WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash D	Document #		/ Crash Number -10744	Investigating DEPUTY J			OD	
≷	Crash Date 10/03/2023	Crash Time 08:38 AM		Date A 10/03/		Time Arrived 09:10 AM	d			
ă	Date Notified 10/03/2023	Time Notified 08:40 AM		Total U	Inits	Total Injured 00	l	Total Kille	ed	
6TL0F8QXVW	On Emergency Hit	and Run	Lane Close		Work Zone	Trailer	or T	owed	Reporting Threshold	
9TL	Government Property		hool Zone	NO	Bus Related	Tags				
	✓ Reportable	Crash Type DT4000 (STA	NDARD CRASH	l)		Amend	led		Secondary Crash	
	Description									
	Diagram			/				construction		
	[2]		, s	/ STH 60					GREENWOOD	
			USH 14	2	Not to Sc	rale	PH	ditional Info		
	UNIT 1 WAS EB ON USH 14, STOPI						F UN	T 2 LOOKE	ED DOWN AT HER PHONE	
	AND LOOKED UP AND SAW UNIT 1						. 5141		2 2 3 WAT HEAT HOME	

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	Loc	ation 									
Í		USH14 EB				Latitude			Longit	ude	
	76 F	T W			43.18923	30584		_	-90.070167758		
	OF	STH60 EB				X Coordin				rdinate	
		HE TOWN OF SPRIN	G GREEN			250517.28125			4786		
	IN S	AUK COUNTY				Structure			1.00	100	
							UCTURE				
(Cra	sh Scene 💳									
1	First	Harmful Event				First Harm	nful Event Lo	ocation			
	MO	OR VEH IN TRANSP	ORT			ON ROA	DWAY				
	Manr	ner of Collision			Light Cond	dition					
	03 -	FRONT TO REAR				DAYLIG	HT				
	Road	Surface Condition(s)				Roadway	Factor(s)				
	DRY	•									
	Envir	onment Factor(s)									
	NON	IE				NONE					
	Weat	her Condition(s)									
	CLE	AR									
	Anim	al Type				Relation T	o Trafficwa	/			
						TRAFFIC	CWAY - O	N ROAD			
		n Classification - Location LIC PROPERTY	1				Crash Classification - Jurisdiction NO SPECIAL JURISDICTION				
	Triba	Land			Access Control Special Study			Special Study			
	\\/ithi	n Interchange Area	Lunation Location		Interception	NO CONTROL					
	NO	n interchange Area	Junction Location INTERSECTION-RELATE	D	Intersectio	n rype SECTION					
	Unit	Summary =									
_		Status		Vehicle Ope	erating As Cl	assification		Unit Type			
	IN T	RANSIT		D CLASS	•	AUTOMOBILE					
	Vehic	cle Type						Operating As Endorsements			
5	PAS	SENGER CAR									
	Total	Occs	Train/Bus # Recorded	Total # Cita	tions Issued		Total Trail	ers	Total Ha	azMat Types	
	1			0			0		0		
	Insur	ance?	Direction Of Travel	Pre	CrashTire	e Speed Lir				anes	
-	YES		EASTBOUND		Mark		45		2		
		Harmful Event: Collision		Special Fur		TION		Emergency Motor Vehicle Use			
ا ر		OR VEH IN TRANSP	ORT		IAL FUNC	HON		NOT APPLICABLE			
		c Way	<u></u>	Traffic Cont				Traffic Control Inoperative/Missing NO Road Grade			
		D-WAY, NOT DIVIDED ICE Type	,	NO CONT							
		CKTOP (BITUMINOU	IS)		Road Curvature CURVE RIGHT			LEVEL			
		Bus or HazMat	•	72				-			
	NO										
	1	/ehicle									
		License Plate Number		Plate Type		St Country of Issuance					
		652YWS		AUT - AUTOMOBILE		WI	UNITED STATES				
5	_	Vehicle Identification Nu	Make			Year	Model				
ا د	6	1G1JC5SH9G41273	CHEVRO			2016	SONIC				
		Color CREEN		Body Style				Bus Use			
		GRN - GREEN			SD - SEDAN						
	111			Vahiala Da			Vehicle Damage				
	ΊΕ	Initial Contact Point	ORNER	Vehicle Da						7 8 9 10 11	
Ξ		Initial Contact Point 05 - RIGHT REAR C	ORNER		amage	FAR 05 -	. RIGHT D	FAR CORNI	FR	7 8 9 10 11 6 8 9 12	
LINO	/EHICLE	Initial Contact Point			amage	EAR, 05 -	RIGHT R	EAR CORNI	ER		

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

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Crash Date 10/03/2023
Crash Time 08:38 AM

