WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash I	Document #	Agency 24-032	Crash Number 221	0 0	Investigating Officer/Deputy DEPUTY I. GALVAN			
CD	Crash Date 04/02/2024	Crash Time 10:18 AM		Date Ai 04/02/		Time Arrived 10:30 AM				
KR	Date Notified 04/02/2024	Time Notified 10:20 AM			nits	Total Injured 02	Total Killed 00			
0F2	On Emergency	it and Run	Lane Closu	ire	☐ Work Zone			Reporting Threshold		
6TL	Government Active So		School Bus Related NO		Tags					
	Crash Type DT4000 (ST.		NDARD CRASH)		Amended			Secondary Crash	

Diagram Reconstruction By STH 58 SOUTH OF WILKINSON ROAD Additional Information PHOTOS, BODY CAMERA VIDEO NOT TO SCALE

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

UNIT 1 WAS TRAVELING NORTHBOUND ON SNOW AND SLUSH COVERED STH 58 SOUTH OF WILKINSON ROAD. UNIT 1 BEGAN TO SLIDE DUE TO ROAD CONDITIONS AND SLID INTO ON COMING TRAFFIC. UNIT 2 STRUCK UNIT 1 NEARLY HEAD ON. OCCUPANTS OF UNIT 1 AND UNIT 2 SUSTAINED SERIOUS INJURIES AND WERE TRANSPORTED TO THE REEDSBURG AREA MEDICAL CENTER. BOTH UNITS WERE TOWED BY STEVE'S TOWING. IN THE PROCESS OF THE TRAFFIC ACCIDENT A MAILBOX WAS STRUCK BELONGING TO S539A STH 58 LA VALLE, WI. UNSURE WHICH UNIT STRUCK THE MAILBOX.

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Crash Date **04/02/2024**Crash Time **10:18 AM**

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Location

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	1059	STH58 NB 9 FT S WILKINSON RD					Latitude 43.62419 X Coordinates			Longitud -90.125	825811	
		IN THE TOWN OF LA VALLE IN SAUK COUNTY					247807.0	9375	4834883			
							NO STR					
(Cras	sh Scene										
Ī	First	Harmful Event					First Harm	ful Event Lo	ocation			
	MOT	TOR VEH IN TRANSPO	RT				ON ROA	DWAY				
		ner of Collision					Light Cond					
	-	FRONT TO FRONT					DAYLIGI					
	Road	Surface Condition(s)					Roadway	Factor(s)				
	WET	Γ, SNOW, SLUSH										
	Envir	onment Factor(s)										
	WE	ATHER CONDITIONS					ROAD S ETC)	URFACE	CONDITION	(WET, IC	CY, SNOW, SLUSH,	
	Weat	ther Condition(s)					1					
	RAII	N, SNOW										
•	Anim	al Type					Relation To Trafficway TRAFFICWAY - ON ROAD					
	Cras	h Classification - Location						ssification -				
	PUB	SLIC PROPERTY					NO SPE	CIAL JUR	ISDICTION			
•	Tribal Land				Access Control NO CONTROL				Special Study			
	Withi	n Interchange Area	Junction Location		Intersection Type			•				
	NO		NON-JUNCTION		NOT AN INTERSECTION Reasons for Closure			CTION	<u> </u>			
		ure Type										
		L CLOSURE	TT 1 1 10 10 10 10					EMENT TOW TRUCK FIRE/EMO				
		Initial Lane/Rd Closed 2/2024	Time Initial Lane/Rd C 10:35 AM	Closed	Date Scene Cleare 04/02/2024		CEMENT, TOW TRUCK, FIRE/EMS					
		All Lanes Open	Time All Lanes Open				Time Sc 11:26 /		me Scene Cleared			
		2/2024	11:26 AM						:26 AW			
		Status		LVah	ala Ona	notine As O	lessification		Luse			
		Status RANSIT				erating As C	lassification		Unit Type TRUCK			
		cle Type		D C	D CLASS				Operating As Endorsements		ments	
0		UTILITY TRUCK/PICKUP TRUCK										
		Occs	Train/Bus # Recorded		Total # Citations Issued 0 Pre CrashTire Mark		Total Traile 0 Speed Lim		0		Mat Types	
	1		Direction Of Travel	0								
_	YES	ance?	NORTHBOUND				•	55	mit Total Lanes		65	
LIND		Harmful Event: Collision W			Special Function NO SPECIAL FUNCTION		L	Emergency Motor Vehicle Use NOT APPLICABLE				
		ic Way			fic Conti				Traffic Control Inoperative/Missing			
		D-WAY, NOT DIVIDED			CONT			Ro		NO Road Grade UPHILL		
		ace Type ACKTOP (BITUMINOUS			d Curva RVE RI							
		Bus or HazMat	"	Col	NVE KI	ЮПІ			OFFILL			
	NO											
	1	Vehicle License Plate Number		Dia	te Type			St	Country of Iss	suance		
		SV5651				HT TRUC	:K	WI	UNITED ST			
		Vehicle Identification Num	ber	Ma				Year	Model	•		
2	9	1C6RR7FG5FS784254	1	DC	DGE			2015	RAM 1500			
												_

