6TL0DRXHJT

23-10519

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash Document # Crash Time 07:15 AM		Agency Crash Number 23-10519 Date Arrived 09/27/2023		Investigating Officer/Deputy DEPUTY S. ELLICKSON Time Arrived 07:21 AM			
5	Crash Date 09/27/2023								
Ľ X	Date Notified 09/27/2023	Time Notified 07:15 AM		Total Units 02		Total Injured	d Total Kill	ed	
6 I LUUKXHJ I	On Emergency	and Run	Lane Clos				or Towed	Reporting Threshold	
2 L	Government Property		hool Zone	School NO	Bus Related	Tags			
	Reportable	Crash Type DT4000 (STA	NDARD CRASH	H)		Amen	ded	Secondary Crash	
	Description								
	Not to Scale		STH 23			W S S	Photos By	ormation	
	, a sworn law enforceme	nt officer, agre	ee that I have no	ot adde	d any CJIS data in t	his report.	<u> </u>		
	UNIT 1 WAS TRAVELING WESTBOI GREEN AND PROCEEDED THROU INTERSECTION. UNIT 2 CONTINUE CAME TO A STOP STILL FACING V	UND ON USH 14 ' GH THE INTERSE ED THROUGH TH	WHILE UNIT 2 WAS ECTION. WHEN UN	S TRAVEL	ING NORTH BOUND ON B HEADING INTO THE IN	I STH 23. UNIT 2 ITERSECTION UN	IT 1 WAS APPR	OACHING THE	

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data. $1 \quad \text{of} \quad 7$

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	Loc	ation									
ſ	ON	PRAIRIE VIEW RD/ S	TH23 EB			Latitude			Longit	ude	
	-	FT N	43.18998	80339		-90.07	73850577				
	IN T	USH14 EB HE TOWN OF SPRING AUK COUNTY	X Coordinate 250221.046875			Y Coo 4786	rdinate 500				
			Structure T								
(Cra	sh Scene									
Ī		Harmful Event				First Harm	ful Event I	ocation			
	MO	TOR VEH IN TRANSP	ORT			ON ROA		oodion			
	Manı	ner of Collision				Light Cond	dition				
	01 -	ANGLE				DAYLIGI	нт				
	Road	d Surface Condition(s)				Roadway	Factor(s)				
	WE	г									
	Envi	ronment Factor(s)									
	NOM	NE				NONE					
	Wea	ther Condition(s)									
	RAI										
	Anim	nal Type				Relation T	o Trafficwa	N/			
							Relation To Trafficway TRAFFICWAY - ON ROAD				
ĺ		h Classification - Location	1			Crash Classification - Jurisdiction					
	PUBLIC PROPERTY Tribal Land					NO SPECIAL JURISDICTION Access Control				Special Study	
						FULL CO	ONTROL				
	Withi NO	in Interchange Area	Junction Location		Intersection	on Type IAY INTER	SECTIO	N			
Ī	Unit	t Summary 🛛 🗖									
	Unit	Status		Vehicle Op	erating As C	lassification		Unit Type			
		IN TRANSIT D CLASS					TRUCK				
5	Vehicle Type UTILITY TRUCK/PICKUP TRUCK							Operating As		Endorsements	
	-		Train/Bus # Recorded	Total # Cita	ations Issued	d Total Trai		lers	Total H	azMat Types	
	1			1		0		0			
Ī		rance?	Direction Of Travel	Pre CrashTir						anes	
	YES		WESTBOUND		Mark	45		2 Emergency Motor V			
		Harmful Event: Collision			Special Function NO SPECIAL FUNCTION			Emergency NOT APPL			
		ic Way	OKI	Traffic Con				Traffic Control Inoperative/Missing			
	•				TRAFFIC SIGNAL			NO			
ľ		асе Туре		Road Curva	Road Curvature			Road Grade			
		CKTOP (BITUMINOU	JS)	STRAIGH	IT	L		LEVEL			
	Truci	k Bus or HazMat									
	'	Vehicle									
	ĺ	License Plate Number		Plate Type	Э		St	Country of Iss	suance		
		333733			GHT TRUC			UNITED STATES			
5	5	Vehicle Identification Number 3GCUKREC2GG243060 Color BLK - BLACK W			Make CHEVROLET Body Style PK - PICKUP Vehicle Damage		Year	Model			
	0						2016	SILVERAD Bus Use	0		
	щ	Initial Contact Point									
=										7 8 9 10 11	
	EHICLE	Initial Contact Point		Vehicle Da		RONT				7 8 9 10 11 6 7 8 9 10 11 5 4 3 2 1	

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.



