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24-04553

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Location

Table with location details: ON CTHT WB 0.34 MI E OF GILLEM RD IN THE TOWN OF FAIRFIELD IN SAUK COUNTY. Includes Latitude (43.514238531), Longitude (-89.712235121), X Coordinate (280778.34375), Y Coordinate (4821496.5), and Structure Type (NO STRUCTURE).

Crash Scene

Table with crash scene details: First Harmful Event (MOTOR VEH IN TRANSPORT), Manner of Collision (01 - ANGLE), Road Surface Condition (DRY), Environment Factor (NONE), Weather Condition (CLEAR), Animal Type, Crash Classification (PUBLIC PROPERTY), and various other factors like Intersection Type (NOT AN INTERSECTION) and Closure Type (FULL CLOSURE).

Unit Summary

Table with unit summary details: Unit Status (IN TRANSIT), Vehicle Type (UTILITY TRUCK/PICKUP TRUCK), Total Occs (1), Insurance? (YES), Most Harmful Event (MOTOR VEH IN TRANSPORT), Traffic Way (TWO-WAY, NOT DIVIDED), Surface Type (BLACKTOP (BITUMINOUS)), and Vehicle details (License Plate ND8802, Make FORD).

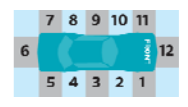
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| | | | | |
|---|--|---|---|-----------------------------|
| UNIT VEHICLE | Color SIL - SILVER (ALUMINUM) | | Body Style PK - PICKUP | Bus Use NOT A BUS |
| | Initial Contact Point 12 - FRONT | | Vehicle Damage | |
| | Extent Of Damage DISABLING DAMAGE | | 12 - FRONT | |
| | Towed Due To Damage TOWED DUE TO DISABLING DAMAGE | | Vehicle Removed By CRAIGS TOWING | |
| | What Driver Was Doing GOING STRAIGHT | | Vehicle Factors | |
| UNIT VEHICLE | Driver Prior Action Other | | NOT APPLICABLE | |
| | Driver Actions OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER | | | |
| | Owner Name JENNIFER NELSON (608) 963-3779 | | Owner Address E12479 COUNTY ROAD T BARABOO, WI 53913 , US | |
| | Sequence Of Events | | | |
| | 01 | 01 | Event MOTOR VEH IN TRANSPORT | |
| 02 | 02 | Event | | |
| 03 | 03 | Event | | |
| 04 | 04 | Event | | |
| UNIT | Policy Holder | | | |
| | Insurance Company AMERICAN-FAMILY-INS-CO | | Individual JENNIFER NELSON | |
| | Individual | | | |
| UNIT INDIVIDUAL | Driver JENNIFER NELSON (608) 963-3779 | | Citations Issued 1 | Sex FEMALE |
| | Date of Birth | | Race WHITE | |
| | Address E12479 COUNTY ROAD T BARABOO, WI 53913 , US | | Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES | |
| | Safety Equipment | | | |
| On Duty Crash | | Safety Equipment | | |
| Row 01 - FRONT ROW | Seat Position 07 - LEFT | SHOULDER & LAP BELT | | |
| Helmet Use | | Helmet Compliance | | |
| Eye Protection | | Tint Compliance | | |
| 01 | 001 | Injury Severity <i>Injury</i> POSSIBLE INJURY | Airbag DEPLOYED-FRONT | |
| Ejected NOT EJECTED | | Ejection Path NOT EJECTED/NOT APPLICABLE | Trapped/Extricated NOT TRAPPED | |
| Medical Transport NOT TRANSPORTED | | EMS Agency Identifier | EMS Run # | |



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Form containing fields for Hospital, Date of Death, Time of Death, Distracted By (Source/Action), Non Motorist (Striking Unit #/Location), Prior Action, Action, Action Other, To/From School, Drug & Alcohol (Suspected Alcohol/Drug Use), Alcohol/Drug Test Results, Drug Type, Individual Condition, and Violations (UTC Number, Issue To?, Statute Number, Description).

Unit Summary

Unit Summary form with fields for Unit Status (IN TRANSIT), Vehicle Operating As Classification (D CLASS), Unit Type (AUTOMOBILE), Vehicle Type (PASSENGER CAR), Total Occs (1), Total Citations Issued (0), Insurance? (YES), Direction Of Travel (WESTBOUND), Pre Crash Tire Mark, Speed Limit (55), Total Lanes (2), Most Harmful Event (MOTOR VEH IN TRANSPORT), Special Function (NO SPECIAL FUNCTION), Emergency Motor Vehicle Use (NOT APPLICABLE), Traffic Way (TWO-WAY, NOT DIVIDED), Traffic Control (NO CONTROL), Surface Type (BLACKTOP (BITUMINOUS)), Road Curvature (STRAIGHT), Road Grade (LEVEL), and Truck Bus or HazMat (NO).

Vehicle information section with fields for License Plate Number (13888GT), Plate Type (IGT - IN GOD WE TRUST), St (WI), and Country of Issuance (UNITED STATES).

02

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24-04553

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | | | | | | |
|----|--------------------|---|---|--|--|--|
| 02 | UNIT VEHICLE | Vehicle Identification Number 5TDBK22C18S019056 | Make TOYOTA | Year 2008 | Model SIENNA | |
| | | Color BLK - BLACK | Body Style VN - VAN | Bus Use | | |
| | | Initial Contact Point 06 - REAR | Vehicle Damage 06 - REAR | | | |
| | | Extent Of Damage DISABLING DAMAGE | | | | |
| | | Towed Due To Damage TOWED DUE TO DISABLING DAMAGE | Vehicle Removed By CRAIGS TOWING | | | |
| | | What Driver Was Doing LEFT TURN | Vehicle Factors NOT APPLICABLE | | | |
| 02 | UNIT VEHICLE | Driver Actions NO CONTRIBUTING ACTION | | | | |
| | | Owner Name NICKOLAS DINY (608) 345-1829 | Owner Address S6397 COUNTY ROAD PF NORTH FREEDOM, WI 53951 , US | | | |
| | | Sequence Of Events | | | | |
| 02 | UNIT VEHICLE | 01 Event MOTOR VEH IN TRANSPORT | | | | |
| | | 02 Event MOTOR VEH IN TRANSPORT | | | | |
| | | 03 Event | | | | |
| | | 04 Event | | | | |
| 02 | UNIT INDIVIDUAL | Policy Holder | | | | |
| | | Insurance Company RURAL-MUTUAL-INS-CO-(ATTN:-CLAIMS-DEPT) | Individual NICKOLAS DINY | | | |
| | | Individual | | | | |
| 02 | UNIT INDIVIDUAL | Driver NICKOLAS DINY (608) 345-1829 | Citations Issued 0 | Sex MALE | | |
| | | | Date of Birth | