WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Override		Primary Crash Document #			, , , , , , , , , , , , , , , , , , ,			gating Officer/Deputy JTY A. WILCOX		
Crash Date				Date Arrived			Time Arrived			
12/08/2023			12/08/20			02:36 PM				
Date Notified 12/08/2023		Time Notified 02:31 PM		Total Ur	nits	Total Injure 01	ed	Total Killed	1	
On Emergency	Hit	and Run	Lane Closu		Work Zone		er or T	owed	Reporting Threshold	
Governme		☐ Active Sc.	hool Zone		Bus Related	Tags				
Property	1	Crash Type	TIOOI ZOITE	NO					Secondary	
✓ Reportable		DT4000 (STA	NDARD CRASH	1)		Amer	ided		Crash	
Description										
Diagram							Rec	onstruction	Ву	
					1					
		(52)			(N)					
		76 /		Not to	scale		A. V	tos By WILCOX		
					Shell					
				(Gas		NO	itional Inforr NE	mation	
		50			Station					
			STOP							
	02	5 0	55557A) (***	k-mandy)						
		[5] 0	2	02						
Main Street										
Wall Street										
	STOP	.50								
		'								
		Wachter	Ave.							
		25								
✓ I, a sworn law e	nforceme	nt officer acro	e that I have no	nt added	any CIIS data in t	his ranort				
ON 12/08/2023, I WAS							OR A T	RAFFIC ACC	CIDENT UNIT 1 WAS	
TRAVELING S/B ON W YIELD RIGHT AWAY FI	ACHTER AVE	WHEN UNIT 2 H	IT UNIT 1'S DRIVE	R'S SIDE.	UNIT 2 WAS STOPPED	AT A STOP SIG	N ON N	AIN STREE	T. UNIT 2 FAILED TO	
TILLD RIGHT AWAT FI	NOW THE ST	OI GIGIN AIND 91	NOON ONLL LON I	יוב טעועו	LING SIDE. BOTH UNIT	O WEINE REIVION	LDDI	INACIIRIENE	ING TOWING.	

