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23-12863

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Overrie		23-1	ncy Crash Number 1 2863	DEPUTY A. W	ng Officer/Deputy A. WILCOX		
Crash Date Crash Time 11/30/2023 03:23 PM			Date Arrived Time Arriv 11/30/2023 03:42 PI				
Date Notified 11/30/2023	Time Notified 03:25 PM		I Units	Total Injured Total Kille		ed	
On Emergency	Hit and Run	✓ Lane Closure	Work Zone	Trailer or	Towed	Reporting Threshold	
Government Property		shool Zone NO	ool Bus Related	Tags			
✓ Reportable	Crash Type DT4000 (STA	NDARD CRASH)		Amended		Secondary Crash	
Description							
Diagram		Not to scale.		Ph	otos By WILCOX		
	STH 78			Ad PH	ditional Info IOTOS	rmation	
		01	07				
✔ I, a sworn law enformed and the second	prcement officer, agre	ee that I have not add	led any CJIS data in t	his report.			
ON 11/30/2023, I WAS DISI EMS AND MERRIMAC FIR OPERATOR STARTED TO TOWING, I SPOKE WITH A STOPPED AND ATTEMPTI OPERATOR WAS CHOKIN OPERATOR SINCE THE D	PATCHED TO THE AREA (E HAD UNIT 1 OPERATOR HAVE A SEIZURE. UNIT 1 WITNESS WHO STATED ED TO SEE IF UNIT 1 OPE G ON SOME FOOD. THE V	DF E13269 STH 78 IN THE COUT OF UNIT 1 AND ON COASTED INTO THE DIT HE WAS TRAVELING W// RATOR WAS OKAY. THE WITNESS STATED THE B/	TOWN OF MERRIMAC FC A STRETCHER. UNIT 1 W CH ON THE RIGHT SIDE (3 ON STH 78 AND OBSER) WITNESS STATED UNIT 1 ACK PASSENGER WINDO\	DR A TRAFFIC ACCIDEI AS TRAVELING E/B ON DF THE ROAD. UNIT 1 /ED UNIT 1 ENTER THI OPERATOR WAS SHA V WAS BROKEN SO TH	N STH 78 WI WAS REMO E DITCH. TH KING, AND HEY COULD	HEN THE UNIT 1 VED BY EVERETTE'S IE WITNESS STATED HE IT APPEARED THAT UNI GAIN ACCESS TO THE	

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data. $1 \quad \text{of} \quad 4$

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L	.oca	ation 🛛 🗖									
		STH78 NB					Latitude			Longitu	de
	442 FT E OF GRANDVIEW AVE					43.37294	1855		-89.662		
						X Coordin	X Coordinate Y Coordinate		linate		
		HE TOWN OF MERRIN	IAC				284335.46875 4805672.5				
	IN S/	AUK COUNTY					Structure Type				
								UCTURE			
0	ras	sh Scene									
_ `		Harmful Event					First Harm	ful Event I	_ocation		
	DITC	H					ON ROADWAY				
F	Mann	er of Collision					Light Cond	dition			
	00 - I	NO COLLISION W/VEI	HICLE IN TRANSPORT				DAYLIGHT				
-	Road	Surface Condition(s)					Roadway	Factor(s)			
	DRY										
F	Enviro	onment Factor(s)									
	NON	E					NONE				
٢	Weat	her Condition(s)					1				
	CLE	AR									
ľ	Anima	al Type					Relation To Trafficway TRAFFICWAY - ON ROAD				
_	Crock	Classification - Location							- Jurisdiction		
									RISDICTION		
		Land					Access Co				Special Study
		/ithin Interchange Area Junction Location Intersection					NO CONTROL				
						Intersection	N INTERSECTION				
L	NO	osure Type Reasons for C			-						
					ons for Clos	sure					
			Time Initial Lana/Rd Class	od	1		CEMENT, FIRE/EMS				
					LINFURG	JEIMENT, FIRE/EMG					
				Date 9	Scene Clear	ed	т	me Scene Cle	ared		
					Date Scene Cleared 11/30/2023				04:18 PM		
		Summary									
		Status				/ehicle Operating As Cla					
	_			DC	CLASS				AUTOMOBILE Operating As Endorsements		
	Vehicle Type								Operating A	As Endorse	ments
L	PASSENGER CAR Total Occs Train/Bus # Recorded Total				al # Citations Issued Total			Total Tra	ilors	Total Har	Mat Types
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							0		0		
Insurance? Direction Of Travel							Speed Li			les	
	YES		EASTBOUND		Fle Glasiffile		55	2			
					Special Function NO SPECIAL FUNCTION		•	Emergency Motor Vehicle Use			
					Traffic Control				Traffic Control Inoperative/Missing		
	-								NO Road Grade		
			5)		ad Curvature RAIGHT						
	BLACKTOP (BITUMINOUS) S ² Truck Bus or HazMat S ²				STRAIGHT LEVEL						
L	NO				_						
	Vehicle							<u>.</u>			
	License Plate Number AJC4241				Plate Type AUT - AUTOMOBILE Make			St		of Issuance	
	_				^{ke} YOTA			Year 2017	Model COROLLA		
				10				2017	COROLLA		