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

		Color		Body Style		Bus Use		
		GRY - GRAY 4		4D - 4DR		bus Use		
				Vehicle Damage				
_	Ë			7 8 9 10 11				
NN	₽			01 - RIGHT FRONT CORNER, 09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT			6 12	
⊃	VEHICLE			CORNER, 12 - FRON		LLITTROIT	5 4 3 2 1	
	>	Towed Due To Damage		Vehicle Removed By				
		TOWED DUE TO DISABL	ING DAMAGE	STEVES AUTO SERV	ICE			
		What Driver Was Doing		Vehicle Factors				
		NEGOTIATING CURVE						
		Driver Prior Action Other		NOT APPLICABLE				
1		Driver Actions						
	щ	NO CONTRIBUTING ACT	TION					
UNIT	VEHICLE							
5	玉							
	5							
		Owner Name SAMANTHA MINO	1 D	Owner Address 420 PLUM ST				
2	5	(608) 385-0822	JK	REEDSBURG, WI	53959 . US			
	_	(***, *** **=		,,	,			
	;	Sequence Of Events Event						
	2	MOTOR VEH IN TRANSP	PORT					
		Event						
	05	MAILBOX						
	03	Event						
		Event						
	04	Event						
_		Policy Holder						
NN		Insurance Company		Individual				
⊃		STATE-FARM-GENERAL	INS-CO	SAMANTHA MINOF	₹			
	- 1	Individual						
		Driver		Citations Issued	Sex			
	Ļ	SAMANTHA MINOR (608) 385-0822		0	FEMALE			
	Š			Date of Birth	Race WHITE	Race WHITE		
Ì	IDIMIDUAL							
LIND	á	Address 420 PLUM ST		Driver License Number				
	Z	REEDSBURG, WI 53959	, US					
		On Dut	y Crash	Safety Equipment				
	Sat	fety Equipment		Salety Equipment				
		Row	Seat Position	SHOULDER & LAP BELT				
		01 - FRONT ROW	07 - LEFT					
		Helmet Use	•	Helmet Compliance				
				Tint Compliance				
		Eye Protection						
	_		everity					
10	100	Injury S SUSP	ECTED SERIOUS INJUR	Airbag DEPLOYED-COMB	INATION			
10	001	Injury S Injury SUSP	ECTED SERIOUS INJUR Ejection Path	Airbag DEPLOYED-COMB	INATION	Trapped/Extricated		
01	001	Injury S SUSP Ejected NOT EJECTED	ECTED SERIOUS INJUR	Airbag DEPLOYED-COMB	INATION	NOT TRAPPED		
10	100	Injury S Injury SUSP	ECTED SERIOUS INJUR Ejection Path	Airbag DEPLOYED-COMB	INATION			

