23-09061

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

_	ocument Number Overric	le Primary Crash	Document #	Agency 23-090	r Crash Number)61		vestigating Officer/Deputy EPUTY G. AKERS		
	Crash Date 8/19/2023	Crash Time 11:34 PM			rived 2023	Time Arrived 11:34 PM			
	0ate Notified 8/19/2023				nits	Total Injured Total Killed 00 00		ed	
<u>S</u>	On Emergency	✓ Hit and Run	Lane Clos	ure	Work Zone	Trailer or	Towed	Reporting Threshold	
	Government Property	Active S	chool Zone	School NO	Bus Related	Tags			
	Reportable	Crash Type DT4000 (ST	ANDARD CRASH	H)		Amended		Secondary Crash	
De	escription 🗖								
		THE REAL PROPERTY OF				Ad	ditional Info DNE, PHC	ormation DTOS	
A STATE OF A STATE			3	3					
			POI	01 1					

ANOTHER RECKLESS DRIVING COMPLAINT AND SUSPECTED TO BE INTOXICATED. THERE WERE NO INJURIES AND BOTH VEHICLES WERE DRIVEN AWAY BY THE OPERATORS. D1 WAS ISSUED CITATIONS RELATED TO THE CRASH.

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6

UNIT

5

UNIT

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WISCONSIN MOTOR VEHICLE **CRASH REPORT**

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

Location								
ON STH23 WB			La	titude		Longitue	de	
939 FT S			43	43.330722859		-90.059	9952337	
OF HICKORY RD			X	Coordinate		Y Coord	linate	
IN THE TOWN OF FRAN	IKLIN		25	1923.140625		480209	90	
IN SAUK COUNT I			Str	ucture Type				
Crash Scene								
First Harmful Event				st Harmful Event	Location			
MOTOR VEH IN TRANS	PORT			N ROADWAY				
Manner of Collision				ht Condition				
06 - SIDESWIPE/OPPOS	SITE DIRECTION			ARK/UNLIT				
Road Surface Condition(s)			Ro	adway Factor(s)				
DRY								
Environment Factor(s)								
NONE			NC	ONE				
Weather Condition(s)								
CLEAR								
Animal Type			Re	lation To Trafficw	/ay			
				RAFFICWAY -				
Crash Classification - Location PUBLIC PROPERTY	n			Crash Classification - Jurisdiction NO SPECIAL JURISDICTION				
Tribal Land				Access Control			Special Study	
			NO CONTROL				opecial olduy	
Within Interchange Area	Junction Location	Ir	ntersection Ty	/pe				
UNKNOWN	UNKNOWN	N	NOT AN INT	ERSECTION				
Unit Summary								
Unit Status		Vehicle Operat	ting As Class	ification	Unit Type			
HIT AND RUN		D CLASS			AUTOMO			
Vehicle Type					Operating A	s Endorse	ments	
PASSENGER CAR	Train/Bus # Recorded				-11	T-4-111	Mat T	
Total Occs	I rain/Bus # Recorded	Total # Citation	ns Issued	Total Tr	allers		zMat Types	
1 Insurance?	Direction Of Travel				0 Speed Limit		0 Total Lanes	
	NORTHBOUND		Pre CrashTire Speed				63	
Most Harmful Event: Collisio		Special Function				Emergency Motor Vehicle Use		
MOTOR VEH IN TRANS		NO SPECIA	ECIAL FUNCTION NOT APPLI					
Traffic Way		Traffic Control			Traffic Cont	rol Inopera	tive/Missing	
TWO-WAY, NOT DIVIDE	D	NO CONTRO	OL	NO				
Surface Type		Road Curvatur	Road Curvature			Road Grade		
BLACKTOP (BITUMINO	US)	STRAIGHT	STRAIGHT			LEVEL		
Truck Bus or HazMat		-						
NO								
Vehicle		Dista Tura		St	Country of Is	suanco		
License Plate Number		Plate Type AUT - AUTO		WI	UNITED S			
APC5240 Vehicle Identification N	umber	Make	OWIGBILE	Year	Model	IAIE3		
5 W04GP5EC0B1117		BUICK		2011	REGAL			
Color	020	Body Style		2011	Bus Use			
BLK - BLACK		SD - SEDA	N		543 036			
		Vehicle Dama			1			
Initial Contact Point 01 - RIGHT FRONT Extent Of Damage	CORNER						7 8 9 10 11	
Extent Of Damage				ORNER, 02 - R	IGHT SIDE		6	
		FRONT, 12	- FRONT	RONT 5 4 3 2 1				

