#### 6TL0D942B9

23-13895

## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Overrid	e Primary Cra	sh Document#	Agend <b>23-13</b>	cy Crash Number 8 <b>895</b>	DEPUTY M. PETERSON		
<b>B</b> 3	Crash Date 12/31/2023	Crash Time 09:01 PM			Arrived /2023	Time Arrived 09:53 PM		
42	Date Notified <b>12/31/2023</b>	Time Notifie	i	Total <b>01</b>	Units	Total Injured	Total Kill	ed
0D942B9	On Emergency	Hit and Run	09:04 PM  t and Run ☐ Lane Closu		Work Zone	01 Trailer o		Reporting Threshold
<b>6TL</b>	Government Property	Active	School Zone	School NO	l Bus Related	Tags		
	<b>✓</b> Reportable	Crash Type DT4000 (S	TANDARD CRASH	1)		Amended	I	Secondary Crash
	Description <b>=</b>							
	NOT TO SCALE		*	Speed of the speed		F	hotos By	

UNIT 1 WAS TRAVELING NORTHBOUND ON LYNDON RD. THE ROADS CONDITIONS WERE ICY DUE TO RECENT SNOW AND RAIN. UNIT 1 LOST CONTROL AND BEGAN SLIDING TO THE EAST DITCH DUE TO THE ROAD CONDITIONS. UNIT 1 ENTERED THE EAST DITCH AND WAS SLIDING NORTHEAST TOWARD THE DRIVER SIDE. UNIT 1 STRUCK A FENCE AND ROLLED OVER, PASSENGER SIDE OVER DRIVER SIDE, ONE AND HALF TIMES. UNIT 1 CAME TO REST ON THE PASSENGER SIDE FACING SOUTH EAST. UNIT 1 OPERATOR REPORTED NO INJURIES AND WAS WEARING A SEATBELT. UNIT 1 FRONT SEAT PASSENGER REPORTED A HEAD INJURY AND WEARING A SEATBELT. THE PASSENGER WAS TRANSPORTED TO ST. CLARE HOSPITAL BY DELLS DELTON EMS FOR HER INJURIES. THE VEHICLE SUSTAINED DISABLING DAMAGE AND WAS TOWED BY PLATTS TOWING. UNIT 1 OPERATOR WAS ISSUED A CITATION FOR DRIVING TOO FAST FOR CONDITIONS. ALL PARENTS WERE CONTACTED AND NOTIFIED. THE VEHICLE IS INSURED BY PROGRESSIVE INSURANCE.