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

	Hospital			Date of Death		Time of Dea	Time of Death			
	REEDSBURG AREA MED CTR									
	Distracted By Source NOT APPLICABLE (NOT DISTR				CTED)		ı			
		Distracted By Action NOT DISTRACTED								
		Non Motorist Strik	ing Unit #	Location						
		Prior Action								
		Action								
_	UAL									
UNIT	INDIVIDUAL									
	I									
		Action Other							To/From School	
					LOurs and David David				Ton Toni School	
	L	Drug & Alcohol No	pected Alcohol U		Suspected Drug Use NO					
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type)		Alcohol Tes	Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results		esults			
5	001	Drug Type								
		Individual Condition								
		APPEARED NORMAL								
	Unit	Summary -								
		Status		V	ehicle Operating As Classi	fication	Unit Type			
	IN T	RANSIT		D	CLASS		AUTOMOBILE			
	Vehi	cle Type		I		Operating A	Operating As Endorsements			
02	PASSENGER CAR					Trailara	ilers Total HazMat Types			
	1			0	otal # Citations Issued	0		0		
L L	YES Direction Of Travel SOUTHBOUND		ND [Pre CrashTire Mark 55			Total Lane 2			
N O	МО	Harmful Event: Collision Wi		N	pecial Function NO SPECIAL FUNCTIO	NOT APP	Emergency Motor Vehicle Use NOT APPLICABLE			
	TWC	ic Way D-WAY, NOT DIVIDED		N	raffic Control IO CONTROL	NO	Traffic Control Inoperative/Missing NO			
	Surface Type BLACKTOP (BITUMINOUS)			load Curvature CURVE LEFT		Road Grade DOWNHILL				
	Truc NO	k Bus or HazMat					<u> </u>			
	'	Vehicle								
		License Plate Number ARW5285			Plate Type AUT - AUTOMOBILE	St WI	-	Country of Issuance UNITED STATES		
05	02	Vehicle Identification Numb			Make JEEP	Year 2005	Model LIBERTY			
		Color BLU - BLUE			Body Style 4D - 4DR	<u> </u>	Bus Use			
						•				

