WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| Document Number Override | Primary Crash | Document # | Agency C 24-0117 | rash Number 2 | DEPUTY J. MACASKILL | | | |
|--|-----------------------------------|----------------|----------------------------|---|--------------------------------------|------------|---|--|
| Crash Date 02/02/2024 | Crash Time 12:00 PM | | Date Arriv 02/02/20 | | Time Arrived 12:15 PM | | | |
| Date Notified | Time Notified | | Total Unit | S | Total Injured | Total Kill | ed | |
| 02/02/2024 | 12:01 PM | | 01 | | 00 | 00 | Poporting | |
| On Emergency Hi | it and Run | Lane Clos | ure | Work Zone | Trailer of | r Towed | Reporting Threshold | |
| Crash Date 02/02/2024 Date Notified 02/02/2024 On Emergency Hi Government Property | Active Sc | chool Zone | School Bu | us Related | Tags | | | |
| ✓ Reportable | Crash Type DT4000 (STA | NDARD CRASH | Н) | | Amende | d | Secondary Crash | |
| Description Diagram | | | | | | | | |
| \$ | | | | | | Photos By | | |
| Unit 1 | - 1 U | Jnit 1 | Ur | nit 1 | n to Scale | | | |
| | | | | | _ | | | |
| , a sworn law enforcement | | | | | | | | |
| ON 2/2/24 AT APPROXIMATELY 12 CAME OFF THE VEHICLE. THIS C. ROADWAY. UNIT 1 WAS PULLING DAMAGE TO THE REAR PASSENCE ROADWAY. | AUSED UNIT 1 TO A SMALL TRAILE | LOSE CONTROL A | AND COME T ID UNIT 1 AN | TO REST ON THE SIDE ND THE TRAILER WER | EWALK AND DRIVEN E TURNED IN SUCH | WAY ON THE | SOUTH SIDE OF THE T THE TRAILER CAUSED | |

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

1 of 4

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| Location | | | | | | | | |
|--|----------------------|---------------------------|----------------------------|-------------------------------|----------------|--------------------|--|--|
| ON CTHW EB 380 FT E OF INDUSTRIAL CT | | Latitude 43.460031937 | Longitude -89.761325364 | | | | | |
| IN THE TOWN OF BARA | ABOO | | X Coordinate | | Y Coordinate | | | |
| IN SAUK COUNTY | | | | 276610.53125 4815607 | | | | |
| | | | | Structure Type | | | | |
| | | | | | | | | |
| Crash Scene | | | | | | | | |
| First Harmful Event | | | | First Harmful Event L | ocation | | | |
| CARGO/EQUIPMENT LO | OSS OR SHIFT | | | ON ROADWAY | | | | |
| Manner of Collision | | | | Light Condition | | | | |
| | EHICLE IN TRANSPORT | | | DAYLIGHT | | | | |
| Road Surface Condition(s) | | | | Roadway Factor(s) | | | | |
| DRY | | | | | | | | |
| Environment Factor(s) | | | | NONE | | | | |
| NONE | | | | | | | | |
| Weather Condition(s) | | | | | | | | |
| CLEAR | | | | | | | | |
| Animal Type | | | | Relation To Trafficway | | | | |
| | | | | TRAFFICWAY - C | N ROAD | | | |
| Crash Classification - Location | on | | | Crash Classification | - Jurisdiction | | | |
| PUBLIC PROPERTY | | | | NO SPECIAL JUF | RISDICTION | | | |
| Tribal Land | | | | Access Control | Special Study | | | |
| | | | | NO CONTROL | | | | |
| Within Interchange Area | Junction Location | | Intersection | on Type | | | | |
| NO | N INTERSECTION | | | | | | | |
| Unit Summary = | | | | | | | | |
| Unit Status Vehicle Opera | | | erating As C | g As Classification Unit Type | | | | |
| IN TRANSIT D CLASS | | | 6 | TRUCK | | | | |
| Vehicle Type | | Operating As Endorsements | | | | | | |
| UTILITY TRUCK/PICKUI | P TRUCK | | | | | | | |
| Total Occs | Train/Bus # Recorded | Total # Cita | ations Issued | Total Tra | ilers | Total HazMat Types | | |

| | Unit Status | | Vehicle Operating As Classifica | tion | Unit Type | | |
|------|---------------------------------|---------------------|---------------------------------------|---------------------|-------------------------------------|---------------------------|--|
| | IN TRANSIT | | D CLASS | ' ° | | TRUCK | |
| _ | Vehicle Type | | | | | Operating As Endorsements | |
| Ò | UTILITY TRUCK/PICKUP T | RUCK | | | | | |
| İ | Total Occs Train/Bus # Recorded | | Total # Citations Issued Total Traile | | ers Total HazMat Types | | |
| | 1 | | 0 | 0 | | 0 | |
| İ | Insurance? | Direction Of Travel | Pre CrashTire | Speed Lim | nit | Total Lanes | |
| l⊨ | YES | EASTBOUND | Mark | 25 | | 2 | |
| LIND | Most Harmful Event: Collision W | 'ith | Special Function | | Emergency Motor Vehicle Use | | |
| _ | CARGO/EQUIPMENT LOSS | S OR SHIFT | NO SPECIAL FUNCTION | NO SPECIAL FUNCTION | | NOT APPLICABLE | |
| İ | Traffic Way | | Traffic Control | | Traffic Control Inoperative/Missing | | |
| | TWO-WAY, NOT DIVIDED | | NO CONTROL | | NO | | |
| İ | Surface Type | | Road Curvature | | Road Grade | | |
| | BLACKTOP (BITUMINOUS) | | STRAIGHT | | LEVEL | | |
| İ | Truck Bus or HazMat | | | | | | |
| | NO | | | | | | |