✓ I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

Crash Date 12/31/2023
Crash Time 09:01 PM

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**Location** 

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

Crash Time 09:01 PM

	1284	LYNDON RD 4 FT S				43.59787	3154		_	ongitude <b>89.847435245</b>	
		BERRY RD HE TOWN OF DELLON	NΔ						Y Coor		
		AUK COUNTY				270168.4	10625		48311	51	
						Structure NO STR					
(	:ra	sh Scene									
_		Harmful Event				First Harm	ıful Event L	ocation			
	FEN					ROADSI		ocation			
ŀ	Manı	ner of Collision				Light Cond	dition				
	00 -	NO COLLISION W/VEI	HICLE IN TRANSPORT			DARK/U	NLIT				
r	Road	d Surface Condition(s)				Roadway	Factor(s)				
	ICE										
F	Envir	ronment Factor(s)									
	NON	NE				NONE					
	Wea	ther Condition(s)									
	CLC	DUDY									
-	Anim	nal Type					o Trafficwa	•			
-	Cros	h Classification - Location					WAY - O	N ROAD  Jurisdiction			
		BLIC PROPERTY				-		Jurisdiction ISDICTION			
	_	al Land				Access Control Special Study					
L							NO CONTROL				
	Withi					ection Type AN INTERSECTION					
L			NON-JONOTION		NOT AN	INTEROL	011011				
		t Summary Status		Vehicle Ope	erating As C	lassification		Unit Type			
		RANSIT		· ·	D CLASS AUTOMOBILE						
H		cle Type		12 32.100	Operating As Endorsements				ements		
;	PAS	SENGER CAR									
ŀ	Total	Occs	Train/Bus # Recorded	Total # Cita	Total # Citations Issued Total Tra			lers	Total HazMat Types		
L	2			1			0		0		
		rance?	Direction Of Travel	Pre	CrashTire	-		imit Total Lanes		nes	
	YES	) : Harmful Event: Collision V	NORTHBOUND	Special Fun	Special Function		45		Emergency Motor Vehicle Use		
	FEN		viui	NO SPEC					PLICABLE		
ŀ	Traff	ic Way		Traffic Cont	Traffic Control			Traffic Control Inoperative/Missing			
		D-WAY, NOT DIVIDED		NO CONT	NO CONTROL			NO			
		ace Type		Road Curvature			Road Grade				
	BLACKTOP (BITUMINOUS)			STRAIGH	Т			DOWNHI	LL		
	NO	k Bus or HazMat									
1	,	Vehicle									
		License Plate Number		Plate Type	:		St	Country of Is	ssuance		
		ARY5413	AUT - AU	томовіі	_E	WI	UNITED STATES				
	_	Vehicle Identification Num	Make	Make		Year	Model				
	0	1J4FA49S42P750220	JEEP Destricted			2002	WRANGLER /				
		Color BLU - BLUE	Body Style		TY VEHIC	LE	Bus Use				
	ш	Initial Contact Point		Vehicle Da				<u> </u>	I		
	딩	10 - LEFT SIDE FROM	NT		-					7 8 9 10 11	
	VEHICI	Extent Of Damage	15 - ALL	15 - ALL AREAS			6 12				
	VE	DISABLING DAMAGE		5 4 3 2 1							
				in remort desert	in alust	. C IIC -1-4			Crock D	te <b>12/31/2023</b>	
con	nsın N	Notor Vehicle Crash	ını	is report does not	include an	UJIO data.			Ulasii Da	IC 12/31/2023	