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

	щ	Initial Contact Point		Vehicle Damage 7 8 9 10 11				
⊨	VEHICLE	12 - FRONT		01 - RIGHT FRONT CO	ORNER, 02 - RIGHT SIDE			
NS NS	Ī	Extent Of Damage			DE MIDDLE, 10 - LEFT SIDE	6 8 12		
–	7	DISABLING DAMAGE		FRONT, 11 - LEFT FR	ONT CORNER, 12 - FRONT	5 4 3 2 1		
l		Towed Due To Damage	١	Vehicle Removed By		•		
		TOWED DUE TO DISABLING	G DAMAGE	STEVES AUTO SERVI	CE			
		What Driver Was Doing	\	Vehicle Factors				
		NEGOTIATING CURVE						
		Driver Prior Action Other		NOT APPLICABLE				
		Driver Actions						
	111	NO CONTRIBUTING ACTIO	N					
▶	VEHICLE							
NS N	≌							
ı∍	山							
	>							
		Owner Name TIMOTHY DREA		Owner Address 315 WHITE ST				
05	05	(608) 479-0366		KENDALL, WI 546	38 US			
•	0	(666) 475 6666		RENDALL, WOO				
	;	Sequence Of Events						
	_	Event	_					
	2	MOTOR VEH IN TRANSPOR	RT					
	~	Event						
	02	MAILBOX						
	_	Event						
	03							
		Event						
	8							
1		D. II						
ı								
⊨	- 1	Policy Holder		T				
FIND		Insurance Company		Individual				
LIND		Insurance Company ERIE-INS-CO		Individual TIMOTHY DREA				
TIND		Insurance Company		TIMOTHY DREA				
TINO		Insurance Company ERIE-INS-CO Individual Driver		TIMOTHY DREA Citations Issued	Sex			
LIND		Insurance Company ERIE-INS-CO Individual Driver TIMOTHY DREA		TIMOTHY DREA	Sex MALE			
TINU		Insurance Company ERIE-INS-CO Individual Driver		TIMOTHY DREA Citations Issued	MALE Race			
		Insurance Company ERIE-INS-CO Individual Driver TIMOTHY DREA		Citations Issued	MALE			
		Insurance Company ERIE-INS-CO Individual Driver TIMOTHY DREA (608) 479-0366 Address		Citations Issued	MALE Race			
UNIT		Insurance Company ERIE-INS-CO Individual Driver TIMOTHY DREA (608) 479-0366 Address 315 WHITE ST		Citations Issued O Date of Birth	MALE Race			
		Insurance Company ERIE-INS-CO Individual Driver TIMOTHY DREA (608) 479-0366 Address		Citations Issued O Date of Birth	MALE Race			
		Insurance Company ERIE-INS-CO Individual Driver TIMOTHY DREA (608) 479-0366 Address 315 WHITE ST		Citations Issued O Date of Birth	MALE Race			
	INDIVIDUAL	Insurance Company ERIE-INS-CO Individual Driver TIMOTHY DREA (608) 479-0366 Address 315 WHITE ST KENDALL, WI 54638, US	rash	Citations Issued O Date of Birth	MALE Race			
	INDIVIDUAL	Insurance Company ERIE-INS-CO Individual Driver TIMOTHY DREA (608) 479-0366 Address 315 WHITE ST KENDALL, WI 54638, US	rash	Citations Issued 0 Date of Birth Driver License Number	MALE Race			
	INDIVIDUAL	Insurance Company ERIE-INS-CO Individual Driver TIMOTHY DREA (608) 479-0366 Address 315 WHITE ST KENDALL, WI 54638, US	rash Seat Position	Citations Issued 0 Date of Birth Driver License Number	MALE Race WHITE			
	INDIVIDUAL	Insurance Company ERIE-INS-CO Individual Driver TIMOTHY DREA (608) 479-0366 Address 315 WHITE ST KENDALL, WI 54638 , US fety Equipment		Citations Issued 0 Date of Birth Driver License Number Safety Equipment	MALE Race WHITE			
	INDIVIDUAL	Insurance Company ERIE-INS-CO Individual Driver TIMOTHY DREA (608) 479-0366 Address 315 WHITE ST KENDALL, WI 54638 , US Fety Equipment Row	Seat Position	Citations Issued 0 Date of Birth Driver License Number Safety Equipment	MALE Race WHITE			
	INDIVIDUAL	Insurance Company ERIE-INS-CO Individual Driver TIMOTHY DREA (608) 479-0366 Address 315 WHITE ST KENDALL, WI 54638 , US Fety Equipment Row 01 - FRONT ROW	Seat Position	Citations Issued 0 Date of Birth Driver License Number Safety Equipment RESTRAINT USE UI	MALE Race WHITE			
	INDIVIDUAL	Insurance Company ERIE-INS-CO Individual Driver TIMOTHY DREA (608) 479-0366 Address 315 WHITE ST KENDALL, WI 54638 , US Fety Equipment Row 01 - FRONT ROW	Seat Position	TIMOTHY DREA Citations Issued 0 Date of Birth Driver License Number Safety Equipment RESTRAINT USE UI Helmet Compliance	MALE Race WHITE			
	INDIVIDUAL	Insurance Company ERIE-INS-CO Individual Driver TIMOTHY DREA (608) 479-0366 Address 315 WHITE ST KENDALL, WI 54638 , US Fety Equipment Row 01 - FRONT ROW Helmet Use	Seat Position	Citations Issued 0 Date of Birth Driver License Number Safety Equipment RESTRAINT USE UI	MALE Race WHITE			
TINU	INDIVIDUAL	Insurance Company ERIE-INS-CO Individual Driver TIMOTHY DREA (608) 479-0366 Address 315 WHITE ST KENDALL, WI 54638 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection	Seat Position 07 - LEFT	TIMOTHY DREA Citations Issued 0 Date of Birth Driver License Number Safety Equipment RESTRAINT USE UI Helmet Compliance	MALE Race WHITE			
	INDIVIDUAL	Insurance Company ERIE-INS-CO Individual Driver TIMOTHY DREA (608) 479-0366 Address 315 WHITE ST KENDALL, WI 54638 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Several	Seat Position 07 - LEFT	TIMOTHY DREA Citations Issued 0 Date of Birth Driver License Number Safety Equipment RESTRAINT USE UI Helmet Compliance Tint Compliance	MALE Race WHITE			
TINU	INDIVIDUAL	Insurance Company ERIE-INS-CO Individual Driver TIMOTHY DREA (608) 479-0366 Address 315 WHITE ST KENDALL, WI 54638 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Several Suspection	Seat Position 07 - LEFT	TIMOTHY DREA Citations Issued 0 Date of Birth Driver License Number Safety Equipment RESTRAINT USE UI Helmet Compliance Tint Compliance	MALE Race WHITE	d		
TINU	INDIVIDUAL	Insurance Company ERIE-INS-CO Individual Driver TIMOTHY DREA (608) 479-0366 Address 315 WHITE ST KENDALL, WI 54638 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Injury Several Suspect Ejected Ejected	Seat Position 07 - LEFT erity TED SERIOUS INJUR	TIMOTHY DREA Citations Issued 0 Date of Birth Driver License Number Safety Equipment RESTRAINT USE UI Helmet Compliance Tint Compliance Airbag DEPLOYED-FRONT	MALE Race WHITE			
TINU	INDIVIDUAL	Insurance Company ERIE-INS-CO Individual Driver TIMOTHY DREA (608) 479-0366 Address 315 WHITE ST KENDALL, WI 54638 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Injury Several Suspect Ejected Ejected	Seat Position 07 - LEFT erity TED SERIOUS INJUR jection Path	TIMOTHY DREA Citations Issued 0 Date of Birth Driver License Number Safety Equipment RESTRAINT USE UI Helmet Compliance Tint Compliance Airbag DEPLOYED-FRONT	MALE Race WHITE NKNOWN Trapped/Extricate			
TINU	INDIVIDUAL	Insurance Company ERIE-INS-CO Individual Driver TIMOTHY DREA (608) 479-0366 Address 315 WHITE ST KENDALL, WI 54638 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Injury Seve SUSPEC' Ejected NOT EJECTED	Seat Position 07 - LEFT erity TED SERIOUS INJUR jection Path	TIMOTHY DREA Citations Issued 0 Date of Birth Driver License Number Safety Equipment RESTRAINT USE UI Helmet Compliance Tint Compliance Airbag DEPLOYED-FRONT	MALE Race WHITE NKNOWN Trapped/Extricate NOT TRAPPED			
TINU	INDIVIDUAL	Insurance Company ERIE-INS-CO Individual Driver TIMOTHY DREA (608) 479-0366 Address 315 WHITE ST KENDALL, WI 54638 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Seve SUSPEC Ejected NOT EJECTED Medical Transport EMS GROUND	Seat Position 07 - LEFT erity TED SERIOUS INJUR jection Path	TIMOTHY DREA Citations Issued 0 Date of Birth Driver License Number Safety Equipment RESTRAINT USE UI Helmet Compliance Tint Compliance Airbag DEPLOYED-FRONT LICABLE EMS Agency Identifier 6001024	MALE Race WHITE NKNOWN Trapped/Extricate NOT TRAPPED EMS Run # 00			
TINU	INDIVIDUAL	Insurance Company ERIE-INS-CO Individual Driver TIMOTHY DREA (608) 479-0366 Address 315 WHITE ST KENDALL, WI 54638 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Injury Seve SUSPEC' Ejected NOT EJECTED Medical Transport	Seat Position 07 - LEFT erity TED SERIOUS INJUR jection Path OT EJECTED/NOT APPL	TIMOTHY DREA Citations Issued 0 Date of Birth Driver License Number Safety Equipment RESTRAINT USE UI Helmet Compliance Tint Compliance Airbag DEPLOYED-FRONT LICABLE EMS Agency Identifier	MALE Race WHITE NKNOWN Trapped/Extricate NOT TRAPPED EMS Run #			

