WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Overrion Crash Date 03/01/2024	Crash Time	h Document#	Agency Crash Number 24-02215 Date Arrived 03/04/2024	DEPUTY 2	Investigating Officer/Deputy DEPUTY Z. DRILL Time Arrived 05:20 PM		
Date Notified 03/04/2024	Time Notified 05:15 PM		Total Units 01	Total Injure	Total Injured Total Killed		
On Emergency	Hit and Run	Lane Closu	re Work Zon	e Traile	r or Towed	Reporting Threshold	
Government Property	Active \$	School Zone	School Bus Related NO	Tags	Tags		
Reportable	Crash Type DT4000 (ST	ANDARD CRASH)		Amen	ded	Secondary Crash	
escription =							
NOT TO SCALE		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A		Photos By DRILL 9128		
					Additional Info		
		COUNTY RD A					
MOON RD							
	STOP	-					

Location

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Crash Date 03/01/2024

Crash Time 11:45 AM

	421	CTHA NB FT N			Latitude 43.562471672			Longitue -89.738	de 3 636065	
	IN T	MOON RD THE TOWN OF DELTON SAUK COUNTY				Y Coord 482692				
						Structure Type NO STRUCTURE				
(Cra	sh Scene								
	First	t Harmful Event			First Ha	mful Event	Location			
	CA	RGO/EQUIPMENT LOSS	S OR SHIFT		ON RO	ADWAY				
		nner of Collision			Light Co	ndition				
		NO COLLISION W/VEH	IICLE IN TRANSPORT		DAYLIGHT					
	Roa	d Surface Condition(s)			Roadway Factor(s)					
	DR	Υ								
	Envi	ironment Factor(s)								
	NOI	NF			NONE					
	Wea	ather Condition(s)								
	UNI	KNOWN								
	Anin	nal Type			Relation	To Trafficw	vay			
					TRAFFICWAY -			ON ROAD		
	_	sh Classification - Location			assification	cation - Jurisdiction				
		BLIC PROPERTY					RISDICTION			
	Triba	al Land			Access				Special Study	
				NO CONTROL						
		•	Junction Location		Intersection Type NOT AN INTERSECTION					
	NO		NON-JUNCTION		NOI AN INTERS	ECTION				
		t Summary								
_										
		Status			ating As Classification	on	Unit Type	RII F		
	IN T	ΓRANSIT		D CLASS	rating As Classification	on	AUTOMO		ments	
U1	IN T	TRANSIT icle Type			rating As Classification	on			ments	
1	Vehi	ΓRANSIT	Train/Bus # Recorded			on Total Tr	AUTOMO Operating A	As Endorse	ments zMat Types	
1	Vehi	TRANSIT icle Type SSENGER CAR	Train/Bus # Recorded	D CLASS			AUTOMO Operating A	As Endorse		
1	Vehi PAS Tota 1	TRANSIT icle Type SSENGER CAR	Train/Bus # Recorded Direction Of Travel	D CLASS Total # Citati 0		Total Tr	AUTOMO Operating A	As Endorse	zMat Types	
1	IN Total Total Insu YES	IRANSIT icle Type SSENGER CAR al Occs Irance?	Direction Of Travel NORTHBOUND	Total # Citati	ons Issued CrashTire Mark	Total Tr.	AUTOMO Operating A ailers	Total Haz Total Lan Total Lan	zMat Types ies	
1	IN T Vehi PAS Tota 1 Insu YES Mos	ITRANSIT icle Type SSENGER CAR al Occs irrance? S st Harmful Event: Collision W	Direction Of Travel NORTHBOUND	Total # Citati 0 Pre C	ons Issued CrashTire Mark	Total Tr. 0 Speed L	AUTOMO Operating A ailers Limit Emergency	Total Haz 0 Total Lan 2 Motor Veh	Mat Types les	
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UNII 01	IN TOTAL TOT	ITRANSIT icle Type SSENGER CAR al Occs Irrance? St Harmful Event: Collision W RGO/EQUIPMENT LOSS ffic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS ck Bus or HazMat Vehicle License Plate Number 67414DS Vehicle Identification Num	Direction Of Travel NORTHBOUND With SOR SHIFT	Total # Citati 0 Pre C Special Func NO SPECI. Traffic Contre NO CONTF Road Curvat STRAIGHT Plate Type AUT - AUT Make	ons Issued CrashTire Mark dtion AL FUNCTION DI ROL ure	Total Tr. 0 Speed L 55	AUTOMO Operating A ailers Emergency NOT APP Traffic Cont NO Road Grad LEVEL Country of Is UNITED S Model	Total Haz 0 Total Lan 2 Motor Veh LICABLE trol Inopera	Mat Types les licle Use	
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UNII 01	IN TOTAL TOT	ITRANSIT icle Type SSENGER CAR al Occs Irance? St Harmful Event: Collision W RGO/EQUIPMENT LOSS fic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS ck Bus or HazMat Vehicle License Plate Number 67414DS Vehicle Identification Numi 4S4BTACC6M314718S Color	Direction Of Travel NORTHBOUND With SOR SHIFT	Total # Citati 0 Pre C Special Func NO SPECI Traffic Contro NO CONTF Road Curvat STRAIGHT Plate Type AUT - AUT Make SUBARU Body Style	ons Issued CrashTire Mark Ition AL FUNCTION OI ROL ure	St WI Year 2021	AUTOMO Operating A ailers Emergency NOT APP Traffic Cont NO Road Grad LEVEL Country of Is UNITED S Model	Total Haz 0 Total Lan 2 Motor Veh LICABLE trol Inopera	Mat Types les licle Use	
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UNII 01	IN TOTAL TOTAL NO.	ITRANSIT icle Type SSENGER CAR al Occs Itrance? St Harmful Event: Collision W RGO/EQUIPMENT LOSS Ific Way O-WAY, NOT DIVIDED Iface Type ACKTOP (BITUMINOUS ck Bus or HazMat Vehicle License Plate Number 67414DS Vehicle Identification Numi 4S4BTACC6M3147185 Color GRN - GREEN Initial Contact Point 00 - NON-COLLISION	Direction Of Travel NORTHBOUND With SOR SHIFT	D CLASS Total # Citation Pre Control Special Function NO SPECI. Traffic Control Road Curvation STRAIGHT Plate Type AUT - AUT Make SUBARU Body Style UT - SPON Vehicle Dan	CrashTire Mark Mark Mart FUNCTION Col ROL Grown	St WI Year 2021	AUTOMO Operating A ailers Emergency NOT APP Traffic Cont NO Road Grad LEVEL Country of Is UNITED S Model OUTBACK	Total Haz 0 Total Lan 2 Motor Veh LICABLE trol Inopera	ZMat Types Des Dicle Use Dictive/Missing	

