23-13650

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash	Document #				Investigating Officer/Deputy DEPUTY S. ELLICKSON				
KS	Crash Date 12/23/2023	Crash Time 02:18 PM		Date Ar 12/23/2			Time Arrived 02:27 PM				
6 I LUDKXHKS	Date Notified 12/23/2023	Time Notified 02:18 PM			nits		Total Injured Total Killed 00 00		ed		
UDF	On Emergency Hi	t and Run	Lane Closu	ıre	Work Zon	е	Trailer o	r Towed	Reporting Threshold		
9 I L	Government Property	Active So	chool Zone	School NO	Bus Related		Tags				
	✓ Reportable	Crash Type DT4000 (STA	NDARD CRASH)			Amende	d	Secondary Crash		
	Description 										
	Diagram Not to Scale					W⊲	ļ DE	Reconstructio	on By		
						5		Photos By			
	Linn Street		4012		Walgreen	s Drive W		Additional Info	ormation		
			U2	U2							
			ige eregy	_							
	I, a sworn law enforceme										
	UNIT 2 WAS TRAVELING WESTBO STOP SIGN IN WALGREENS DRIV PASSENGER SIDE OF THE VEHIC OPPOSITE DIRECTIONS	EWAY. UNIT 1 EX	KITED THE DRIVEW	AY AND T	URNED WESTBO	UND. WHE	N DOING SO I	JNIT 1 STRUC	CK UNIT 2 ON THE		

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Crash Time 02:18 PM

LOC	ation										
_	STH33 WB					Latitude Longitude			de		
	FT W		43.47482773 -89.7697765			776568					
_	STH136 WB					X Coordir	nate		Y Coord	inate	
	THE VILLAGE OF WES	I BARABOO				275981.	5		481727	' 3	
IIN S	BAUK COUNTY				F	Structure	Type				
						Structure Type NO STRUCTURE					
Cra	sh Scene				,						
_	Harmful Event					First Harr	nful Event	Location			
MO	TOR VEH IN TRANSPO	ORT				ON ROADWAY					
Man	ner of Collision				Light Condition						
01 -	ANGLE					DAYLIGHT					
Road Surface Condition(s)						Roadway Factor(s)					
DRY	1										
Envi	ronment Factor(s)										
NON	NE					NONE					
Wea	ther Condition(s)										
CLE	AR										
Anim	nal Type					Relation To Trafficway					
						TRAFFICWAY - ON ROAD					
_	h Classification - Location					Crash Classification - Jurisdiction NO SPECIAL JURISDICTION					
1	BLIC PROPERTY al Land	Access Control				RISDICTION		Special Study			
	Tribal Land					PARTIAL CONTROL					
	in Interchange Area	Junction Location			Intersection						
NO		DRIVEWAY ACCESS-REL			NOT AN I		CHON				
	ure Type			Reasons for Closure							
	IE CLOSURE Initial Lane/Rd Closed	Time Initial Lane/Rd Close	_	1 A\A/	ENFORCE	MENT					
	23/2023	02:22 PM	ea	LAVV	ENFORCE	CEMENT					
	All Lanes Open	Time All Lanes Open		Date S	Scene Cleare						
	23/2023	02:44 PM		12/23/2023 02:22 PM							
	t Summary 💻										
	Status				erating As Cla	assificatio	1	Unit Type			
	RANSIT		D CL	ASS					AUTOMOBILE		
	cle Type ORT) UTILITY VEHICL	=				Operating As Endorsement				ments	
<u> </u>	Occs	Train/Bus # Recorded	Total	# Citat	tione lecued		Total Tr	ailers I	Total Haz	Mat Types	
1	10003	Train/Bus # Necorded	1	Total # Citations Issued			0		0	na. Hazimat Typoo	
	rance?	Direction Of Travel		D	Oue e le Time	Chood Liv		Limit		Total Lanes	
YES		WESTBOUND		Pre	CrashTire Mark	35		4			
	t Harmful Event: Collision		Speci	al Fun	-		1	Emergency		icle Use	
	TOR VEH IN TRANSPO		NO S	SPEC	IAL FUNC	ΓΙΟΝ		NOT APPL	NOT APPLICABLE		
Traff	ic Way		Traffic	c Cont	rol			Traffic Contr	ol Inopera	tive/Missing	
TWO	D-WAY, NOT DIVIDED		STO	P SIG	N/FLASH			NO	,		
Surface Type Road Cur								Road Grade			
BLA	BLACKTOP (BITUMINOUS) STF				Т			LEVEL			
Truc NO	k Bus or HazMat										
	Vehicle										
	License Plate Number		Diota	е Туре			St	Country of lea	suance		
	50610E			٠.	IDANGERE	D RF					
	Vehicle Identification Nur	mber	Make		,		Year	Model	0		
01	MAJ3P1REXJC21602		FOF				2018		ECOSPORT		