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

1 of 7

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	LOC	ation									
ſ	ON	WACHTER AVE/ STH2	23 WB			Latitude			Longitu	ıde	
	OF MAIN ST/ CTHR WR					43.278806448 -9			-90.04	90.044020406	
	IN THE VILLAGE OF PLAIN						ate		Y Coor	dinate	
	IN THE VILLAGE OF PLAIN IN SAUK COUNTY						253004.53125 4796277				
			Structure 7	Гуре							
						NO STR					
(Cra	sh Scene									
Ī		Harmful Event				Firet Harm	ful Event L	ocation			
		TOR VEH IN TRANSPO	ORT			ON ROA		ocation			
ŀ		ner of Collision	J.(1			Light Cond					
		ANGLE				DAYLIGI					
ŀ		d Surface Condition(s)				Roadway					
	DR	()									
	Envi	ronment Factor(s)									
	NOI	NE				NONE					
ŀ	1//00	ather Condition(s)									
		. ,									
	CLE	:AK									
ŀ	Anin	nal Type				Relation T	o Trafficwa	ıy			
						TRAFFIC	WAY - O	N ROAD			
Ī	Cras	sh Classification - Location				Crash Clas	ssification -	Jurisdiction			
	PUE	BLIC PROPERTY				NO SPE	CIAL JUR	RISDICTION			
	Triba	al Land				Access Co	ntrol			Special Study	
						NO CONTROL					
Ī	With	in Interchange Area	Junction Location		Intersection	n Type					
	NO		INTERSECTION		FOUR-W	WAY INTERSECTION					
į	Jni	t Summary									
į		t Summary Status		Vehicle Ope	erating As Cla	assification		Unit Type			
į	Unit			Vehicle Ope	_	assification		Unit Type AUTOMO	BILE		
	Unit IN T	Status		-	_	assification				ements	
01	Unit IN T Vehi	Status TRANSIT		-	_	assification		AUTOMO		ements	
	Unit IN T Vehi PAS	Status RANSIT icle Type	Train/Bus # Recorded	D CLASS	_	assification	Total Trai	AUTOMO Operating A	s Endorse	ements izMat Types	
	Unit IN T Vehi PAS	Status FRANSIT icle Type SSENGER CAR	Train/Bus # Recorded	D CLASS		assification		AUTOMO Operating A	s Endorse		
	Unit IN T Vehi PAS Tota 2	Status RANSIT icle Type SSENGER CAR	Train/Bus # Recorded Direction Of Travel	Total # Cita		assification	Total Trai	AUTOMO Operating A	s Endorse	ızMat Types	
01	Unit IN T Vehi PAS Tota 2	Status RANSIT icle Type SSENGER CAR Il Occs rance?		Total # Cita	tions Issued	assification	Total Trai	AUTOMO Operating A	s Endorse Total Ha	ızMat Types	
01	Unit IN T Vehi PAS Tota 2 Insur YES	Status RANSIT icle Type SSENGER CAR Il Occs rance?	Direction Of Travel SOUTHBOUND	Total # Cita 0 Pre Special Fun	crashTire Mark		Total Trai O Speed Lir	AUTOMO Operating A lers mit	Total Ha 0 Total La 2 Motor Ve	nzMat Types nes hicle Use	
	Unit IN T Vehi PAS Tota 2 Insur YES	Status RANSIT icle Type SSENGER CAR Il Occs rance?	Direction Of Travel SOUTHBOUND With	Total # Cita 0 Pre Special Fun	tions Issued CrashTire Mark		Total Trai O Speed Lir	AUTOMO Operating A lers mit Emergency NOT APP	Total Ha 0 Total La 2 Motor Vel	nes hicle Use	
01	Unit IN T Vehi PAS Tota 2 Insur YES Mosi	Status RANSIT icle Type SSENGER CAR Il Occs rance? S t Harmful Event: Collision \	Direction Of Travel SOUTHBOUND With	Total # Cita 0 Pre Special Fun	CrashTire Mark action		Total Trai O Speed Lir	AUTOMO Operating A lers mit Emergency NOT APP	Total Ha 0 Total La 2 Motor Vel	nzMat Types nes hicle Use	
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ONI 01	Unit IN T Vehi PAS Tota 2 Insur YES MOS Traff TWO Surfa BLA	Status FRANSIT icle Type SSENGER CAR II Occs Tance? It Harmful Event: Collision \ TOR VEH IN TRANSPORT ICLE ACKTOP (BITUMINOUS ICLE Bus or HazMat Vehicle License Plate Number 876FGS Vehicle Identification Nur	Direction Of Travel SOUTHBOUND With ORT S)	D CLASS Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AU Make	CrashTire Mark notion IAL FUNC Trol TROL Nature T	TION	Total Trai 0 Speed Lir 25 St WI Year	AUTOMO Operating A lers mit Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST	Total Ha 0 Total La 2 Motor Vel LICABLI rol Inopera	nes hicle Use	
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ONI 01	Unit IN T Vehi PAS Tota 2 Insur YES MOO Traff TWO Surfa BLA Truc NO	Status FRANSIT icle Type SSENGER CAR II Occs rance? St Harmful Event: Collision Name of the Color FROM VEH IN TRANSPORT ICLE License Plate Number 876FGS Vehicle Identification Num JF2SKAXC4MH4014: Color GRN - GREEN	Direction Of Travel SOUTHBOUND With ORT S)	D CLASS Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AU Make SUBARU Body Style UT - SPC	CrashTire Mark action EIAL FUNC Trol TROL ature T JTOMOBIL J ORT UTILIT	TION	Total Trai 0 Speed Lin 25 St WI Year 2021	AUTOMO Operating A lers mit Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST Model FORESTEI	Total Ha 0 Total La 2 Motor Vel LICABLI rol Inopera	nes hicle Use	
01 ONI 01	Unit IN T Vehi PAS Tota 2 Insur YES MOS MO Traff TWO Surfa BLA	Status FRANSIT icle Type SSENGER CAR II Occs rance? St Harmful Event: Collision Name of the Color of the Co	Direction Of Travel SOUTHBOUND With ORT S)	D CLASS Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AU Make SUBARU Body Style	CrashTire Mark action EIAL FUNC Trol TROL ature T JTOMOBIL J ORT UTILIT	TION	Total Trai 0 Speed Lin 25 St WI Year 2021	AUTOMO Operating A lers mit Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST Model FORESTEI	Total Ha 0 Total La 2 Motor Vel LICABLI rol Inopera	nes hicle Use E ative/Missing	
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ONI 01	Unit IN T Vehi PAS Tota 2 Insur YES MOO Traff TWO Surfa BLA Truc NO	Status FRANSIT icle Type SSENGER CAR II Occs rance? St Harmful Event: Collision Name of the Color of the Co	Direction Of Travel SOUTHBOUND With ORT S)	Total # Cita 0 Pre Special Fur NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type AUT - AU Make SUBARU Body Style UT - SPC Vehicle Da	CrashTire Mark action EIAL FUNC Trol TROL ature T JTOMOBIL J ORT UTILIT	TION E	Total Trai 0 Speed Lir 25 St WI Year 2021	AUTOMO Operating A lers mit Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST Model FORESTEI Bus Use	Total Ha 0 Total La 2 Motor Vel LICABLI rol Inopera	nes hicle Use E ative/Missing	