MINOR DAMAGE

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Towed Due To Damage		17	ehicle Removed By					
		NOT TOWED			PERATOR					
		What Driver Was Doing		V	ehicle Factors					
				N	OT APPLICABLE					
		Driver Prior Action Other		N						
		Driver Actions				F				
	щ	WRONG SIDE OR WRONG	WAY, F	AILED TO KEEP II	N DESIGNATED LAN	E				
	<u></u>									
UNIT	VEHICLE									
	ž									
		Owner Name			Owner Address					
_	-	WILMER GONZALEZ SAN	CHEZ		E6416 MILL RD					
6	0				PLAIN, WI 53577	, US				
	9	Sequence Of Events								
		Event								
	01	CROSS CENTERLINE								
		Event								
	02	MOTOR VEH IN TRANSPO	DRT							
		Event								
	03									
		Event								
	64	Lvent								
		Individual								
					Citations Issued	Sex				
	Ļ	WILMER GONZALEZ SANCHEZ			3	MALE				
	Ā				Date of Birth	Race				
E	NDIVIDUAL									
UNIT	≥	Address			Driver License Number	-				
		E6416 MILL RD								
	=	PLAIN, WI 53577 ,US								
	C -4	On Duty	Crash		Safety Equipment					
	Sal	fety Equipment								
		Row	Seat Po		RESTRAINT USE UNKNOWN					
		01 - FRONT ROW	07 - LI	EFT						
		Helmet Use	-		Helmet Compliance					
		Eye Protection			Tint Compliance					
-	Ξ	Injury Se			Airbag					
5	001	Injury _{NO API}	PARENT I	NJURY	NOT APPLICABLE					
		Ejected	Ejection Pa	ath			Trapped/Extricated			
		NOT APPLICABLE	NOT EJE	CTED/NOT APPL	ICABLE		NOT APPLICABLE			
		Medical Transport			EMS Agency Identifier		EMS Run #			
		NOT TRANSPORTED								
		Hospital			Date of Death		Time of Death			
	Distracted By Source									
		Distracted By UNKNO								
		Distracted By Action								
		UNKNOWN								
		Striking	Jnit #	Location						
		Non Motorist								
				1						

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WISCONSIN MOTOR VEHICLE **CRASH REPORT**

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		Prior Action										
UNIT	INDIVIDUAL	Action Action Other	Suspected Alco	phol U	Se		Suspected Drug Use					To/From School
	L	Drug & Alcohol Alcohol Test Given			Alcohol Test T	Vne				Alcohol Tes	t Results	
		TEST NOT GIVEN			BLOOD	ype					l Nesulis	
		Drug Test Given TEST NOT GIVEN			Drug Test Type	е		Drug T	est Results	;		
01	001	Drug Type										
		Individual Condition NOT OBSERVED										
		Violations										
	01			tute Number Description 5.67(1) HIT AND RUN		Description HIT AND RUN						
	OUTC NumberIssue To?Statute NumberBG945158001346.13(1)					Description UNSAFE LANE DEVIATION						
	03	UTC Number BG945157	Issue To? 001		ute Number 5 .05(1)	Description OPERATING LEFT OF CENTER						
		t Summary Status				Voh	ialo Operating As Classi	fication		Linit True e		
	-	RANSIT					Vehicle Operating As Classification D CLASS			Unit Type TRUCK		
02											Operating As Endorsements	
	UTILITY TRUCK/PICKUP TRUCK Total Occs Train/Bus # Recorded					Tota	Total # Citations Issued Total Trail		ers	Total HazN	/lat Types	
	2		Direction		a vol	0	0 Pre CrashTire Speed Lir		.i+	0 Total Lane		
F	YES	rance?	SOUTH				Pre CrashTire 55			int int	2	3
UNIT	мо	t Harmful Event: Collisic TOR VEH IN TRANS					Special Function NO SPECIAL FUNCTION			Emergency Motor Vehicle Use NOT APPLICABLE		
		ic Way D-WAY, NOT DIVIDE	-D				Traffic Control NO CONTROL			Traffic Control Inoperative/Missing		ve/Missing
	Surface Type				Roa	d Curvature			NO Road Grade			
		CKTOP (BITUMINO k Bus or HazMat	OUS)			UNI	KNOWN			LEVEL	LEVEL	
	NO											
		Vehicle License Plate Number				Dia			St	Country of Is	suanco	
		RP3959					te Type K - LIGHT TRUCK		WI	UNITED S		
02	02	Vehicle Identification N 1GCUYDED6KZ29				Ма			Year 2019		0	
	0	Color BLK - BLACK	2000			Boo	CHEVROLET 2019 SILVERA Body Style Bus Use PK - PICKUP Bus Use				0	

