# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

1	Crash Date <b>12/05/2023</b>	Crash Time			)41		Officer/Deputy . <b>HUNTER</b>			
,		04:45 PM	Crash Time 04:45 PM		Date Arrived 12/05/2023		Time Arrived 08:00 PM			
	Date Notified	Time Notified		Total U	nits	Total Injured		ed		
	12/05/2023	04:48 PM	1	01	T	00	00			
	On Emergency	Hit and Run	Lane Clos		☐ Work Zone	Trailer	or Towed	Reporting Threshold		
	Government Property	Active So	chool Zone	School <b>NO</b>	Bus Related	Tags				
	Reportable	Crash Type DT4000 (STA	NDARD CRASI	H)		Amend	ded	Secondary Crash		
D	Description ====									
[	Diagram						Reconstructio	n By		
	ı		I		<b>O</b>		Photos By			
				"ح	ot to scale					
				5			Additional Info	ormation		
		I		3						
			actually	y a road	curve					
		1	ahead:	sign.						
			NO PASSING ZONE	1	0.11					
						HIII netery				
	, n	I. Maple St.								
				4						
				•						
	□ La sworn law onferes	ment officer car	oo that I have n	ot addes	l any C IIS data in th	is ronort				
	I, a sworn law enforce									

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

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	Loc	ation									
·	_	N MAPLE ST/ CTHI N	В			Latitude			Longit		
	27 FT N						31647		-89.8	66941155	
	OF 1ST ST IN THE VILLAGE OF NORTH FREEDOM IN SAUK COUNTY						X Coordinate Y Coordinate <b>268087.90625 4816534.5</b>				
			Structure Type NO STRUCTURE								
	Cra	sh Scene									
1		Harmful Event				- Finat Harm	ful Fuent La				
		AFFIC SIGN POST					nful Event Lo				
ŀ		ner of Collision				SHOULDER RIGHT Light Condition					
			HICLE IN TRANSPORT			DUSK	ullion				
		d Surface Condition(s)	ENICLE IN TRANSPORT			Roadway Factor(s)					
	DRY	` `	Roadway	racioi(s)							
	Envi	ronment Factor(s)				-					
	NON	NE				NONE					
	Wea	ther Condition(s)				1					
	CLE	AR									
	Anim	nal Type					o Trafficway	, OT ON ROA	n		
ŀ	Cras	h Classification - Location	1								
	PUBLIC PROPERTY					Crash Classification - Jurisdiction NO SPECIAL JURISDICTION					
	Tribal Land				Access Control NO CONTROL					Special Study	
i	With <b>NO</b>	in Interchange Area	Junction Location NON-JUNCTION		Intersection	on Type	CTION				
l I	Ini	- Cummary									
		t Summary Status		Vehicle One	erating As C	laccification		Unit Type			
		RANSIT		D CLASS	•	AUTOMOBILE					
ŀ		cle Type		D OLAGO		Operating As Endorsements					
01	(SPORT) UTILITY VEHICLE							oporag	o 2doc	, omenie	
		Occs	Total # Cita	Total # Citations Issued			ers	Total H	azMat Types		
	Total Occs Train/Bus # Recorded  1			0				0		0	
	Insurance? Direction Of Travel YES NORTHBOUND		Pre	Pre CrashTire		Speed Lim	Speed Limit		Total Lanes 2		
	Most Harmful Event: Collision With			Special Fur				Emergency Motor Vehicle Use		ehicle Use	
5	TRAFFIC SIGN POST NO S				SPECIAL FUNCTION NOT APPLICABL			.E			
		ic Way			Traffic Control				Traffic Control Inoperative/Missing		
		D-WAY, NOT DIVIDED		NO CONT				NO Road Grado			
	Surface Type BLACKTOP (BITUMINOUS)			Road Curva STRAIGH				Road Grade			
ļ		k Bus or HazMat	ادا	STRAIGH				LEVEL			
	NO	N Dub OI Hazivial									
	'	Vehicle									
		License Plate Number ARH4533			Plate Type AUT - AUTOMOBILE		St <b>WI</b>	Country of Issuance UNITED STATES			
		Vehicle Identification Number			Make GENERAL MOTORS COR		Year	Model			
5	2						1996 SUBURBAN		N		
		Color			Body Style Bus Use						
	BLK - BLACK Initial Contact Point 06 - REAR Extent Of Damage				UT - SPORT UTILITY VEHICLE						
				Vehicle Da	Vehicle Damage					7 8 9 10 11	
				00 - NO	DAMAGE					6 7 7 12	
_	Ш	NO DAMAGE								5 4 3 2 1	

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		Towed Due To Damage		Ve	hicle Removed By						
		NOT TOWED			PERATOR						
		What Driver Was Doing		Ve	hicle Factors						
		BACKING									
		Driver Prior Action Other		NC	T APPLICABLE						
		Driver Actions	Driver Actions								
	щ	UNSAFE BACKING									
╘	C										
UNIT	VEHICLE										
_	K										
		Owner Name			Owner Address						
2	10	CALVIN OWENSBY (608) 369-6292			1248 6TH DR						
0	0	(000) 303-0232		FRIENDSHIP, WI 53934 , US							
		Sequence Of Events									
	10	Event TRAFFIC SIGN POST									
		Event									
	02	LVGIIL									
	~	Event									
	03										
	04	Event									
	0										
-	- 1	Policy Holder									
E N		Insurance Company			Individual						
_		PROGRESSIVE-ADVANC	ED-INSURANCE-CO		CALVIN OWENSBY						
	ı	Individual									
		Driver			Citations Issued Sex						
	_	NORMAN ZIMDARS		L	0 MALE						
	INDIVIDUAL	(608) 369-6292			Date of Birth Race WHITE						
╘	<u></u>										
F S	$\leq$	Address 1248 6TH DR			Driver License Number						
	Z	FRIENDSHIP, WI 53934 ,	US								
		,									
		On Duty	Crash	-	Safety Equipment						
	Saf	ety Equipment	Clasii	ď	Salety Equipment						
		Row   Seat Position		$\dashv$	SHOULDER & LAP BELT						
		Helmet Use			Helmet Compliance						
		Eye Protection		1	Tint Compliance						
7	90	Injury Severity			Airbag						
_	0	Injury NO APPARENT INJURY			NON DEPLOYED		I Transad/Extrinated				
		Ejected	Ejection Path				Trapped/Extricated NOT TRAPPED				
		NOT EJECTED NOT EJECTED/NOT APPL  Medical Transport			EMS Agency Identifier		EMS Run #				
	NOT TRANSPORTED			ď	LIVIO Agency Identifier		LMO Ruii #				
		Hospital		$\dashv$	Date of Death Time of Death						
		Distracted B.	ed By Source								
		Distracted By UNKNO	OWN								
		Distracted By Action UNKNOWN									

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		Non Motoris	Striking Unit #	Location				
		Prior Action						
TIND	INDIVIDUAL	Action						
		Action Other						To/From School
	1	Drug & Alcoh			Suspected Drug Use NO			•
		Alcohol Test Given Alcohol Test TEST NOT GIVEN		Alcohol Test Type	е		Alcohol Test Results	
		Drug Test Given Drug Test NOT GIVEN		Drug Test Type		Drug Test Results	3	
2	00	Drug Type						
		Individual Condition						
	Pro	L perty Owner	· _					
PROP 01	(608) 522-4550				Address 105 N MAPLE ST NORTH FREEDOM, V	VI 53951 , US		
	Fixe	ed Objects Str						
	2	3 - 1	Struck Object TRAFFIC SIGN POST	т				Damage Tag Number 337911