24-00748

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

eputy				
DEPUTY A. WILCOX				
Time Arrived 01:10 PM Total Injured Total Killed				
al Killed				
d Reporting				
Threshold				
Secondary Crash				
al Information				
NT. UPON MY ARRIVAL, I WING. UNIT 1 OPERATOR NOW-COVERED. UNIT 1 T BUMPER. UNIT 1 WAS PULLED				
WING. UNIT				

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		·								
		ation							-	
	ON ISHNALA RD				Latitude Longitude					
		FTS				43.579557847			-89.797	187762
-						X Coordinate			Y Coord	inate
		HE TOWN OF DELTON AUK COUNTY				274155.78125			482897	'9
						Structure NO STR	Type UCTURE			
Cra	ae	sh Scene								
_ `		Harmful Event				First Harn	nful Event Lo	ocation		
FE	FENCE				ON ROA					
Ма	Manner of Collision				Light Con	dition				
00	00 - NO COLLISION W/VEHICLE IN TRANSPORT					DARK/L	IGHTED			
Roa	ad	Surface Condition(s)				Roadway Factor(s)				
ICI	Е									
Env	virc	onment Factor(s)								
NC	ON	E				ETC)		CONDITION (WET, ICY, SNOW, SLUSH,		
We	eath	her Condition(s)				1				
CL	.E/	AR								
Ani	Animal Type					Relation To Trafficway				
_							CWAY - O	-		
-	Crash Classification - Location PUBLIC PROPERTY Tribal Land Within Interchange Area Junction Location									
-					NO SPECIAL JURI Access Control NO CONTROL Intersection Type				Special Study	
									, ,	
NC	-		NON-JUNCTION		NOT AN	INTERSE	CTION			
		Summary		Vahiala On			-			
_					Vehicle Operating As Classification D CLASS			Unit Type TRUCK		
	IN TRANSIT Vehicle Type				DCLASS			Operating As Endorsements		
		Occs	Train/Bus # Recorded	Total # Citations Issued 0		0		0		Mat Types
1										
	Insurance? Direction Of Travel			Pre			Speed Lin	nit	Total Lane	es
	YES SOUTHBOUND				Mark 45			1.5	2	
	Most Harmful Event: Collision With Special Function FENCE NO SPECIAL FUN					TION	Emergency Motor Vehicle Use NOT APPLICABLE			
	Traffic Way Traffic Control				Traffic Control Inoperative/Missing		tive/Missing			
тм	TWO-WAY, NOT DIVIDED NO CONTRO				ROL	NO				
	Surface Type Road Curvature					Road Grade				
	BLACKTOP (BITUMINOUS) STRAIGHT Truck Bus or HazMat				Т	LEVEL				
	NO									
	Vehicle									
	License Plate Number		Plate Type			St	Country of Is			
	UE8060				LTK - LIGHT TRUCK		WI			
5	Vehicle Identification Number 1FTEW1EP3GFC93609						Year 2016	Model F150		
0	Color		Body Style			2010	Bus Use			
		RED - RED			PK - PICKUP					
	Initial Contact Point 12 - FRONT									

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۱.	Щ			Vehicle Damage	Vehicle Damage 7 8 9 10 11					
UNIT	VEHICLE	Extent Of Damage		12 EPONT	12 - FRONT					
	μ	MINOR DAMAGE		12 - FRONT			54321			
	~	Towed Due To Damage		Vehicle Removed By						
		NOT TOWED		PLATTS WRECKER						
Ì		What Driver Was Doing		Vehicle Factors						
		GOING STRAIGHT								
		Driver Prior Action Other		NOT APPLICABLE						
ľ		Driver Actions								
	щ	NO CONTRIBUTING AC	TION							
UNIT	VEHICLE									
5	Ξ									
	>									
1		Owner Name		Owner Address						
-	~			643 THOMPSON						
2	6	(608) 617-1664		PORTAGE, WI 5	3901,05					
		Sequence Of Events								
	9	FENCE								
	02	Event								
	03	Event								
		Event								
	04									
⊢		Policy Holder								
UNIT		Insurance Company		Individual						
		PROGRESSIVE-CLASSI	C-INS-CO	DONALD CADY	DONALD CADY					
		Individual								
		Driver DONALD CADY		Citations Issued 0	Sex MALE					
	AL	(608) 617-1664		Date of Birth	Race					
┝┍	D			Bato of Birth						
UNIT	IDIVIDUAL	Address		Driver License Number						
_	Z	643 THOMPSON ST PORTAGE, WI 53901, U	19	STATE: WISCONSIN COUNTRY: UNITED STATES						
	-									
		On Du	ty Crash	Safety Equipment						
	Sa	fety Equipment	,							
		Row	Seat Position	SHOULDER & LA	SHOULDER & LAP BELT					
		01 - FRONT ROW	07 - LEFT							
			VI - EEI I							
		Helmet Use		Helmet Compliance						
		Helmet Use								
				Helmet Compliance						
11	01	Helmet Use Eye Protection	Severity	Tint Compliance						
01	001	Helmet Use Eye Protection Injury NO A	Severity	Tint Compliance		Trapped/Evtricoted				
01	001	Helmet Use Eye Protection	Severity	Tint Compliance Airbag NON DEPLOYED		Trapped/Extricated				
01	001	Helmet Use Eye Protection Injury NO A	Severity PPARENT INJURY Ejection Path	Tint Compliance Airbag NON DEPLOYED						
01	001	Helmet Use Eye Protection Injury NO A Ejected NOT EJECTED Medical Transport NOT TRANSPORTED	Severity PPARENT INJURY Ejection Path	Tint Compliance Airbag NON DEPLOYED APPLICABLE EMS Agency Identified		NOT TRAPPED EMS Run #				
01	001	Helmet Use Eye Protection Injury NO A Ejected NOT EJECTED Medical Transport	Severity PPARENT INJURY Ejection Path	Airbag NON DEPLOYED		NOT TRAPPED				

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		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)							
		Distracted By Action NOT DISTRACTED							
		Non Motoris	Striking Unit #	Location					
		Prior Action							
		Action							
	UAL								
UNIT	INDIVIDUAL								
	IND								
		Action Other							
		To/From School							
Suspected Alcohol Use Drug & Alcohol NO				se	Suspected Drug Use NO				
	Alcohol Test Given Alcohol Test Type Alcohol Tes)		Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN	1	Drug Test Type		Drug Test Results			
6	001	Drug Type							
		Individual Condition							
APPEARED NORMAL									
	Pro	perty Owner							
PROP OWNER 01	Orga JEL (920	rganization/Company ELLY STONE CAMP GROUND 920) 477-0507			Address S1950 ISHNALA ROAI BARABOO, WI 53913				
	Fixe	ed Objects Stru		ł		Ē			
	6	U U	ruck Object E NCE				Structure Number	Damage Tag Number	