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		Distracted	Distracted By Source	ce						
		Distracted By Acti	NOT APPLICAB	LE (NOT DISTRA	ACTED)					
		NOT DISTRAC								
		Non Motor	Striking Unit #	Location						
		Prior Action								
İ		Action								
	Ļ									
l <u>⊢</u>										
EN S	INDIVIDUAL									
		Action Other						To/From School		
			Suspected Alcohol	l Ise	Suspected Drug Use					
	1	Drug & Alcol	NO NO	000	NO					
•		Alcohol Test Give		Alcohol Test Type	e		Alcohol Test Results			
		Drug Test Given		Drug Test Type	Drug Test Results					
		TEŠT NOT GIV	EN							
05	002	Drug Type								
		Individual Condition	on.							
		APPEARED NO								
		APPEARED NO	JRWAL							
		perty Owne	r 💻							
2	RAI	idual NER STUEBS			Address S539A STATE ROAD					
PROP OWNER	(608	3) 985-7228			LA VALLE, WI 53941	, US				
	Eive	ed Objects S	truck							
	LIXE	Striking Unit	Struck Object				Structure Number	Damage Tag Number		
	6	01	MAILBOX				Ciradiale Hambel	000		
	05	Striking Unit 02	Struck Object MAILBOX				Structure Number	Damage Tag Number 000		