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			T			1					
		Color	Body Style Bus Use								
		WHI - WHITE	UT - SPORT UTILITY VEHICLE								
	쁘	Initial Contact Point	Vehicle Damage 7 8 9 10 1								
UNIT	\cong	12 - FRONT	40 EDONT			6 2 12					
 	VEHICLE	Extent Of Damage FUNCTIONAL DAMAGE		12 - FRONT			5 4 3 2 1				
	>	Towed Due To Damage		Vahiala Damayad Dy							
		NOT TOWED		Vehicle Removed By OPERATOR							
		What Driver Was Doing		Vehicle Factors							
		RIGHT TURN		volliolo i dotolo							
		Driver Prior Action Other		NOT APPLICABLE							
		Driver Actions									
	щ	FAILED TO YIELD RIGHT-O	FAILED TO YIELD RIGHT-OF-WAY								
╘	VEHICLE										
UNIT	포										
	7										
		Owner Name	ш	Owner Address	VAV 42 # C E						
01	2	JACKIE LYNN TRYGGESET (608) 370-4583	п	S7559 US HIGHWAY 12 # C-5 NORTH FREEDOM, WI 53951 , US							
0	J	(600, 610 1000									
		Sequence Of Events									
	2	Event MOTOR VEH IN TRANSPOR	RT								
		Frant									
	02	8 Event									
	03	Event									
	40	Event									
_		l Policy Holder									
UNIT		Insurance Company		Individual							
5		WISCONSIN-MUTUAL-INS-	co	JACKIE TRYGGES	SETH						
		ndividual									
		Driver		Citations Issued	Sex						
		JACKIE TRYGGESETH		1	FEMALE						
	₹	(608) 370-4583		Date of Birth	Race						
_	DUAL			WHITE							
LINO	₹	Address		Driver License Number							
)	INDIN	S7559 US HIGHWAY 12 # C		STATE: WISCONSIN COUNTRY: UNITED STATES							
	=	NORTH FREEDOM, WI 5395	51 , US								
	Sa	On Duty C	rash	Safety Equipment							
	Sal	fety Equipment		SHOULDER & LAP BELT							
		Row	Seat Position								
		01 - FRONT ROW	07 - LEFT								
		Helmet Use		Helmet Compliance							
		Eye Protection		T: 10 "							
		Eye Protection		Tint Compliance							
01	001	Injury Seve	=	Airbag							
٥	ŏ		ARENT INJURY	NON DEPLOYED							
		=	jection Path			Trapped/Extricated	_ · ·				
			OT EJECTED/NOT APP			NOT TRAPPED					
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier EMS Run #							

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		Hospital					Date of Death			Time of Dea	nth	
	!	Distracted By	Distracted NOT AP	By Source PLICABI	e L E (NOT DIST I	RAC	CTED)					
		Distracted By Action NOT DISTRACTED)									
	•	Non Motorist	Striking U	nit#	Location							
		Prior Action										
TIND	INDIVIDUAL	Action										
		Action Other										To/From School
	L	Orug & Alcohol	Suspecte NO	d Alcohol	Use		Suspected Drug Use NO					
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type		<u> </u> 			Alcohol Tes			
		Drug Test Given Drug Test T TEST NOT GIVEN			Drug Test Typ	Drug Test Results						
01	001	Drug Type										
		Individual Condition										
		APPEARED NORM	IAL									
	,	Violations										
	01	UTC Number BJ679346	Issue To	? Sta 34	atute Number 6.18(3)		Description FAIL/YIELD RIGHT/N	WAY F	ROM STO	P SIGN		
ĺ	Unit	Summary •										
		Status RANSIT					chicle Operating As Classi CLASS	fication		Unit Type AUTOMO	BILE	
02		cle Type ORT) UTILITY VEHI	CLE							Operating A	s Endorsem	nents
	Total	Occs				ded Total # Citations Issued 0			Total Traile	ers	Total HazMat Types 0	
_	Insur NO	ance?		ction Of T			Pre CrashTire Mark		Speed Lim			s
UNIT		Most Harmful Event: Collision With					Special Function NO SPECIAL FUNCTION			Emergency Motor Vehicle Use NOT APPLICABLE		
		fic Way					Traffic Control NO CONTROL			Traffic Control Inoperative/Missing NO		
		ace Type CKTOP (BITUMINO	OUS)				oad Curvature TRAIGHT			Road Grade LEVEL		
	Trucl	k Bus or HazMat								•		
		Vehicle										
		License Plate Number				F	Plate Type		St	Country of Issuance		
	APW7004					P	UT - AUTOMOBILE	WI	UNITED STATES			

