24-00661

WISCONSIN MOTOR VEHICLE CRASH REPORT

	Document Number Override 6TL0FB000S	Primary Crash Document #		Agency Crash Number 24-00661		Investigating Officer/Deputy DEPUTY B. FISH				
5	Crash Date 01/17/2024	Crash Time 99:99		Date A		Time Arrived 01:27 PM				
4	Date Notified	Time Notified		Total U		Total Injured	Т	otal Killeo	1	
Ľ	01/18/2024	01:04 PM	T	02		00	0			
Ď.	On Emergency	t and Run	Lane Clos		Work Zone	Trailer or Towed		wed	Reporting Threshold	
0 I LUUCL4NC	Government Property	Active School Zone School Bus Related Tags YES, SCHOOL BUS DIREC								
	Reportable Crash Type DT4000 (STANDARD CRASH)						Amended Sec C			
	Description									
	Not to Scale Deputy Fish #9142 01/17/24		Oakwood	Cir	10 to		Photos DEPU	onal Inforr	H #9142	
	✓ I, a sworn law enforcement	ent officer, agr	ee that I have n	ot adde	d any CJIS data in this	report.				
	UNIT 1 ENTERED THE CULDASAC	AND PERFORME	D A WIDE TURN. I	DURING T	HE COURSE OF THE TURN	THE RIGHT RI		ORNER OF	FUNIT 1 STRUCK THE	
	Amennen I. nanne Shimman/									
	UPDATED INFORMATION									

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Location ON OAKWOOD CIF				1 - 414 1 -			L a se altres	1-	
89 FT S	Latitude 43.272827114			•	Longitude				
OF N WESTBROOM		43.2728	2/114	-90.037284404		284404			
IN THE VILLAGE O				X Coordinate			Y Coord		
IN SAUK COUNTY	,			253526.	984375		479559)3	
				Structure	Туре				
				NO STRUCTURE					
Crash Scene									
First Harmful Event				First Harn	nful Event L	ocation			
MOTOR VEH IN TR	ANSPORT		ON ROA	DWAY					
Manner of Collision				Light Con	dition				
01 - ANGLE				DAYLIG	нт				
Road Surface Condition	n(s)			Roadway	Factor(s)				
SNOW									
Environment Factor(s)									
NONE				NONE					
-									
Weather Condition(s)									
CLOUDY									
Animal Type				Relation 1	To Trafficwa	ау			
				TRAFFI	CWAY - O	N ROAD			
Crash Classification - L			Crash Classification - Jurisdiction						
PUBLIC PROPERT	Y			NO SPECIAL JURISDICTION					
Tribal Land					Access Control NO CONTROL		Special Study		
-	Nithin Interchange Area Junction Location Intersect								
NO	NON-JUNCTION		NOT AN	INTERSE	CTION				
Unit Summary						_			
Unit Status			erating As Cl	lassificatior	ı	Unit Type			
-	HIT AND RUN C CLAS					BUS			
Vehicle Type						Operating As Endorsements			
SCHOOL BUS						S - SCHOOL BUS			
Total Occs	Train/Bus # Recorded							zMat Types	
1	1	0			0		0		
Insurance?	Direction Of Travel	Pre	CrashTire		Speed Li	mit	Total Lanes		
YES	UNKNOWN		Mark	25		2			
Most Harmful Event: C	Special Fur	nction CIAL FUNC	NOIT		Emergency Motor Vehicle Use NOT APPLICABLE				
PARKED MOTOR W	Traffic Cont								
TWO-WAY, NOT DI					Traffic Control Inoperative/Missing				
Surface Type	VIDED	Road Curva	NO CONTROL			NO Road Grade			
						Road Grade			
BLACKTOP (BITUMINOUS) C			CURVE - UNKNOWN DIRECTION LEVEL						
	D TO CARRY 9 OR MORE PPI								
Vehicle									
License Plate Number		Plate Type	Plate Type		St		Country of Issuance		
30755B			BUS - BUS				UNITED STATES		
Vehicle Identification Number		Make			Year	Model			
BABHCPA1AF272387			BLUE BIRD BODY CO		2010	BUS			
Color			Body Style				Bus Use		
	YEL - YELLOW			BU - BUS			SCHOOL		
Initial Contact Po	Initial Contact Point								

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WISCONSIN MOTOR VEHICLE CRASH REPORT