23-10519

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Towed Due To Damage TOWED DUE TO DISAE	BLING DAMAGE	Vehicle Remove	ed By				
		What Driver Was Doing		Vehicle Factors					
		GOING STRAIGHT Driver Prior Action Other			ABLE				
		Driver Actions DISREGARDED RED LI	IGHT						
F	VEHICLE								
UNIT	Ĭ								
	۳								
		Owner Name		Owner Add	ress				
2	6	RICHARD PIERCE (608) 882-6636		550 VISIO)N DR LLE, WI 53536,US	8			
0	0	(000) 002-0000		LIANOV	LLL, 111 00000 , 00	-			
		Sequence Of Events	S						
	6	Event MOTOR VEH IN TRANS	PORT						
	02	Event							
	03	Event							
	64	Event							
UNIT		Policy Holder	Individual	Individual					
5		AUTO-OWNERS-INS-CO			RICHARD PIERCE				
	1	Individual							
		Driver RICHARD PIERCE			Citations Issued Sex 1 MALE				
	AL	(608) 882-6636		Date of Birth	Date of Birth Race				
╘	INDIVIDUAL				WHITE				
UNIT	S	Address 550 VISION DR		Driver Licens	Driver License Number Safety Equipment				
	Z	EVANSVILLE, WI 53536	6,US						
			ut. Creek						
	Saf	fety Equipment	uty Crash	Safety Equip	ment				
		Row	Seat Position	SHOULDE	R & LAP BELT				
		01 - FRONT ROW Helmet Use	07 - LEFT	Helmet Com	Helmet Compliance				
		Tiennet 03e		Tienner Com					
		Eye Protection		Tint Complia	Tint Compliance				
6	001	I	Severity	Airbag	Airbag				
0	8	Ejected	APPARENT INJURY Ejection Path	NON DEPL	OYED	Trapped/Extricated			
		NOT EJECTED	NOT EJECTED/NOT	APPLICABLE		NOT TRAPPED			
		Medical Transport		EMS Agency	Identifier	EMS Run #			
		NOT TRANSPORTED Hospital		Date of Deat		Time of Death			
				Date of Deat		Time of Dealth			
		Distracted By NOT	acted By Source	STRACTED)					
		Distracted By Action NOT DISTRACTED							
		NOT DIGHTAGTED							

Wisconsin Motor Vehicle Crash Form DT4000 This report does not include any CJIS data. 3 of 7

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Non Motorist	Striking Unit	#	Location							
		Prior Action										
		Action										
	JAL											
UNIT	INDIVIDUAL											
	INDI											
		Action Other										To/From School
	L	Drug & Alcohol	Suspected A NO	lcohol U	se		Suspected Drug Use					
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Ty	/pe				Alcohol Test	t Results	
1		Drug Test Given TEST NOT GIVEN			Drug Test Type	Э		Drug	Fest Results	1		
2	001	Drug Type										
		Individual Condition										
	APPEARED NORMAL											
	,	Violations										
	01	UTC Number BJ679324	Issue To? 001	Stat 346	ute Number 5.46(1)		Description FAIL/STOP AT STOP	P SIGN	ı			
		t Summary										
						Vehicle Operating As Classification D CLASS			Unit Type AUTOMOBILE			
02	Vehi	Vehicle Type			-				Operating As Endorsements			
0		SENGER VAN	Train/B	us # Ro	corded	Total # Citations Issued Total Traile			are	Total Haz	Mat Types	
	10ta 2	Total Occs Train/Bus # Recorded 2			0		0			viat Types		
┝		Insurance? Direction Of Travel YES NORTHBOUND			Pre CrashTire Speed Lin Mark 40		Speed Lim 40	mit Total Lanes 2		25		
UNIT						Special Function NO SPECIAL FUNCTION			Emergency Motor Vehicle Use NOT APPLICABLE			
		ic Way D-WAY, NOT DIVID E	ED				Traffic Control TRAFFIC SIGNAL			Traffic Control Inoperative/Missing NO		
	Surfa	асе Туре				Ro	Road Curvature			Road Grade		
		CKTOP (BITUMINC k Bus or HazMat	DUS)			S	STRAIGHT LEVEL					
	NO											
	1	Vehicle							<u></u>	2		
		License Plate Number 189WWP				51		Country of Is: UNITED ST				
02	02	Vehicle Identification N					Make Year		Model			
	0	2C4RDGCG7FR73 Color	2783				ODGE ody Style			GRAND CA Bus Use	ARA	
		RED - RED					N - VAN					
		Initial Contact Point 01 - RIGHT FRONT										7 8 9 10 11
			. JUNEA			Т						6 Ferrit 12 5 4 3 2 1