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02		Vehicle Identification Number		Make	Year 2018	Model EQUINOX				
0		2GNAXREV3J6138866		CHEVROLET						
		Color GRY - GRAY		Body Style UT - SPORT UTILITY VEHICLE Bus Use						
	ш	Initial Contact Point		Vehicle Damage						
╘		02 - RIGHT SIDE FRONT		· ·			7 8 9 10 11			
UNIT	VEHICL	Extent Of Damage		03 - RIGHT SIDE MID	DLE		6 <u>§</u> 12			
	VE	DISABLING DAMAGE					3 4 3 2 1			
		Towed Due To Damage TOWED DUE TO DISABL	INC DAMACE	Vehicle Removed By CRAIGS TOWING						
		What Driver Was Doing	ING DAMAGE	Vehicle Factors						
		GOING STRAIGHT		vernoie i dotoro						
		Driver Prior Action Other		NOT APPLICABLE						
		Driver Actions NO CONTRIBUTING ACTION								
—	VEHICLE	NO CONTRIBOTINO ACT	NO CONTRIBUTING ACTION							
LIND	H									
_	VE									
		Owner Name SILAS PATTEN		Owner Address 103 W WALNUT ST						
02	02	(608) 963-1986		NORTH FREEDOM, WI 53951 , US						
		Sequence Of Events								
	01	Event MOTOR VEH IN TRANSPO	ORT							
	02	Event								
		Event								
	03	Event								
	04	Lvein								
	i	Individual								
		Driver		Citations Issued						
	Ļ	SILAS PATTEN (608) 963-1986		0	MALE					
_	DIVIDUAL	(***)		Date of Birth	Race WHITE					
	Σ	Address		Driver License Number						
_	IND	103 W WALNUT ST NORTH FREEDOM, WI 53	0054 110	STATE: WISCONSIN COUNTRY: UNITED STATES						
	=	NORTH FREEDOW, WI 53	991,09	CIALE. MICCORDIN COUNTRY, ONLIED CIALED						
	l	On Duty	v Crash	Safety Equipment						
	Sat	fety Equipment		Caroty Equipmont						
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT						
		Helmet Use		Helmet Compliance						
		Eye Protection		Tint Compliance						
٥,	7	Injury So	everity	Airbag						
05	005	Injury _{NO AP}	PARENT INJURY Ejection Path	NON DEPLOYED						
		Ejected NOT EJECTED	NOT EJECTED/NOT APP	PLICABLE		Trapped/Extricated NOT TRAPPED				
		Medical Transport		EMS Agency Identifier		EMS Run #				
		NOT TRANSPORTED								

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		Hospital			Date of Death		Time of Death	
	,	Distracted By	Distracted By Source NOT APPLICABL	E (NOT DISTRAC	CTED)			
		Distracted By Action NOT DISTRACTED)					
		Non Motorist	Striking Unit #	Location				
		Prior Action						
		Action						
_	UAL							
L	INDIVIDUAL							
	IN							
		Action Other						To/From School
		Action Other						TO/FIGHT SCHOOL
	L	Drug & Alcohol	Suspected Alcohol U NO	Jse	Suspected Drug Use NO			
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		
05	005	Drug Type						
		Individual Condition						
		APPEARED NORM	IAL					