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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 DISABLING DAMAGE What Driver Visio Doing GOING STRAIGHT Driver Prior Action Other Driver Actions Sequence Of Events Event Using Part Actions Driver Address Beguine Of Events Driver Driver Actions Driver Actions Driver Actions Driver Actions Driver Address Driver Addre			Towed Due To Damage		Ve	hicle Removed By					
OONG STRAGENT ONCY PRIOR Action Other  Dever Actions SPEED TOO FAST/COND  OWNER Action						PLATTS WRECKER					
Direct Prior Actions Defer						Vehicle Factors					
The part Actions Speed Too FAST/COND    Content Address			GOING STRAIGHT								
DINO DINO PREDITO FASTICOND  SPEED TOO FASTICOND  Diver Name JUSTIN LUKOWSKI (600) 697-1913  Sequence Of Events  FEWRIT RUN OFF ROADWAY RIGHT  SEWRIT RUN OF			Driver Prior Action Other		NC	OT APPLICABLE					
DINO DINO PREDITO FASTICOND  SPEED TOO FASTICOND  Diver Name JUSTIN LUKOWSKI (600) 697-1913  Sequence Of Events  FEWRIT RUN OFF ROADWAY RIGHT  SEWRIT RUN OF											
Downer Name JUSTIN LUKOWSKI GOOS 197-1913  Sequence Of Events  EVENT  PARDEEVILLE, WI 53954 , US  Sequence Of Events  EVENT  OVERTURN/ROLLOVER  POLICY Holder Insurance Company PROGRESSIVE-CLASSIC-INS-CO JUSTIN LUKOWSKI GOOS 697-1913  Date of Birth Rose Ad4 N MAN ST PARDEEVILLE, WI 53954 , US  SEVENT  PROGRESSIVE-CLASSIC-INS-CO JUSTIN LUKOWSKI Individual  Difference GOOS 697-1913  Date of Birth Rose Ad4 N MAN ST PARDEEVILLE, WI 53954 , US  Safety Equipment  On Duty Creath Safety Equipment  On Duty Creath Safety Equipment  On Duty Creath Series  Series  Series  Series Ser			Driver Actions								
Owner Name   JUSTIN LUKOWSKI   G08   697-1913   PARDEEVILLE, WI 53954   , US		ш	SPEED TOO FAST/COND	)							
Owner Name   JUSTIN LUKOWSKI   G08   697-1913   PARDEEVILLE, WI 53954   , US	⊨	SL									
Owner Name   JUSTIN LUKOWSKI   G08   697-1913   PARDEEVILLE, WI 53954   , US	Z	Ħ									
Owner Name   JUSTIN LUKOWSKI   G08   697-1913   PARDEEVILLE, WI 53954   , US	_	Æ									
Second   S		_									
Sequence Of Events  Event RIN OFF ROADWAY RIGHT  Event FENCE  Event OVERTURN/ROLLOVER  Policy Holder Indurance Company PROGRESSIVE-CLASSIC-INS-CO Individual PROGRESSIVE-CLASSIC-INS-CO Individual  The CHLOE LUKOWSKI Individual  The CHLOE LUKOWSKI Individual  Progressive-Classic-Ins-CO Individual  Date of Birth  Racc WHITE  Address 40 A N MAIN ST PARDEEVILLE, WI 53954 , US  Safety Equipment  Row 01 - FRONT ROW 10 - LEFT Helmet Compliance  Tint Compliance  Injury Seventy NO APPARENT INJURY NON DEPLOYED  NOT EJECTED NOT EJECTED NOT EJECTED NOT APPLICABLE NOT TRANSPORTED  Hospital  Distracted By Notor Distracted By Source Distracted By Action  Distracted By			Owner Name			Owner Address					
Event  FUND OFF ROADWAY RIGHT  Event  POLICY HOLDE  FENCE  Event  POLICY HOLDE  FIGURE CLASSIC-INS-CO  Individual  PROGRESSIVE-CLASSIC-INS-CO  JUSTIN LUKOWSKI  Individual  TOTHER  PROGRESSIVE-CLASSIC-INS-CO  JUSTIN LUKOWSKI  (608) 697-1913  Address  Address  Add n MAIN ST  PARDEEVILLE, WI 53954 , US  STATE: WISCONSIN COUNTRY: UNITED STATES  Safety Equipment  On Duly Crash  Safety Equipment  Event  On Duly Crash  Safety Equipment  On Duly Crash  Safety Equipment  On Duly Crash  Safety Equipment  Event  Distracted By Source						404 N MAIN ST					
Event FENCE  Wint OVERTURN/ROLLOVER  Event Date of Birth Race WHITE  Address Address WHITE  Address Address WHITE  Safety Equipment State Sta	2	0	(608) 697-1913								
Event FENCE  Wint OVERTURN/ROLLOVER  Event Date of Birth Race WHITE  Address Address WHITE  Address Address WHITE  Safety Equipment State Sta											