SC23-10744

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

		Towed Due To Damage			ven	icle Removed By					
		TOWED DUE TO DIS	ABLII	NG DAMAGE	ļ						
		What Driver Was Doing			Veh	icle Factors					
		LEFT TURN			١	T 4 DDI 10 4 DI 5					
		Driver Prior Action Other			NO	T APPLICABLE					
		5									
		Driver Actions	ACTI	ON.							
	Щ	NO CONTRIBUTING	ACTIO	JN							
UNIT	\overline{c}										
5	VEHICLE										
	7										
		Owner Name	4DED	00		Owner Address	END OT				
2	10	SAMANTHA BLIN (262) 949-5288	MBER(55		W3527 WILLOW B LAKE GENEVA, W					
0	0	(202) 343-3200				LAKE GENEVA, W	133147 , 03				
		Sequence Of Ever	nts								
	10	Event LEFT TURN									
		Event									
	02	MOTOR VEH IN TRA	NSPC	RT							
		Event									
	03										
	04	Event									
_	ı	Policy Holder									
LNN		Insurance Company				ndividual					
\neg		PROGRESSIVE-DIRE	ECT-IN	ISURANCE-CO	s	SAMANTHA BLIMBERGS					
		Individual									
		Driver			To	Citations Issued	Sex				
	_	SAMANTHA BLIMBERGS (262) 949-5288			0	0 FEMALE					
	Ψ				D	Date of Birth Race					
_	INDIVIDUAL					WHITE					
Ę	≥	Address			D	Priver License Number					
_	9	W3527 WILLOW BEN									
	=	LAKE GENEVA, WI 5	3147	, US							
	0-4	On	n Duty	Crash	S	Safety Equipment					
	Sai	fety Equipment									
		Row		Seat Position		SHOULDER & LAP	BELT				
		01 - FRONT ROW		07 - LEFT							
		Helmet Use				Helmet Compliance					
						Tint Compliance					
		Eye Protection			T						
	_	Ini	jury Se	verity	-	irhag					
1	9	I		PARENT INJURY	- 1	Airbag NON DEPLOYED					
		Ejected		Ejection Path	1.	TON DEI EOTED		Trapped/Extricated			
		NOT EJECTED		NOT EJECTED/NOT AP	PLIC	ABLE		NOT TRAPPED			
		Medical Transport				MS Agency Identifier		EMS Run #			
		NOT TRANSPORTED									
		INOTIKANSPORTED				Date of Death Time of Death					
		Hospital			D	ate of Death		Time of Death			
					D	ate of Death		Time of Death			
		Hospital	stracte	d By Source				Time of Death			
		Hospital	stracte	d By Source PLICABLE (NOT DISTR				Time of Death			

Wisconsin Motor Vehicle Crash Form DT4000

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Crash Date 10/03/2023
Crash Time 08:38 AM

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

	Non Motorist	king Unit #	Location						
	Prior Action								
	Action								
AL.									
VIDU									
NDI									
	Action Other						To/From School		
L	Drug & Alcohol NO	pected Alcohol U	se	Suspected Drug Use NO			l		
	Alcohol Test Given		Alcohol Test Type			Alcohol Test	Results		
	Drug Test Given		Drug Test Type		Drug Test Resu	lts			
5	Drug Type								
0	la dividual Can dition								
Hai	f Summary								
			Ve	ehicle Operating As Classi	fication	Unit Type			
IN T	RANSIT		D	CLASS		AUTOMOB	BILE		
	* *	<u> </u>				Operating As	s Endorsements		
Tota 1	I Occs	Train/Bus # Re	corded To	otal # Citations Issued	Total Tra		Total HazMat Types 0		
				Pre CrashTire			Total Lanes 2		
Most	t Harmful Event: Collision W	ith	Sı	pecial Function			Motor Vehicle Use		
Traff	ic Way	IXI					Traffic Control Inoperative/Missing		
						Road Grade			
)							
Truc NO	k Bus or HazMat		·			•			
,	Vehicle								
	License Plate Number APL7678			* *	St WI	Country of Issuance UNITED STATES			
02					Year 2010	Model FORESTER	12		
	Color		E	Body Style		Bus Use			
щ	Initial Contact Point	,		-			7 0 0 00 11		
길		RNER		10 - I FET SIDE FROM	T 11. FFT	RONT CORNE	7 8 9 10 11 6 2 2 12		
卓	Extent Of Damage DISABLING DAMAGE			10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER 6 5 4 3 2 1					
>	Towed Due To Damage			/ehicle Removed By					
	Unii Unit IN T Vehi (SP) Tota 1 Insui YES MOO Traff TWO Surfa BLA Truc NO	Action Alcohol Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Type Individual Condition APPEARED NORMAL Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY VEHICLE Total Occs Insurance? YES Most Harmful Event: Collision W MOTOR VEH IN TRANSPO Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS) Truck Bus or HazMat NO Vehicle License Plate Number APL7678 Vehicle Identification Number APL7678 Color SIL - SILVER (ALUMIN	Action Other Action Other Action Other Action Other Action Other Suspected Alcohol UNO Alcohol Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Type Individual Condition APPEARED NORMAL Unit Summary Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY VEHICLE Total Occs 1 Insurance? YES EASTBOUND Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS) Truck Bus or HazMat NO Vehicle License Plate Number APL7678 Vehicle Identification Number JF2SH6AC3AH733788 Color SIL - SILVER (ALUMINUM)	Prior Action Action Action Action Action Action Action Suspected Alcohol Use NO Alcohol Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Type Individual Condition APPEARED NORMAL Unit Summary Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY VEHICLE Total Occs Train/Bus # Recorded Tinsurance? YES EASTBOUND Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS) Truck Bus or HazMat NO Vehicle License Plate Number APL7678 Vehicle Identification Number JF2SH6AC3AH733788 Color SIL - SILVER (ALUMINUM)	Prior Action Action Other Ac	Prior Action Action Other Drug & Alcohol No Suspected Alcohol Use No	Prior Action Action Other Prior Action Action Other Prior Action Suspected Alcohol Use NO Alcohol Test Siven TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Test Results Alcohol Test Test Per Drug Test Results Drug Test Results Dr		