	щ			Vehicle Damage 7 8 9 10 11							
UNIT	VEHICLE										
S	Ξ	Extent Of Damage		05 - RIGHT REAR	05 - RIGHT REAR CORNER						
	2	MINOR DAMAGE									
		Towed Due To Damage		Vehicle Removed By							
		NOT TOWED									
		What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors							
		Driver Prior Action Other		UNKNOWN							
		Divert not Action Other									
		Driver Actions									
	Щ	IMPROPER TURN									
UNIT	VEHICL										
	μ										
	>										
		Owner Name		Owner Address							
_	_	LAMARS BUS SERVICE		S12430 WI-23							
0	0	(608) 588-2222		SPRING GREI	EN, WI 53588,US						
	;	Sequence Of Events	6								
	2	Event MOTOR VEH IN TRANS	PORT								
		Event									
	02	PARKED MOTOR VEHIC	LE								
	03	Event									
		Event									
	04										
F	l	Policy Holder									
UNIT		Insurance Company		Organization/Com							
			ND-GENERAL-INSURANC	LAMARS BUS S	SERVICE						
		Individual									
		Driver PATRICK LINS		Citations Issued	Sex MALE						
	⊢	(608) 588-4050		0	Race						
	Ď	· ,		Date of Birth Race WHITE							
UNIT	IDIVIDUAL	Address		Driver License Number							
	ē	S11248 CTY G		STATE: WISCONSIN COUNTRY: UNITED STATES							
	≤	SPRING GREEN, WI 535	i88 , US								
	Sat	On Duty Crash fety Equipment		Safety Equipment							
	Uui			RESTRAINT US							
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	RESTRAINT US							
		Helmet Use		Helmet Compliance	Helmet Compliance						
		Eye Protection		Tint Compliance							
	_			Airbog							
5 Injury Injury Airbag NO APPARENT INJURY NOT APPLICABLE					BLE						
		Ejected	Ejection Path	I		Trapped/Extricated					
		NOT APPLICABLE	NOT EJECTED/NOT AF			NOT APPLICABL	E				
		Medical Transport		EMS Agency Ident	ifier	EMS Run #					
					Data of Doath						
		Hospital		LIATE OF LIESTN	Date of Death		Time of Death				
		Hospital		Date of Death		Time of Death					

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		Distracted By	stracted By Source								
		Distracted By NOT APPLICABLE (NOT DISTRACTED)									
		NOT DISTRACTED									
		Non Motorist	iking Unit #	Location							
		Prior Action									
		Action									
	_										
.	INDIVIDUAL										
UNIT											
	IDIV										
	4										
		Action Other								To/From School	
			spected Alcohol U	se	Suspe	cted Drug Use					
	L	Drug & Alcohol Alcohol Test Given		Alcohol Test Ty					Alcohol Tes	t Depulto	
		TEST NOT GIVEN		AICONOL TEST TY	Je				AICONOL LES	i results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type			Drug T	est Results			
	1	Drug Type									
6	001										
		Individual Condition									
		NOT OBSERVED									
		Carrier									
		✓ Use Veh	icle Owner San	ne as Carrier		Source VEHICLE-SI	DE				
2	01	Name			Address						
	0	LAMARS BUS SI			S12430 WI-23 SPRING GREEN, WI 53588 , US						
	BUS	GVWR	Vehicle Co	onfiguration				-	Body Type		
UNIT	B	US DOT #	Carrier Ty	pe					(SEATS FOR MORE THAN 15 OCCUPAN itted Load		
	СК			<u>1</u>							
	TRUCK		Permit Number		ermitted Vehicle On Escort Ve			cort Vehic	ehicle Required Escort Vehicle Present		
	Η	Measured Height	Measu	red Length	ennitieu	Measured Wid	th	БуР	Measured W	eight	
		Summary									
		Status			Vehicle Operating As Classification D CLASS				Unit Type AUTOMOBILE		
02	Vehi	cle Type								s Endorsements	
0	-	ORT) UTILITY VEHICL	E Train/Bus # Re	oordod	Total # Citations Issued Total			Total Traile		Total HazMat Types	
	10ta 0	Uccs	Halli/Dus # Re	colded	1 otal # Cit 0	ations issued		0	:15	0	
		ance?	Direction Of Tra	avel	Pre CrashTire				Total Lanes		
UNIT	YES Most		UNKNOWN		Mark 25 Special Function			25	Emergency	2 Motor Vehicle Use	
5	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT				NO SPECIAL FUNCTION						

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	Traff	ic Way T	raffic Control		Traffic Control Inoperative/Missing						
	тwo	D-WAY, NOT DIVIDED	IO CONTROL		NO						
	Surfa	асе Туре Г	load Curvature		Road Grade						
	BLA	ACKTOP (BITUMINOUS)	URVE - UNKNOWN DIF	RECTION	LEVEL						
	Truc	k Bus or HazMat									
	NO										
		Vehicle									
		License Plate Number	Plate Type St		Country of Issuance						
		170UPP	AUT - AUTOMOBILE	wi	UNITED STATES						
02	2	Vehicle Identification Number	Make	Year	Model						
0	02	1J4GZ58S9SC758003	JEEP	1995 CHERC		KEE					
		Color	Body Style		Bus Use						
			4D - 4DR								
	щ	Initial Contact Point	Vehicle Damage			7 8 9 10 11					
È	<u></u>	01 - RIGHT FRONT CORNER				6					
UNIT	VEHICLE	Extent Of Damage	01 - RIGHT FRONT COI	RNER							
	≍	MINOR DAMAGE				5 4 3 2 1					
		Towed Due To Damage	Vehicle Removed By								
		NOT TOWED									
		What Driver Was Doing	Vehicle Factors								
		LEGALLY PARKED	NOT APPLICABLE								
		Driver Prior Action Other									
		Driver Actions									
	щ	NO CONTRIBUTING ACTION									
UNIT	VEHICL										
5	Ξ										
	3										
		Owner Name	Owner Address	-							
02	02	DEAN MEISE (608) 963-2327	1720 OAKWOOD CI PLAIN, WI 53577, U								
0	0	(000) 505-2521									
	÷	Sequence Of Events									
	6	Event MOTOR VEH IN TRANSPORT									
	02	Event PARKED MOTOR VEHICLE									
	9	- Event									
	03										
	04	Event									
F		Policy Holder									
UNIT		Insurance Company	Individual								
J		STATE-FARM-GENERAL-INS-CO	DEAN MEISE								