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data. 2 of 7

Crash Date 12/08/2023 Crash Time 02:30 PM

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Towed Due To Damage		Vel	nicle Removed By				
		TOWED DUE TO DISABLI	NG DAMAGE		,				
		What Driver Was Doing		Vel	nicle Factors				
		GOING STRAIGHT							
		Driver Prior Action Other		NC	T APPLICABLE				
		Driver Actions							
	ш	NO CONTRIBUTING ACTION	ON						
⊢	긋								
IND	¥								
>	VEHICLE								
	>								
		Owner Name			Owner Address				
		GARY MEISTER			5503 SCHERBEL	RD			
2	01	(608) 444-3970			BLACK EARTH, W	/I 53515 , US			
		Seguence Of Events							
	•	Sequence Of Events Event							
	10	MOTOR VEH IN TRANSPO	ORT						
		Event							
	02	Event							
		F							
	03	Event							
		Event							
	94	Event							
╘		Policy Holder							
TIN0		Insurance Company			ndividual				
ا –		AMERICAN-FAMILY-INS-C	0	- (SARY MEISTER				
	1	Individual							
		Driver		1	Citations Issued	Sex			
	_	GARY MEISTER		- ()	MALE			
	A	(608) 444-3970		Date of Birth Race					
⊢	INDIVIDUAL			WHITE					
FIND	≥	Address		Driver License Number					
-	9	5503 SCHERBEL RD							
	=	BLACK EARTH, WI 53515	, us						
	-	On Duty	Crash		Safety Equipment				
	Sat	fety Equipment							
		Row	Seat Position	□;	SHOULDER & LAP	BELT			
		01 - FRONT ROW	07 - LEFT						
		Helmet Use	•	1	lelmet Compliance				
		Eye Protection		7	int Compliance				
2	90	Injury Se	verity	- 1	Airbag				
	0	Injury POSSIE			DEPLOYED-SIDE				
		,	Ejection Path				Trapped/Extricated		
			NOT EJECTED/NOT AP				NOT TRAPPED		
		Medical Transport		- [MS Agency Identifier		EMS Run #		
		NOT TRANSPORTED		Ц.					
		Hospital		- '	Date of Death		Time of Death		
		la.	1 D. O	\perp					
		Distracted By NOT AF	d By Source	PΔCT	ED)				
			. LIGHDEL (HOT DIGTR		,				
		Distracted By Action NOT DISTRACTED							

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data. $\begin{tabular}{ll} 3 & of & 7 \end{tabular}$