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

	щ	Initial Contact Point		Vehicle Damage			7 8 9 10 11				
UNIT	VEHICL	04 - RIGHT SIDE REAR					6				
5	H	Extent Of Damage		04 - RIGHT SIDE REAR, 05 - RIGHT REAR CORNER, 06 - REAR 5 4 3 2							
	ž	MINOR DAMAGE					54521				
		Towed Due To Damage		Vehicle Removed By							
		NOT TOWED		OPERATOR							
		What Driver Was Doing		Vehicle Factors							
		UNKNOWN			-						
		Driver Prior Action Other			-						
		Driver Actions NO CONTRIBUTING ACTI	ON								
⊢	Щ										
UNIT	VEHICL										
	Ē										
	-										
		Owner Name		Owner Address							
2	2	SCOT JOHNSRUD		4595 PENNY L							
02	02	(608) 574-0148		DODGEVILLE	, WI 53533,US						
	÷	Sequence Of Events									
	2	Event CROSS CENTERLINE									
	•										
	02	Event MOTOR VEH IN TRANSPO	DRT								
	03	Event									
	_	Event									
	04										
		Policy Holder									
F		i olioy holaol									
ΤΙΝ		Insurance Company		Individual							
UNIT			0	Individual SCOT JOHNSR	UD						
UNIT		Insurance Company	0		UD						
UNIT		Insurance Company AMERICAN-FAMILY-INS-C Individual Driver	0	SCOT JOHNSR Citations Issued	Sex						
UNIT		Insurance Company AMERICAN-FAMILY-INS-C Individual Driver SCOT JOHNSRUD	0	Citations Issued	Sex MALE						
		Insurance Company AMERICAN-FAMILY-INS-C Individual Driver	:0	SCOT JOHNSR Citations Issued	Sex						
		Insurance Company AMERICAN-FAMILY-INS-C Individual Driver SCOT JOHNSRUD (608) 574-0148	20	Citations Issued 0 Date of Birth	Sex MALE Race						
UNIT UNIT		Insurance Company AMERICAN-FAMILY-INS-C Individual Driver SCOT JOHNSRUD (608) 574-0148 Address	.0	Citations Issued	Sex MALE Race						
		Insurance Company AMERICAN-FAMILY-INS-C Individual Driver SCOT JOHNSRUD (608) 574-0148		Citations Issued 0 Date of Birth Driver License Nur	Sex MALE Race	ITED STATES					
		Insurance Company AMERICAN-FAMILY-INS-C Individual Driver SCOT JOHNSRUD (608) 574-0148 Address 4595 PENNY LN		Citations Issued 0 Date of Birth Driver License Nur	Sex MALE Race	ITED STATES					
	INDIVIDUAL	Insurance Company AMERICAN-FAMILY-INS-C Individual Driver SCOT JOHNSRUD (608) 574-0148 Address 4595 PENNY LN DODGEVILLE, WI 53533 , On Duty	, US	Citations Issued 0 Date of Birth Driver License Nur	Sex MALE Race	ITED STATES					
	INDIVIDUAL	Insurance Company AMERICAN-FAMILY-INS-C Individual Driver SCOT JOHNSRUD (608) 574-0148 Address 4595 PENNY LN DODGEVILLE, WI 53533 fety Equipment	, US Crash	SCOT JOHNSR Citations Issued 0 Date of Birth Driver License Nur STATE: WISCO Safety Equipment	Sex MALE Race NSIN COUNTRY: UN	ITED STATES					
	INDIVIDUAL	Insurance Company AMERICAN-FAMILY-INS-C Individual Driver SCOT JOHNSRUD (608) 574-0148 Address 4595 PENNY LN DODGEVILLE, WI 53533 Fety Equipment Row	, US Crash Seat Position	Citations Issued 0 Date of Birth Driver License Nur STATE: WISCO	Sex MALE Race NSIN COUNTRY: UN	ITED STATES					
	INDIVIDUAL	Insurance Company AMERICAN-FAMILY-INS-C Individual Driver SCOT JOHNSRUD (608) 574-0148 Address 4595 PENNY LN DODGEVILLE, WI 53533 Fety Equipment Row 01 - FRONT ROW	, US Crash	SCOT JOHNSR Citations Issued Date of Birth Driver License Nur STATE: WISCON Safety Equipment SHOULDER & L	Sex MALE Race NSIN COUNTRY: UN	ITED STATES					
	INDIVIDUAL	Insurance Company AMERICAN-FAMILY-INS-C Individual Driver SCOT JOHNSRUD (608) 574-0148 Address 4595 PENNY LN DODGEVILLE, WI 53533 Fety Equipment Row	, US Crash Seat Position	SCOT JOHNSR Citations Issued 0 Date of Birth Driver License Nur STATE: WISCO Safety Equipment	Sex MALE Race NSIN COUNTRY: UN	ITED STATES					
	INDIVIDUAL	Insurance Company AMERICAN-FAMILY-INS-C Individual Driver SCOT JOHNSRUD (608) 574-0148 Address 4595 PENNY LN DODGEVILLE, WI 53533 Fety Equipment Row 01 - FRONT ROW	, US Crash Seat Position	SCOT JOHNSR Citations Issued Date of Birth Driver License Nur STATE: WISCON Safety Equipment SHOULDER & L	Sex MALE Race NSIN COUNTRY: UN	ITED STATES					