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data. $\begin{array}{c} 4 \quad \text{of} \quad 7 \end{array}$
 Crash Date
 09/27/2023

 Crash Time
 07:15 AM

23-10519

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	щ		V	ehicle Damage			
UNIT	VEHICLE		01 - RIGHT FRONT CORNER				
5	H	Extent Of Damage					
	5	DISABLING DAMAGE	14	ehicle Removed By			
		Towed Due To Damage TOWED DUE TO DISABLING		enicle Removed by			
		What Driver Was Doing	Ve	ehicle Factors			
		GOING STRAIGHT	N	OT APPLICABLE			
		Driver Prior Action Other					
		Driver Actions					
Г	VEHICLE	NO CONTRIBUTING ACTION	N				
UNIT	₽						
2	ē						
	-						
		Owner Name CAROL SCHMALOWS	4	Owner Address 217 LINS CT			
02	8	(608) 588-2928	N.	SPRING GREEN, W	VI 53588 , US		
-	-						
	:	Sequence Of Events					
	2	Event MOTOR VEH IN TRANSPOR	т				
	-	Event					
	02	Event					
	03	Event					
	8	Event					
	-						
		Policy Holdor					
۲I	I	Policy Holder		Individual			
UNIT	I	Policy Holder Insurance Company AMERICAN-FAMILY-INS-CO		Individual CAROL SCHMALOV	VSKI		
UNIT		Insurance Company	,		VSKI		
UNIT		Insurance Company AMERICAN-FAMILY-INS-CO Individual Driver		CAROL SCHMALOV Citations Issued	Sex		
UNIT		Insurance Company AMERICAN-FAMILY-INS-CO Individual		CAROL SCHMALOV Citations Issued 0	Sex FEMALE		
		Insurance Company AMERICAN-FAMILY-INS-CO Individual Driver CAROL SCHMALOWS		CAROL SCHMALOV Citations Issued	Sex		
		Insurance Company AMERICAN-FAMILY-INS-CO Individual Driver CAROL SCHMALOWS		CAROL SCHMALOV Citations Issued 0	Sex FEMALE Race		
UNIT UNIT		Insurance Company AMERICAN-FAMILY-INS-CO Individual Driver CAROL SCHMALOWSF (608) 588-2928 Address 217 LINS CT	KI	CAROL SCHMALOV Citations Issued 0 Date of Birth	Sex FEMALE Race		
		Insurance Company AMERICAN-FAMILY-INS-CO Individual Driver CAROL SCHMALOWSF (608) 588-2928 Address	KI	CAROL SCHMALOV Citations Issued 0 Date of Birth	Sex FEMALE Race		
		Insurance Company AMERICAN-FAMILY-INS-CO Individual Driver CAROL SCHMALOWSH (608) 588-2928 Address 217 LINS CT SPRING GREEN, WI 53588	(I , US	CAROL SCHMALOV Citations Issued 0 Date of Birth Driver License Number	Sex FEMALE Race		
	INDIVIDUAL	Insurance Company AMERICAN-FAMILY-INS-CO Individual Driver CAROL SCHMALOWSF (608) 588-2928 Address 217 LINS CT	(I , US	CAROL SCHMALOV Citations Issued 0 Date of Birth	Sex FEMALE Race		
	INDIVIDUAL	Insurance Company AMERICAN-FAMILY-INS-CO Individual Driver CAROL SCHMALOWSH (608) 588-2928 Address 217 LINS CT SPRING GREEN, WI 53588 ,	(I , US	CAROL SCHMALOV Citations Issued 0 Date of Birth Driver License Number	Sex FEMALE Race WHITE		
	INDIVIDUAL	Insurance Company AMERICAN-FAMILY-INS-CO Individual Driver CAROL SCHMALOWSH (608) 588-2928 Address 217 LINS CT SPRING GREEN, WI 53588 fety Equipment	KI , US ash	CAROL SCHMALOV Citations Issued 0 Date of Birth Driver License Number Safety Equipment	Sex FEMALE Race WHITE		
	INDIVIDUAL	Insurance Company AMERICAN-FAMILY-INS-CO Individual Driver CAROL SCHMALOWSH (608) 588-2928 Address 217 LINS CT SPRING GREEN, WI 53588 fety Equipment Row	KI , US ash Seat Position	CAROL SCHMALOV Citations Issued 0 Date of Birth Driver License Number Safety Equipment	Sex FEMALE Race WHITE		