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							
١٩٢								
Je								
N								
	Action Other						To/From School	
1	Drug & Alcohol NO	ted Alcohol U	lse	Suspected Drug Use NO				
	Alcohol Test Given		Alcohol Test Type	1		Alcohol Test Results		
	Drug Test Given		Drug Test Type		Drug Test Results			
_								
8	2.03 1,70							
	Individual Condition							
	APPEARED NORMAL							
1				I Citationa Inquad	0			
ب	ELAINE MEISTER			0 FEMALE				
DUA	(608) 444-3970			Date of Birth	Race WHITE			
Ž	Address 5503 SCHERBEL RD			Driver License Number				
=	BLACK EARTH, WI 5351	5 , US						
Sat	On Duty	/ Crash		Safety Equipment				
	Row 01 - FRONT ROW			SHOULDER & LAP BELT				
	Helmet Use			Helmet Compliance				
	Eye Protection			Tint Compliance				
005	I !	-	N IIIDV	Airbag				
Ū	Ejected	Ejection Pa	th	<u> </u>		Trapped/Extricated		
	NOT EJECTED Medical Transport	NOT EJE	CTED/NOT APPL	LICABLE EMS Agency Identifier				
	NOT TRANSPORTED							
	-			Date of Death		Time of Death		
	Distracted By Distract	ed By Source	9					
	Distracted By Action							
	Non Motorist Striking	Unit#	Location					
	INDIVIDUAL 001	Prior Action Suspect NO Alcohol Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Type Individual Condition APPEARED NORMAL Individual Passenger ELAINE MEISTEI (608) 444-3970 Address 5503 SCHERBEL RD BLACK EARTH, WI 5351: Safety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Ton Duty Row O1 - FRONT ROW Helmet Use Eye Protection Injury NO AP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital Distracted By Dist	Action Other Drug & Alcohol NO Alcohol Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Type Individual Condition APPEARED NORMAL Individual Passenger ELAINE MEISTER (608) 444-3970 Address 5503 SCHERBEL RD BLACK EARTH, WI 53515 , US Safety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection NO Injury NO APPARENT II Ejected Ejection Pa NOT EJECTED NOT EJECTED Medical Transport NOT TRANSPORTED Hospital Distracted By Distracted By Source	Prior Action Suspected Alcohol Use NO Alcohol Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Type Individual Condition APPEARED NORMAL Individual Passenger ELAINE (608) 444-3970 Address 5503 SCHERBEL RD BLACK EARTH, WI 53515 , US Safety Equipment Row 01 - FRONT ROW 09 - RIGHT Helmet Use Eye Protection Injury NO APPARENT INJURY Ejected NOT EJECTED NOT APPI Medical Transport NOT TRANSPORTED Hospital Distracted By Distracted By Source Striking Unit # Location	Prior Action Test Siven Test NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Test Type Drug Test	Prior Action Action Action Action Action Action Action Drug & Alcohol No Action Action Other Drug & Alcohol Action Other Drug Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Test Type Drug Test Type Drug Test Type Drug Test Results Drug Type Individual Condition APPEARED NORMAL Individual Passenger ELAINE (608) 444-3970 Action Action Action Drug Test Type Drug Test Type Drug Test Results TEST NOT GIVEN Drug Test Type Drug Test Results TEST NOT GIVEN Date of Birth Race WHITE Actions Action Action Action Drug Test Type Drug Test Results TEST NOT GIVEN Drug Test Type Drug Test Results Test Type Drug Test Type Drug Test Type Drug Test Results Test Type Drug Test Type Drug Test Results Test Type Drug Test Type Drug Test Type Drug Test Results Test Type Drug Test Type Drug Test Type Test Type Test Type Drug Test Type Drug Test Type Test Type Test Type Test Type Drug Test Type Test Type Test Type Test Type Test Type Test Type Drug Test Type T	Prior Action Prio	