	INDIVIDUAL	Insurance Company AMERICAN-FAMILY-INS-C Individual Driver SCOT JOHNSRUD (608) 574-0148 Address 4595 PENNY LN DODGEVILLE, WI 53533 Fety Equipment Row 01 - FRONT ROW Helmet Use	, US Crash Seat Position	SCOT JOHNSR Citations Issued Date of Birth Driver License Nur STATE: WISCON Safety Equipment SHOULDER & L Helmet Compliance Tint Compliance	Sex MALE Race NSIN COUNTRY: UN	ITED STATES					
UNIT		Insurance Company AMERICAN-FAMILY-INS-C Individual Driver SCOT JOHNSRUD (608) 574-0148 Address 4595 PENNY LN DODGEVILLE, WI 53533 Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection	, US Crash Seat Position 07 - LEFT	SCOT JOHNSR Citations Issued Date of Birth Driver License Nur STATE: WISCON Safety Equipment SHOULDER & L Helmet Compliance Airbag	Sex MALE Race NSIN COUNTRY: UN AP BELT	ITED STATES					
	INDIVIDUAL	Insurance Company AMERICAN-FAMILY-INS-C Individual Driver SCOT JOHNSRUD (608) 574-0148 Address 4595 PENNY LN DODGEVILLE, WI 53533 Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Se NO API	, US Crash Seat Position 07 - LEFT	SCOT JOHNSR Citations Issued Date of Birth Driver License Nur STATE: WISCON Safety Equipment SHOULDER & L Helmet Compliance Tint Compliance	Sex MALE Race NSIN COUNTRY: UN AP BELT						
UNIT		Insurance Company AMERICAN-FAMILY-INS-C Individual Driver SCOT JOHNSRUD (608) 574-0148 Address 4595 PENNY LN DODGEVILLE, WI 53533 Fety Equipment On Duty Fety Equipment On Duty Helmet Use Eye Protection Injury Se NO API Ejected	, US Crash Seat Position 07 - LEFT everity PARENT INJURY Ejection Path	SCOT JOHNSR Citations Issued Date of Birth Driver License Nur STATE: WISCON Safety Equipment SHOULDER & L Helmet Compliance Airbag NON DEPLOYE	Sex MALE Race NSIN COUNTRY: UN AP BELT	Trapped/Extricated					
UNIT		Insurance Company AMERICAN-FAMILY-INS-C Individual Driver SCOT JOHNSRUD (608) 574-0148 Address 4595 PENNY LN DODGEVILLE, WI 53533 Fety Equipment On Duty Fety Equipment On Duty Fety Equipment On Duty Helmet Use Eye Protection Injury Se NO API Ejected NOT EJECTED	, US Crash Seat Position 07 - LEFT	SCOT JOHNSR Citations Issued Date of Birth Driver License Nur STATE: WISCON Safety Equipment SHOULDER & L Helmet Compliance Airbag NON DEPLOYE PLICABLE	Sex MALE Race NSIN COUNTRY: UN AP BELT	Trapped/Extricated NOT TRAPPED					
UNIT		Insurance Company AMERICAN-FAMILY-INS-C Individual Driver SCOT JOHNSRUD (608) 574-0148 Address 4595 PENNY LN DODGEVILLE, WI 53533 Fety Equipment On Duty Fety Equipment On Duty Helmet Use Eye Protection Injury Se NO API Ejected	, US Crash Seat Position 07 - LEFT everity PARENT INJURY Ejection Path	SCOT JOHNSR Citations Issued Date of Birth Driver License Nur STATE: WISCON Safety Equipment SHOULDER & L Helmet Compliance Airbag NON DEPLOYE	Sex MALE Race NSIN COUNTRY: UN AP BELT	Trapped/Extricated					
UNIT		Insurance Company AMERICAN-FAMILY-INS-C Individual Driver SCOT JOHNSRUD (608) 574-0148 Address 4595 PENNY LN DODGEVILLE, WI 53533 On Duty Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Se NO API Ejected NOT EJECTED Medical Transport	, US Crash Seat Position 07 - LEFT everity PARENT INJURY Ejection Path	SCOT JOHNSR Citations Issued Date of Birth Driver License Nur STATE: WISCON Safety Equipment SHOULDER & L Helmet Compliance Airbag NON DEPLOYE PLICABLE	Sex MALE Race NSIN COUNTRY: UN AP BELT	Trapped/Extricated NOT TRAPPED					
UNIT		Insurance Company AMERICAN-FAMILY-INS-C Individual Driver SCOT JOHNSRUD (608) 574-0148 Address 4595 PENNY LN DODGEVILLE, WI 53533 Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Se NO API Ejected NOT EJECTED Medical Transport NOT TRANSPORTED	, US Crash Seat Position 07 - LEFT everity PARENT INJURY Ejection Path	SCOT JOHNSR Citations Issued O Date of Birth Driver License Nur STATE: WISCON Safety Equipment SHOULDER & L Helmet Compliance Tint Compliance Airbag NON DEPLOYE PPLICABLE EMS Agency Ident	Sex MALE Race NSIN COUNTRY: UN AP BELT	Trapped/Extricated NOT TRAPPED EMS Run #					