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		Towed Due To Damage		Vehicle Removed By				
		NOT TOWED		1				
		What Driver Was Doing		Vehicle Factors				
		GOING STRAIGHT		Vernole i dotors				
		Driver Prior Action Other		NOT APPLICABLE				
		Driver Prior Action Other		1101711121071222				
		Driver Actions						
	ш	NO CONTRIBUTING ACT	ION					
⊢	VEHICLE							
LNO	\							
\supset	亘							
	>							
		Owner Name		Owner Address				
		JOHN SCHMECHEL		1410 WALNUT S	ST # 2			
6	01	(608) 477-3554		BARABOO, WI	53913 , US			
		Saguence Of Events						
		Sequence Of Events Event						
	01	MOTOR VEH IN TRANSP	ORT					
	02	Event CARGO/EQUIPMENT LOS	SS OR SHIFT					
		Event						
	03	LYON						
	04	Event						
╘		Policy Holder						
LIND		Insurance Company		Name				
_		SECURA-INS-CO		JOHN SCHMECHEL				
	1	Individual						
		Driver		Citations Issued	Citations Issued Sex			
	_	JOHN SCHMECHEL		0	MALE			
	Υ	(608) 477-3554		Date of Birth Race				
⊨	INDIVIDUAL				WHITE			
	≥	Address		Driver License Number				
_		1410 WALNUT ST # 2 BARABOO, WI 53913 , U	e	STATE: WISCONSIN COUNTRY: UNITED STATES				
	=	DARABOO, WI 53913 , U	3					
	Saf	On Duty fety Equipment	/ Crash	Safety Equipment				
	Sai	ety Equipment						
		Row	Seat Position	SHOULDER & LA	P BELT			
		01 - FRONT ROW	07 - LEFT					
		Helmet Use	et Use		Helmet Compliance			
		· · ·						
		Eye Protection		Tint Compliance				
	_ !	Injury S	everity	Airbag				
2	90	lania and	PARENT INJURY	NON DEPLOYED				
		Ejected	Ejection Path			Trapped/Extricated		
		NOT EJECTED	NOT EJECTED/NOT AF			NOT TRAPPED		
		Medical Transport	NOT EDECTEDMOT A	EMS Agency Identifier		EMS Run #		
		NOT TRANSPORTED			Emo Agonoy Identine		LING IXIII #	
		Hospital		Date of Death Time of Death				
		'				1		
		Distract	ed By Source					
		Distracted By NOT A	PPLICABLE (NOT DISTR	RACTED)				
		Distracted By Action						
		NOT DISTRACTED						

Crash Time 11:45 AM

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Crash Date 03/01/2024

Crash Time 11:45 AM

		Non Motorist	Striking Unit #	Location				
		Prior Action						
TIND	INDIVIDUAL	Action						
		Action Other						To/From School
	1	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		
٦	001	Drug Type						
		Individual Condition APPEARED NORM	AL					