Wisconsin Motor Vehicle Crash Form DT4000

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Prior Action									
TIND	INDIVIDUAL	Action									
		Action Other To/From School									
	Ĺ	Drug & Alcohol NO	pected Alcohol U	se	Suspected Drug Use NO						
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Typ	e			Alcohol Tes	t Results		
		Drug Test Given TEST NOT GIVEN Drug Test Ty		Drug Test Type		Drug 7	Test Results	5			
2	005	Drug Type									
		Individual Condition APPEARED NORMAL									
1	Uni	Summary									
		Status RANSIT			Vehicle Operating As Class D CLASS	sification		Unit Type AUTOMO	BILE		
05	Vehi	cle Type					Operating As Endorsements				
		SSENGER CAR Il Occs Train/Bus # Recorded			Total # Citations Issued To			ers	Total Haz	HazMat Types	
	1 Insur	rance?	Direction Of Tra		1 Pre CrashTire		0 Speed Lin	nit	0 Total Lan	ies	
LINO	YES	YES WESTBOUND			Mark 25 Special Function				2		
5	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT				NO SPECIAL FUNCTION			NOT APP			
		ic Way D-WAY, NOT DIVIDED			Traffic Control NO CONTROL			Traffic Control Inoperative/Missing NO			
	Surface Type			F	Road Curvature			Road Grade			
		ACKTOP (BITUMINOUS) k Bus or HazMat)		STRAIGHT LEVEL						
	NO	Mahiala									
		Vehicle License Plate Number		Ī	Plate Type		St	Country of Is	suance		
		892NXH Vehicle Identification Number	ner		AUT - AUTOMOBILE Make		WI Year	UNITED S	TATES		
05	02	1C3CDZCB4CN202824			DODGE		2012	AVENGER			
		Color BLU - BLUE			Body Style SD - SEDAN			Bus Use			
_	;LE	Initial Contact Point 12 - FRONT			Vehicle Damage					7 8 9 10 11	
LIND	VEHICLE	Extent Of Damage DISABLING DAMAGE			OP 1 - RIGHT FRONT CORNER, 11 - LEFT FRONT					6	
		Towed Due To Damage TOWED DUE TO DISA	BLING DAMA	GE	Vehicle Removed By				L		
'		What Driver Was Doing GOING STRAIGHT									

Wisconsin Motor Vehicle Crash Form DT4000

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

				_							
				V	/ehicle Factors						
		Driver Prior Action Other			NOT APPLICABLE						
TIND	VEHICLE	Driver Actions LOOKED BUT DID NOT SEE									
02	02	Owner Name SUSAN PEPIN (608) 588-5526			Owner Address 1280 PLAINVIEW RD # 4 PLAIN, WI 53577 , US						
		L Sequence Of Events									
	6	Event MOTOR VEH IN TRANSF									
	02	Event									
	03	Event									
	04	Event									
 	ı	Policy Holder									
TIN0		Insurance Company PROGRESSIVE-CLASSION	C-INS-CO		Individual SUSAN PEPIN						
	ı	Individual									
		Driver SUSAN DEDIN			Citations Issued	Sex					
L	OUAL	SUSAN PEPIN (608) 588-5526			1 Date of Birth	FEMALE Race WHITE					
TINO	INDIMIDNAL	Address 1280 PLAINVIEW RD # 4 PLAIN, WI 53577, US			Driver License Number						
	Sat	On Duty Crash Tety Equipment			Safety Equipment						
		Row 01 - FRONT ROW	Seat Position 07 - LEFT		SHOULDER & LAP BELT						
		Helmet Use			Helmet Compliance						
		Eye Protection			Tint Compliance						
02	003	Injury S	Severity PPARENT I	NILIRY	Airbag NON DEPLOYED						
		Ejected	Ejection Pa		NON BEI EGTEB		Trapped/Extricated				
		NOT EJECTED	NOT EJE	CTED/NOT APPL	ICABLE		NOT TRAPPED				
		Medical Transport NOT TRANSPORTED			EMS Agency Identifier		EMS Run #				
		Hospital			Date of Death		Time of Death				
		Distracted By UNKN	ted By Sourc	е							
		Distracted By Action UNKNOWN									
		Non Motorist Striking	Unit#	Location							

Wisconsin Motor Vehicle Crash Form DT4000

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Prior Action						
		Action						
	_							
İ.	₹							
HND	₫							
5	INDIVIDUAL							
	Ξ							
		Action Other						To/From School
•		Drug & Alcohol	Suspected Alco	hol Use	Suspected Drug Use			
	L	_	NO	1			I	
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results	
		Drug Test Given		Drug Test Type		Drug Test Results		
		TEST NOT GIVEN						
05	003	Drug Type		•		•		
-	ŏ							
İ		Individual Condition						
		APPEARED NORM	лаг					
		AFFEARED NORM	VIAL					
	,	Violations						
	_	UTC Number	Issue To?	Statute Number 346.18(3)	Description FAIL/YIELD RIGHT/	MAY EDOM STO	D SIGN	
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