Event FENCE  Wint OVERTURN/ROLLOVER  Event Date of Birth Race WHITE  Address Address WHITE  Address Address WHITE  Safety Equipment State Sta			Sequence Of Events								
Event   OVERTURN/ROLLOVER			Event								
Policy Holder   Insurance Company   Individual   Insurance Company   Individual   Insurance Company   Individual   Insurance Company   Individual		0		SHT							
Solution   Policy Holder   Insurance Company   PROGRESSIVE-CLASSIC-INS-CO   JUSTIN LUKOWSKI   Individual   JUSTIN LUKOWSKI   Individual   PEMALE   Insurance Company   PROGRESSIVE-CLASSIC-INS-CO   JUSTIN LUKOWSKI   Individual   PEMALE   Individual   PEMALE   Individual   Individual   PEMALE   Individual   PEMALE   Individual		02									
Folicy Holder		3									
Policy Holder Insurance Company PROGRESSIVE-CLASSIC-INS-CO Individual Prover Individual Driver Address 404 N MAIN ST PARDEEVILLE, WI 53954 , US  Safety Equipment  Row O1 - FRONT ROW O1 - FRONT ROW Helmet Use Eye Protection  Seat Position O7 - LEFT Helmet Compliance  Eye Protection  Tint Compliance  Ejected NOT APPARENT INJURY NO APPARENT INJURY NO DEPLOYED  Medical Transport NOT TRANSPORTED Hospital  Distracted By NOT APPLICABLE (NOT DISTRACTED)  Distracted By NOT APPLICABLE (NOT DISTRACTED)  Distracted By NOT APPLICABLE (NOT DISTRACTED)  Distracted By NOT SEAT POSITION  Individual JUSTIN LUKOWSKI  FEMALE  Sex FEMALE  FEMALE  PRACE WHITE  PRACE WHITE  PRACE WHITE  Sex FEMALE  FEMALE  Date of Birth Race WHITE  PRACE WHITE  FEMALE  FEMALE  FEMALE  FEMALE  Date of Birth Race WHITE  PRACE WHITE  FEMALE  FEMALE  FEMALE  FEMALE  FEMALE  FEMALE  FEMALE  FEMALE  Transe  WHITE  Distracted By Source NOT TRAPPED  Distracted By NOT APPLICABLE (NOT DISTRACTED)  Distracted By Action		0									
Insurance Company   PROGRESIVE-CLASSIC-INS-CO   JUSTIN LUKOWSKI		04	Event								
Insurance Company   PROGRESIVE-CLASSIC-INS-CO   JUSTIN LUKOWSKI	_		olicy Holder								
Individual   Driver   CHLOE LUKOWSKI (608) 697-1913   Date of Birth   Race   WHITE	Ę					Individual					
Trapped/Extricated   Properties	$\neg$		PROGRESSIVE-CLASSIC	C-INS-CO							
Trapped/Extricated   Properties			Individual								
CHLOE LUKOWSKI (608) 697-1913  The part of Birth are with Texas and A n Main ST PARDEEVILLE, WI 53954 , US  Safety Equipment  On Duty Crash Seat Position O1 - FRONT ROW O7 - LEFT  Helmet Use Helmet Compliance  Eye Protection Tint Compliance  Eye Protection Airbag NON DEPLOYED  Figeted NOT EJECTED NOT EJECTED/NOT APPLICABLE NOT TRAPPED  Medical Transport NOT TRANSPORTED  Hospital Distracted By Source NOT APPLICABLE (NOT DISTRACTED)  Distracted By Action  Tinte of Death  Distracted By Source NOT APPLICABLE (NOT DISTRACTED)  Distracted By Action					Τ,	Citations Issued	Sex				
Date of Birth   Race   WHITE											
Safety Equipment    Row		AL	(608) 697-1913								
Safety Equipment    Row	_	חם									
Safety Equipment    Row	Z	Ξ	Address			Driver License Number	1				
Safety Equipment    Row	_	9			1.	CTATE, MICCONCIN COUNTRY, UNITED CTATES					
Safety Equipment  Row 01 - FRONT ROW 07 - LEFT  Helmet Use  Eye Protection  Injury Severity NO APPARENT INJURY  NON DEPLOYED  Ejected Ejection Path NOT EJECTED NOT EJECTED/NOT APPLICABLE  Medical Transport NOT TRANSPORTED  Hospital  Distracted By Not Applicable (NOT DISTRACTED)  Distracted By Agents Injury Severity NOT DISTRACTED  Distracted By Agents Injury Not Distracted By Source NOT APPLICABLE (NOT DISTRACTED)  Distracted By Agents Injury Severity NOT DISTRACTED		=	PARDEEVILLE, WI 53954 , US			STATE: WISCONSIN COUNTRY: UNITED STATES					