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Distracted By NOT APP	By Source	CTED)							
		Distracted By Action		,							
	_	NOT DISTRACTED	it # Location								
		Non Motorist	Location								
		Prior Action	·								
		Action									
	IAL										
	INDIVIDUAL										
	Z										
		Action Other					To/From School				
	ا ح	Suspected	Alcohol Use	Suspected Drug Use							
		Alcohol NO		NO		Alcohol Test Results					
		TEST NOT GIVEN	Alcohol Test Type			Alcohol Test Results					
		Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results		I					
~	2	Drug Type									
02	002										
		Individual Condition									
		APPEARED NORMAL									
		la alla dalara I									
		ndividual Passenger		Citations Issued	Sex						
	Ļ	DAVID STRAKA (608) 574-1613	0	MALE							
_	INDIVIDUAL	(606) 574-1615		Date of Birth	Race WHITE						
LNU LNT	Ξ	Address		Driver License Number							
-	N	106 W GRANT ST MONTFORT, WI 53569 , US	STATE: WISCONSIN COUNTRY: UNITED STATES								
		, ,									
	Saf	On Duty Cr fety Equipment	ash	Safety Equipment							
		Row	Seat Position	SHOULDER & LAP BELT							
		01 - FRONT ROW	09 - RIGHT								
		Helmet Use		Helmet Compliance							
		Eye Protection		Tint Compliance							
02	003	Injury Seve	rity	Airbag							
0	õ	Injury NO APPA	RENT INJURY	NON DEPLOYED							
			OT EJECTED/NOT APPL	ICABLE		NOT TRAPPED					
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier	r	EMS Run #					
		Hospital		Date of Death		Time of Death					
		Distracted I	By Source								
		Distracted By	_,								

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WISCONSIN MOTOR VEHICLE CRASH REPORT

Distracted By Action Non Motorist Prior Action Action

	-	Action Other						To/From School
	Ĺ		Suspected Alcohol U	se	Suspected Drug Use			
		Alcohol Test Given		Alcohol Test Type	1		Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	3	
02	003	Drug Type		•		•		
		Individual Condition	MAL					