMZA (608) 716-1398	Citations Issued 0	Sex MALE
		Date of Birth	Race WHITE	
		Address 1000 HEMLOCK ST. SAUK CITY, WI 53583 , US	Driver License Number	
01	003	Safety Equipment	On Duty Crash	Safety Equipment BOOSTER SEAT
		Row 03 - THIRD ROW	Seat Position 07 - LEFT	
		Helmet Use		Helmet Compliance
		Eye Protection		Tint Compliance
		Injury	Injury Severity NO APPARENT INJURY	Airbag 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	
Distracted By	Distracted By Source			
Distracted By Action				
Non Motorist	Striking Unit #	Location		
Prior Action				

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	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		
	Individual		
	Passenger MAKHAIRA HAREMZA (608) 716-1398	Citations Issued 0	Sex FEMALE
	Date of Birth		Race WHITE
Address 1000 HEMLOCK ST. SAUK CITY, WI 53583 , US		Driver License Number	
UNIT INDIVIDUAL	Safety Equipment	On Duty Crash	Safety Equipment BOOSTER SEAT
	Row 03 - THIRD ROW	Seat Position 09 - RIGHT	
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier
	Hospital		EMS Run #
	Date of Death		Time of Death
	Distracted By	Distracted By Source	
Distracted By Action			
Non Motorist	Striking Unit #	Location	
Prior Action			

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UNIT INDIVIDUAL	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		
	Individual		
	Passenger JERICHO HAREMEZA (608) 716-1398	Citations Issued 0	Sex MALE
	Date of Birth	Race WHITE	
Address 1000 HEMLOCK ST. SAUK CITY, WI 53583 , US	Driver License Number		
UNIT INDIVIDUAL	Safety Equipment	On Duty Crash	Safety Equipment
	Row 02 - SECOND ROW	Seat Position 09 - RIGHT	CHILD RESTRAINT SYSTEM - REAR FACING
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier
	Hospital		EMS Run #
	Date of Death		Time of Death
	Distracted By	Distracted By Source	
Distracted By Action			
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	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		
	Individual		
	Passenger MARISOL REYES GUETHLEIN (608) 716-1398	Citations Issued 0	Sex FEMALE
	Date of Birth	Race HISPANIC	
Address 428 9TH ST PRAIRIE DU SAC, WI 53578 , US	Driver License Number		
UNIT INDIVIDUAL	Safety Equipment	On Duty Crash	Safety Equipment
	Row 03 - THIRD ROW	Seat Position 08 - MIDDLE	SHOULDER & LAP BELT
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier
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	Distracted By	Distracted By Source	
Distracted By Action			
Non Motorist	Striking Unit #	Location	
Prior Action			

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		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					
		01	006				

Property Owner

PROP OWNER	01	Individual DONNA MEYER (608) 544-2652	Address E9452 CTH 0 SAUK CITY, WI 53583 , US

Fixed Objects Struck

01	Striking Unit 01	Struck Object MAILBOX	Structure Number	Damage Tag Number 0000