Safety Equipment  Row 01 - FRONT ROW 07 - LEFT  Helmet Use  Eye Protection  Injury Severity NO APPARENT INJURY  NON DEPLOYED  Ejected Ejection Path NOT EJECTED NOT EJECTED/NOT APPLICABLE  Medical Transport NOT TRANSPORTED  Hospital  Distracted By Not Applicable (NOT DISTRACTED)  Distracted By Agents Injury Severity NOT DISTRACTED  Distracted By Agents Injury Not Distracted By Source NOT APPLICABLE (NOT DISTRACTED)  Distracted By Agents Injury Severity NOT DISTRACTED											
Row 01 - FRONT ROW 07 - LEFT  Helmet Use  Eye Protection  Injury  Injury Severity NO APPARENT INJURY  Fjected NOT EJECTED  Medical Transport NOT TRANSPORTED  Hospital  Distracted By Source NOT APPLICABLE (NOT DISTRACTED)  Distracted By Action  SHOULDER & LAP BELT  Injury  SHOULDER & LAP BELT  SHOULDER & LAP BELT  Frapped/Extricated  NOT Trapped/Extricated  NOT TRAPPED  EMS Agency Identifier  EMS Run #  Distracted By Source  NOT APPLICABLE (NOT DISTRACTED)		Cal	On Duty	y Crash	;	Safety Equipment					
NOT TRANSPORTED   Distracted By Source NOT APPLICABLE (NOT DISTRACTED)   Helmet Use   Helmet Compliance		Sai	ety Equipment								
Helmet Use  Eye Protection  Tint Compliance  Injury  Injury Severity NO APPARENT INJURY NON DEPLOYED  Ejected NOT EJECTED  Medical Transport NOT TRANSPORTED  Hospital  Distracted By  Distracted By  Distracted By Action  Helmet Compliance  Tint Compliance  NON DEPLOYED  Find Compliance  Trapped/Extricated NOT TRAPPED  EMS Agency Identifier EMS Run #  Distracted By Source NOT APPLICABLE (NOT DISTRACTED)  Distracted By Action					,	SHOULDER & LAP	BELT				
Eye Protection  Tint Compliance  Injury Severity NO APPARENT INJURY  NON DEPLOYED  Ejected NOT EJECTED NOT EJECTED Medical Transport NOT TRANSPORTED  Hospital  Distracted By Distracted By Distracted By Source NOT APPLICABLE (NOT DISTRACTED)  Distracted By Action				07 - LEFT							
Injury Severity NO APPARENT INJURY  Ejected NOT EJECTED  Medical Transport NOT TRANSPORTED  Hospital  Distracted By Distracted By Distracted By Action  Injury Severity NON DEPLOYED  NON DEPLOYED  Trapped/Extricated NOT TRAPPED  EMS Agency Identifier EMS Run #  Distracted By Source NOT APPLICABLE (NOT DISTRACTED)			Helmet Use			Helmet Compliance					
Injury Severity NO APPARENT INJURY  Ejected NOT EJECTED  Medical Transport NOT TRANSPORTED  Hospital  Distracted By Distracted By Distracted By Action  Injury Severity NON DEPLOYED  NON DEPLOYED  Trapped/Extricated NOT TRAPPED  EMS Agency Identifier EMS Run #  Distracted By Source NOT APPLICABLE (NOT DISTRACTED)			E D : :								
NO APPARENT INJURY   NON DEPLOYED			Eye Protection			Tint Compliance					
NO APPARENT INJURY   NON DEPLOYED		_	I Injury S	everity		Airbag					
Ejection Path NOT EJECTED NOT EJECTED/NOT APPLICABLE NOT TRAPPED  Medical Transport NOT TRANSPORTED  Hospital  Date of Death  Distracted By Source NOT APPLICABLE (NOT DISTRACTED)  Distracted By Action	2	8	Ina :	=							
Medical Transport NOT TRANSPORTED Hospital Date of Death Time of Death  Distracted By Distracted By Source NOT APPLICABLE (NOT DISTRACTED)  Distracted By Action								Trapped/Extricated			
NOT TRANSPORTED  Hospital  Date of Death  Time of Death  Distracted By  NOT APPLICABLE (NOT DISTRACTED)  Distracted By Action			NOT EJECTED	NOT EJECTED/NOT	APPLIC	CABLE					
NOT TRANSPORTED  Hospital  Date of Death  Time of Death  Distracted By  NOT APPLICABLE (NOT DISTRACTED)  Distracted By Action								EMS Run #			
Distracted By Source NOT APPLICABLE (NOT DISTRACTED)  Distracted By Action		NOT TRANSPORTED									
Distracted By NOT APPLICABLE (NOT DISTRACTED)  Distracted By Action			Hospital			Date of Death Time of Death					
Distracted By NOT APPLICABLE (NOT DISTRACTED)  Distracted By Action											
Distracted By Action			Distracted Published	ted By Source	TD 4 2						
				APPLICABLE (NOT DIS	IRAC	IEU)					
			Distracted By Action  NOT DISTRACTED								