	INDIVIDUAL	Insurance Company AMERICAN-FAMILY-INS-CO Individual Driver CAROL SCHMALOWSH (608) 588-2928 Address 217 LINS CT SPRING GREEN, WI 53588 fety Equipment Row 01 - FRONT ROW Helmet Use	KI , US ash Seat Position	CAROL SCHMALOV Citations Issued 0 Date of Birth Driver License Number Safety Equipment SHOULDER & LAP	Sex FEMALE Race WHITE		
	INDIVIDUAL	Insurance Company AMERICAN-FAMILY-INS-CO Individual Driver CAROL SCHMALOWSH (608) 588-2928 Address 217 LINS CT SPRING GREEN, WI 53588 fety Equipment Row 01 - FRONT ROW	KI , US ash Seat Position	CAROL SCHMALOV Citations Issued 0 Date of Birth Driver License Number Safety Equipment SHOULDER & LAP	Sex FEMALE Race WHITE		
UNIT	INDIVIDUAL	Insurance Company AMERICAN-FAMILY-INS-CO Individual Driver CAROL SCHMALOWSH (608) 588-2928 Address 217 LINS CT SPRING GREEN, WI 53588 On Duty Cre Row 01 - FRONT ROW Helmet Use Eye Protection Injury Sevent	KI , US ash Seat Position 07 - LEFT	CAROL SCHMALOV Citations Issued 0 Date of Birth Driver License Number Safety Equipment SHOULDER & LAP	Sex FEMALE Race WHITE		
UNIT		Insurance Company AMERICAN-FAMILY-INS-CO Individual Driver CAROL SCHMALOWSH (608) 588-2928 Address 217 LINS CT SPRING GREEN, WI 53588 fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Seven SUSPECT Ejected	KI , US ash Seat Position 07 - LEFT rity FED MINOR INJURY ection Path	CAROL SCHMALOV Citations Issued 0 Date of Birth Driver License Number Safety Equipment SHOULDER & LAP I Helmet Compliance Tint Compliance Airbag DEPLOYED-FRONT	Sex FEMALE Race WHITE	Trapped/Extricated	
UNIT		Insurance Company AMERICAN-FAMILY-INS-CO Individual Driver CAROL SCHMALOWSH (608) 588-2928 Address 217 LINS CT SPRING GREEN, WI 53588 Address 217 LINS CT SPRING GREEN, WI 53588 On Duty Cr fety Equipment Not FRONT ROW Helmet Use Eye Protection Injury Sever SUSPECT Ejected NOT EJECTED NO	KI , US ash Seat Position 07 - LEFT	CAROL SCHMALOV Citations Issued 0 Date of Birth Driver License Number Safety Equipment SHOULDER & LAP I Helmet Compliance Tint Compliance Airbag DEPLOYED-FRONT ICABLE	Sex FEMALE Race WHITE	NOT TRAPPED	
UNIT		Insurance Company AMERICAN-FAMILY-INS-CO Individual Driver CAROL SCHMALOWSH (608) 588-2928 Address 217 LINS CT SPRING GREEN, WI 53588 Address 217 LINS CT SPRING GREEN, WI 53588 On Duty Cr fety Equipment Not Duty Cr CR CAROL SCHMALOWSH (608) 588-2928 On Duty Cr CR CR CAROL SCHMALOWSH (608) 588-2928 On Duty Cr CR CR CR CR CR CR CR CR CR CR	KI , US ash Seat Position 07 - LEFT rity FED MINOR INJURY ection Path	CAROL SCHMALOV Citations Issued 0 Date of Birth Driver License Number Safety Equipment SHOULDER & LAP I Helmet Compliance Tint Compliance Airbag DEPLOYED-FRONT	Sex FEMALE Race WHITE		
UNIT		Insurance Company AMERICAN-FAMILY-INS-CO Individual Driver CAROL SCHMALOWSH (608) 588-2928 Address 217 LINS CT SPRING GREEN, WI 53588 Address 217 LINS CT SPRING GREEN, WI 53588 On Duty Cr fety Equipment Not FRONT ROW Helmet Use Eye Protection Injury Sever SUSPECT Ejected NOT EJECTED NO	KI , US ash Seat Position 07 - LEFT rity FED MINOR INJURY ection Path	CAROL SCHMALOV Citations Issued 0 Date of Birth Driver License Number Safety Equipment SHOULDER & LAP I Helmet Compliance Tint Compliance Airbag DEPLOYED-FRONT ICABLE EMS Agency Identifier	Sex FEMALE Race WHITE	NOT TRAPPED	