| | Vehicle | | | | | | | | | |
|----------|---------|-------------------------------|----------------------|-------------|---------------------|-------------|--|--|--|--|
| | | License Plate Number | Plate Type | St | Country of Issuance | | | | | |
| | | 186709D | LTK - LIGHT TRUCK | MT | UNITED STATES | | | | | |
| | | Vehicle Identification Number | Make | Year | Model | | | | | |
| 2 | 5 | CE234Z118689 | GENERAL MOTORS COR | 2025 | C2500 TK | | | | | |
| I | | Color | Body Style | | | | | | | |
| | | BLU - BLUE | TK - TRUCK | | | | | | | |
| İ | щ | Initial Contact Point | Vehicle Damage | | | 7 0 0 10 11 | | | | |
| L L | 걸 | 00 - NON-COLLISION | | 7 8 9 10 11 | | | | | | |
| 15 | Ξ | Extent Of Damage | 04 - RIGHT SIDE REAR | B 94 12 | | | | | | |
| | VE | MINOR DAMAGE | | | | 5 4 3 2 1 | | | | |

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

2 of 4

Crash Date 02/02/2024 Crash Time 12:00 PM

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | | Towed Due To Damage | | | icle Removed By | | | | |
|-------------|------------|---|-----------------------|-------------------|------------------------------------|----------|-----------------------|--|--|
| | | NOT TOWED | | | ERATOR | | | | |
| | | What Driver Was Doing GOING STRAIGHT | | ven | icle Factors | | | | |
| | | Driver Prior Action Other | | WH | IEELS | | | | |
| | | | | | | | | | |
| | | Driver Actions | | | | | | | |
| | Щ | NO CONTRIBUTING ACTIO | ON | | | | | | |
| UNIT | 2 | | | | | | | | |
| 5 | VEHICLE | | | | | | | | |
| | > | | | | | | | | |
| | | Owner Name | | | Owner Address | | | | |
| 5 | 10 | CRAIG HOPPE | | | S3854 COUNTY RO BARABOO, WI 539 | | | | |
| • | 0 | | | | BAITABOO, WI 333 | ,13 , 65 | | | |
| | | Common Of Events | | | | | | | |
| | | Sequence Of Events Event | | | | | | | |
| | 10 | CARGO/EQUIPMENT LOS | S OR SHIFT | | | | | | |
| | 05 | Event | | | | | | | |
| | 03 | Event | | | | | | | |
| | | Event | | | | | | | |
| | 4 | | | | | | | | |
| ╘ | | Policy Holder | | | | | | | |
| L N N | | Insurance Company TRI CORE | | | Individual CRAIG HOPPE | | | | |
| | | | | | TAIG HOLLE | | | | |
| | | ndividual Driver | | 10 | Citations Issued | Sex | | | |
| | _ | CRAIG HOPPE | | | 0 MALE | | | | |
| | Ι¥ | | | | Date of Birth Race | | | | |
| ≒ | INDIVIDUAL | | | 4 | | WHITE | | | |
| FIND | | Address S3854 COUNTY ROAD A | | 10 | river License Number | | | | |
| | Z | ARABOO, WI 53913 , US | | | | | | | |
| | | | | | | | | | |
| | Saf | On Duty of | Crash | S | Safety Equipment | | | | |
| | Sai | | T | ٦, | NIONI DED 8 I AD I | | | | |
| | | Row Seat Position 01 - FRONT ROW 07 - LEFT | | | SHOULDER & LAP BELT | | | | |
| | | Helmet Use | 101 | Helmet Compliance | | | | | |
| | | | | | | | | | |
| | | Eye Protection | | | int Compliance | | | | |
| _ | _ | Injury Se | verity | A | irbag | | | | |
| 7 | 90 | Injury NO APE | PARENT INJURY | N | ION DEPLOYED | | | | |
| | | - | Ejection Path | · | | | Trapped/Extricated | | |
| | | NOT EJECTED Medical Transport | NOT EJECTED/NOT APP | | ABLE MS Agency Identifier | | NOT TRAPPED EMS Run # | | |
| | | NOT TRANSPORTED | | ٦ | ins Agency identifier | | EWIS Kull# | | |
| | | Hospital | | D | ate of Death | | Time of Death | | |
| | | Distracte | d By Source | \perp | | | | | |
| | | Distracted By NOT AF | PPLICABLE (NOT DISTRA | ACT | ED) | | | | |
| | | Distracted By Action NOT DISTRACTED | | | | | | | |
| | | | | | | | | | |

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data. $\begin{tabular}{ll} 3 & of & 4 \end{tabular}$

Crash Date 02/02/2024
Crash Time 12:00 PM

SC24-01172

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | | Non Motorist | Striking Unit # | Location | | | | |
|------|------------|-------------------------------------|---------------------------|-------------------|-----------------------|--|----------------------|----------------|
| | | Prior Action | | | | | | |
| LIND | INDIVIDUAL | Action | | | | | | |
| | | Action Other | | | | | | To/From School |
| | L | Orug & Alcohol | Suspected Alcohol U NO | se | Suspected Drug Use NO | | | |
| | | Alcohol Test Given TEST NOT GIVEN | | Alcohol Test Type | | | Alcohol Test Results | |
| 2 | | Drug Test Given TEST NOT GIVEN | | Drug Test Type | Drug Test Results | | | |
| | 001 | Drug Type | | | | | | |
| | | Individual Condition APPEARED NORM | ИAL | | | | | |