#### 6TL0D942B9 23-13895

#### **WISCONSIN MOTOR VEHICLE CRASH REPORT**

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

		_									
		Non Motorist	Striking Ur	nit#	Location						
		Prior Action									
		Action									
	I.										
╘	INDIVIDUAL										
LINO	DIVI										
	Z										
		Action Other							To/From School		
									TO/T TOTH SCHOOL		
	L	Drug & Alcohol	Suspected <b>NO</b>	d Alcohol U	se	Suspected Drug Use	Э				
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type			Alcohol Test Results			
		Drug Test Given TEST NOT GIVEN		Drug Test Type			Drug Test Results	Drug Test Results			
5	001	Drug Type									
		Individual Condition									
		APPEARED NORM	<b>IAL</b>								
		Individual   Passenger   Citations Issued   Sex   Sex   Sex   Citations Issued   Sex   Citations Issued   Citations Issued									
	Ļ	KIERA WESTBURY				0	FEMALE				
⊨	INDIVIDUAL				Date of Birth	Race					
L	DIV	Address 214 MORTON ST				Driver License Number					
	Z	PARDEEVILLE, WI 53954 , US			STATE: WISCON	SIN COUNTRY: UN	ITED STATES				
	Sat	On Duty Crash ety Equipment			Safety Equipment						
		Row 01 - FRONT ROW	Seat Position  09 - RIGHT			SHOULDER & LAP BELT					
		Helmet Use				Helmet Compliance					
		Eye Protection			Tint Compliance						
7	005	Iniury	Injury Severity SUSPECTED MINOR INJURY Ejection Path		IOD IN HIDY	Airbag					
	J	Ejected			th	NON DEPLOYED  Trapped/Extricated					
		NOT EJECTED	NOT EJECTED/NOT APPL								
		Medical Transport EMS GROUND			EMS Agency Identifier EMS Run # 6000123						
		Hospital ST CLARE HOSP				Date of Death		Time of Death			
		Distracted By	Distracted	By Source	;	•		•			
		Distracted By Action									
			Striking Ur	nit#	Location						
		Non Motorist	-								

Crash Date 12/31/2023

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23-13895

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 12/31/2023

Crash Time 09:01 PM

		Prior Action								
		Action								
	AL									
╘	INDIVIDUAL									
UNIT	N									
	Z									
		Action Other	Action Other To/From School							
		Suspected Alcohol Use			Suspected Drug Use		<u> </u>			
	L	Drug & Alcohol	NO		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				
01	002	Drug Type								
0	0									
		Individual Condition	Individual Condition							
		APPEARED NORM	APPEARED NORMAL							
	Ţ	Violations								
	01	UTC Number BG943664	Issue To? <b>001</b>	Statute Number <b>346.57(3)</b>	Description DRIVING TOO FAST	FOR CONDITIO	NS			