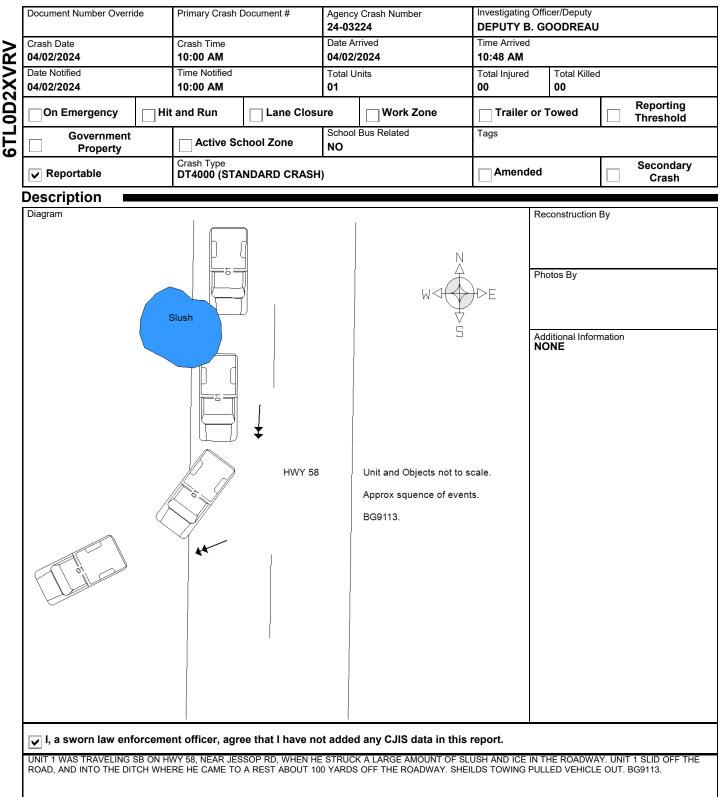
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24-03224

WISCONSIN MOTOR VEHICLE CRASH REPORT

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



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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| L | oc | ation 🛛 🗖 | | | | | | | | | |
|--------|--|-----------------------------|-------------------|-------------------|--|---|---------------------|------------------|---------------|--------------|--|
| 0 | ΟN | STH58 NB | | | | Latitude | | | Longitue | de | |
| 8 | 889 FT N | | | | | 43.564673846 | | | -90.133 | 8080114 | |
| | OF PEARSON RD | | | | | X Coordinate Y | | | Y Coord | linate | |
| | IN THE TOWN OF LA VALLE IN SAUK COUNTY | | | | | | 246972.265625 | | | 4828294 | |
| | | | | | | | | | | | |
| | | | | | | Structure NO STR | UCTURE | | | | |
| С | ra | sh Scene | | | | | | | | | |
| F | irst | Harmful Event | | | | First Harm | nful Event Lo | ocation | | | |
| | DITCH | | | | | | DWAY | | | | |
| Ν | Manı | ner of Collision | | | | Light Con | dition | | | | |
| 0 | 00 - NO COLLISION W/VEHICLE IN TRANSPORT | | | | | | нт | | | | |
| F | Road | Surface Condition(s) | | | | Roadway Factor(s) | | | | | |
| ۷ | WET, SNOW, SLUSH | | | | | | | | | | |
| E | Envir | onment Factor(s) | | | | - | | | | | |
| ٧ | NE | ATHER CONDITIONS | | | | NONE | | | | | |
| ۷ | Nea | ther Condition(s) | | | | 1 | | | | | |
| C | CLC | UDY, RAIN, SNOW, S | LEET/HAIL | | | | | | | | |
| A | Anim | al Type | | | | Relation T | o Trafficwa | y | | | |
| | | | | | | | CWAY - OI | | | | |
| | | h Classification - Location | | | | | ssification - | | | | |
| | PUBLIC PROPERTY | | | | | | | ISDICTION | | - | |
| | Tribal Land | | | | | Access Control Special Study NO CONTROL | | | Special Study | | |
| | | n Interchange Area | Junction Location | | Intersection | | | | | | |
| ٢ | 0 | | NON-JUNCTION | | NOT AN INTERSECTION | | | | | | |
| U | nit | Summary | | | | | | | | | |
| | | Status | | Vehicle Op | erating As C | Classification Unit Type | | | | | |
| 1 | ΝT | RANSIT | | D CLASS | | TRUCK | | | | | |
| \ I | Vehicle Type | | | | Operating As Endorsements | | | | | | |
| ι | JTI | ITY TRUCK/PICKUP | TRUCK | | | | | | | | |
| Т | Fotal | Occs | Total # Cita | ations Issued | d Total Traile | | ers | Total Haz | :Mat Types | | |
| 1 | 1 | | | 0 | | 0 | | 0 | | | |
| h | nsurance? Direction Of Travel | | | Pre | CrashTire | Speed Lin | | mit Total Lan | | es | |
| ١ | YES SOUTHBOUND | | | | Mark | | | | 2 | | |
| Ν | Nost | Harmful Event: Collision | Special Fur | | | | Emergency Motor | | | | |
| | DITCH NO SPECIAL F | | | | | TION | | NOT APPL | | | |
| | | raffic Way Traffic Control | | | | | | Traffic Contr | ol Inopera | tive/Missing | |
| | | D-WAY, NOT DIVIDED | | | NO CONTROL Road Curvature | | | NO Road Grade | | | |
| | | асе Туре | | | | | | | | | |
| | | CKTOP (BITUMINOU | S) | STRAIGH | IT | | | LEVEL | | | |
| | Frucl | k Bus or HazMat | | | | | | | | | |
| 1 | , | /ehicle | | | | | | | | | |
| | | License Plate Number | | Plate Type | | St | Country of Issuance | | | | |
| | | 58442DS | LTK - LIC | LTK - LIGHT TRUCK | | WI | UNITED STATES | | | | |
| | _ | Vehicle Identification Nur | Make | | | Year | Model | | | | |
| Č | 0 | 2GCVKPEC1K11009 | CHEVRO | CHEVROLET | | 2019 | SILVERADO | | | | |
| | | Color | | 5 5 | | | Bus Use | Use | | | |
| | | SIL - SILVER (ALUM | | PK - PICKUP | | | | | | | |
| | Initial Contact Point 11 - LEFT FRONT CORNER Extent Of Damage DISABLING DAMAGE | | | Vehicle Da | Vehicle Damage 01 - RIGHT FRONT CORNER, 11 - LEFT FRONT | | | | 7 8 9 10 11 | | |
| 9 | | | | 01 - RIG | | | | | | | |
| | | | | | | | | 5 4 3 2 1 | | | |
| | | | | | | | | | | | |