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		What Driver Was Doing		1	/ehicle Factors					
		-		Ι,	renicie ractors					
		NEGOTIATING CURVE			NOT ADDITION E					
		Driver Prior Action Other			NOT APPLICABLE					
		Driver Actions		•						
	Ш	OPERATED MOTOR VEHI	CLE IN IN	ATTENTIVE, CA	RELESS OR ERRATI	C MANNER				
-										
N	VEHICL									
5	亩									
	>									
		Owner Name			Owner Address					
	~	PENNY EHLERS			218 E NEBRASKA					
05	02	(608) 604-5232			MUSCODA, WI 53	573 , US				
		O								
	•	Sequence Of Events								
	10	Event MOTOR VEH IN TRANSPO	DT							
	0	MOTOR VEH IN TRANSPO	/K I							
	7	Event								
	02									
		Event								
	03	Event								
	04	Event								
	0									
		Policy Holder								
EN		Insurance Company			Individual					
5		HARTFORD-FIRE-INS-CO			Individual					
_		HARTFORD-FIRE-INS-CO			PENNY EHLERS					
	- 1	Individual								
		Driver			Citations Issued Sex					
		PENNY EHLERS			1	FEMALE				
	A	(608) 604-5232			Date of Birth	Race				
	Ď				Date of Billi	WHITE				
Ę	NDIVIDUAL	Address			Di I i N h	<u> </u>				
5	\leq	Address			Driver License Number					
	Z	218 E NEBRASKA ST MUSCODA, WI 53573 , US								
		, oc	•							
		On Duty	Crash		Safety Equipment					
	Sat	ety Equipment								
		Row Seat Position		sition	SHOULDER & LAP BELT					
		01 - FRONT ROW	07 - LE							
		Helmet Use			Helmet Compliance					
		Heiliet Ose								
		Eye Protection			Tiet Compliance					
		Eye Protection			Tint Compliance					
02	002	Injury Se	-		Airbag					
_	0	ne in	PARENT I		NON DEPLOYED					
		Ejected	Ejection Pa	ith			Trapped/Extricated			
		NOT EJECTED	NOT EJE	CTED/NOT APPL	LICABLE		NOT TRAPPED			
		Medical Transport			EMS Agency Identifier		EMS Run #			
		NOT TRANSPORTED								
		Hospital			Date of Death		Time of Death			
		Тобриа					Timo or Boats			
		Distracta	d Dy Course	2			<u> </u>			
		Distracted By HAND-H	d By Source	BII E DUONE						
			IELD MO	DILE PHONE						
		Distracted By Action								
		OTHER ACTION (LOOKIN	G AWAY	FROM TASK ET	S)					
		Striking U	Jnit #	Location						
		Non Motorist								

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		Prior Action						
		Action						
	ᆛ							
⊢	Ž							
UNIT	₹							
	INDIVIDUAL							
	_							
		Action Other						To/From School
		Drug & Alcohol	Suspected Alco NO	hol Use	Suspected Drug Use NO			
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results	
		TEST NOT GIVEN						
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		
02	005	Drug Type		•				
	0							
		Individual Condition						
		APPEARED NORM	MAL					
	,	Violations						
	5	UTC Number BK741310	Issue To? 002	Statute Number 346.89(1)	Description INATTENTIVE DRIV	ING		