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					y Style		Bus Use				
		SIL - SILVER (ALUMINUM)			- SEDAN icle Damage						
⊢	Ë	Initial Contact Point 14 - UNDERCARRIAGE			icie Damage			7 8 9 10 11			
UNIT	₽	Extent Of Damage				F		6 12			
>	VEHICLE				14 - UNDERCARRIAGE			5 4 3 2 1			
	>	Towed Due To Damage		Veh	icle Removed By						
		TOWED BUT NOT DUE T	O DISABLING DAMAG		ERETTS TOWING						
		What Driver Was Doing		Veh	icle Factors						
		GOING STRAIGHT									
		Driver Prior Action Other		NO	NOT APPLICABLE						
		Driver Astises									
		Driver Actions UNKNOWN									
-	VEHICLE										
UNIT	≌										
>	山										
	>										
		Owner Name			Owner Address						
	_	JESSICA REO			S7610B ALLBRITE DR						
2	0				MERRIMAC, WI 53561 , US						
		Sequence Of Events									
		Event									
	6	DITCH									
	02	Event									
	•										
	03	Event									
	-	F									
	6	Event									
		Dallara Haldan									
UNIT		Policy Holder		- T.							
5	SAFECO-INS-CO-OF-AMERICA				idividual ESSICA REO						
		ndividual		- 1-							
		Driver			itations Issued	Sex					
		JESSICA REO			0 FEMALE						
	AL			-	ate of Birth	Race					
⊢	DIVIDUAL					WHITE					
UNIT	≥	Address			Driver License Number						
		S7610B ALLBRITE DR									
	Z	MERRIMAC, WI 53561, U	15								
	Sat	On Duty Crash fety Equipment			Safety Equipment						
	Cui										
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT							
		Helmet Use	07 - LEFT		elmet Compliance						
		nemet Ose			Heimer Compliance						
		Eye Protection			Tint Compliance						
6	E S Injury Severity				Airbag						
•	Ejected Ejection Path				NON DEPLOYED						
							Trapped/Extricated				
	NOT EJECTED NOT EJECTED/NOT AP						NOT TRAPPED				
				EMS Agency Identifier 6000555			EMS Run #				
		EMS GROUND		6	0000333						

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		Hospital			Date of Death		Time of Death		
		SAUK PRAIRIE HOSP							
			Distracted By Source	e	1				
		Distracted By	NOT APPLICABL	LE (NOT DISTRAC	CTED)				
		Distracted By Action							
		NOT DISTRACTED							
		Non Motorist	Striking Unit #	Location					
		Prior Action							
		Action							
	INDIVIDUAL								
⊢	Ŋ								
UNIT	Ξ								
	1								
	Ż								
	=								
		Action Other						To/From School	
			Suspected Alcohol L	lse	Suspected Drug Use				
	L	Drug & Alcohol	NO		NO				
		Alcohol Test Given Alcohol Test Type				Alcohol Test Results			
		TEST NOT GIVEN	ST NOT GIVEN						
		Drug Test Given	Drug Test Type			Drug Test Results			
		TEST NOT GIVEN		c <i>n</i>					
-	Σ	Drug Type							
9	001								
		Individual Condition							
		ILL (SICK), FAINTED, NOT OBSERVED							