24-03224

WISCONSIN MOTOR VEHICLE CRASH REPORT

| | | - | | | | | | | | |
|------|---|--------------------------------|-------------|---------------------|---|---------------|--------------------|--|--|--|
| | | | | | SHIELDS TOWING | | | | | |
| | | What Driver Was Doing | | | Vehicle Factors | | | | | |
| | | GOING STRAIGHT | | | | | | | | |
| | | Driver Prior Action Other | | NC | T APPLICABLE | | | | | |
| | | Driver Actions | | | | | | | | |
| | | SPEED TOO FAST/COND | | | | | | | | |
| ⊢ | L | | | | | | | | | |
| UNIT | IIC | | | | | | | | | |
| | VEHICLE | | | | | | | | | |
| | > | | | | | | | | | |
| | | Owner Name | | | Owner Address | | | | | |
| | | STEVEN DONALD ADELMAN | | | 201 MARSHALL RD CAZENOVIA, WI 53924 , US | | | | | |
| 3 | 01 | | | | | | | | | |
| | | | | | | | | | | |
| | Sequence Of Events | | | | | | | | | |
| | | Event | | | | | | | | |
| | 01 | MOTOR VEH IN TRANSPOR | ۲ | | | | | | | |
| | 02 | Event DITCH | | | | | | | | |
| | - | Event | | | | | | | | |
| | 03 | | | | | | | | | |
| | 04 | Event | | | | | | | | |
| | | | | | | | | | | |
| F | | Policy Holder | | | | | | | | |
| UNIT | | Insurance Company | | | | | | | | |
| - | | LYNN-MUTUAL-INS-CO | | | STEVEN ADELMAN | | | | | |
| | I | Individual | | | | | | | | |
| | | Driver | | | Citations Issued Sex 0 MALE | | | | | |
| | ľ | STEVEN ADELMAN | | |) | | | | | |
| | INDIVIDUAL | | | 1 | Date of Birth | th Race WHITE | | | | |
| UNIT | | Address 201 MARSHALL RD | | | Driver License Number | | | | | |
| 5 | D | | | | STATE: WISCONSIN COUNTRY: UNITED STATES | | | | | |
| | N | CAZENOVIA, WI 53924 , US | | | | | | | | |
| | | | | | | | | | | |
| | | On Duty Crash | | | Safety Equipment | | | | | |
| | Sat | fety Equipment | | | | | | | | |
| | | Row Seat Position | | SHOULDER & LAP BELT | | | | | | |
| | | 01 - FRONT ROW | 07 - LEFT | | | | | | | |
| | | Helmet Use | | | Helmet Compliance | | | | | |
| | | Eye Protection | | | Tint Compliance | | | | | |
| | | | | | | | | | | |
| ~ | Σ | | | | Airbag | | | | | |
| 2 | 001 | Injury NO APPA | RENT INJURY | 1 | NON DEPLOYED | | | | | |
| | | Ejected Ejection Path | | | | | Trapped/Extricated | | | |
| | | NOT EJECTED NOT EJECTED/NOT AF | | | ABLE | | NOT TRAPPED | | | |
| | | Medical Transport | | | EMS Agency Identifier | | EMS Run # | | | |
| | | NOT TRANSPORTED | | | | | | | | |
| | | Hospital | | | Date of Death Time of Death | | | | | |
| | | | | | | | | | | |
| | Distracted By Source Distracted By NOT APPLICABLE (NOT DISTRACTED) | | | | | | | | | |
| | Distracted By Action | | | | | | | | | |
| | NOT DISTRACTED | | | | | | | | | |
| | | | | | | | | | | |

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

| | | Non Motorist | Striking Unit # | Location | | | | | | |
|------|------------|---|-----------------|-------------------|--------------------|-------------------|----------------------|----------------|--|--|
| | | Prior Action | | | | | | | | |
| UNIT | INDIVIDUAL | Action | | | | | | | | |
| | | Action Other | | | | | | To/From School | | |
| | L | Suspected Alcohol Use Drug & Alcohol NO | | | Suspected Drug Use | 1 | | | | |
| | | Alcohol Test Given TEST NOT GIVEN | | Alcohol Test Type | 1 | | Alcohol Test Results | | | |
| | | Drug Test Given TEST NOT GIVEN | | Drug Test Type | | Drug Test Results | | | | |
| 2 | 001 | Drug Type | | | | | | | | |
| | | Individual Condition | | | | | | | | |
| | | NOT OBSERVED | | | | | | | | |
| | | NOT OBSERVED | | | | | | | | |