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Distracted By NOT A	ted By Source	ACTED)							
		Distracted By Action NOT DISTRACTED									
		Non Motorist	Unit # Location								
		Prior Action									
İ.		Action									
	F										
⊨	INDIVIDUAL										
UNIT	N										
	Z										
		Action Other					To/From School				
		Drug & Alcohol NO	ted Alcohol Use	Suspected Drug Use			•				
		Alcohol Test Given	Alcohol Test Ty	pe		Alcohol Test Results					
		TEST NOT GIVEN Drug Test Given	Drug Test Type		Drug Test Resu	lts					
		TEST NOT GIVEN			2.09.000.000						
8	002	Drug Type									
		Individual Condition									
		APPEARED NORMAL									
		Individual Passenger		Citations Issued	Sex						
	Ļ	BENTLEY RINGELSTETTER (608) 686-4016		0	MALE						
	INDIVIDUAL			Date of Birth	Race WHITE						
UNIT	Ξ	Address		Driver License Number							
2	g	217 LINS CT SPRING GREEN, WI 5358	88.US								
	Sat	fety Equipment		Safety Equipment							
		Row	Seat Position	SHOULDER & LAP BELT							
		01 - FRONT ROW Helmet Use	09 - RIGHT	Helmet Compliance							
		Eye Protection		Tint Compliance							
8	003	Injury S	everity IBLE INJURY								
	0	Ejected	Ejection Path	DEPLOYED-FRONT							
		NOT EJECTED	NOT EJECTED/NOT AP	PLICABLE		Trapped/Extricated NOT TRAPPED					
		Medical Transport	•	EMS Agency Identifie	er	EMS Run #					
		NOT TRANSPORTED		Data of Dooth		Time of Death					
		Hospital		Date of Death		Time of Death					
		Distracted By	ted By Source	ž							
 Wise	onsin I	Motor Vehicle Crash	This rep	ort does not include any 0	CJIS data.	Crash Date	09/27/2023				
	DT40			6 of 7			07:15 AM				

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Distracted By Action						
		DISTRACTED BY ACTION						
	l	Non Motorist	Striking Unit #	Location				
		Prior Action		l				
		Action						
	JAL							
UNIT	/IDU							
∍	INDIVIDUAL							
	=							
		Action Other						To/From School
	L	Drug & Alcohol	NO	se	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		
02	003	Drug Type						
	0							
		Individual Condition						
		APPEARED NORM	/IAL					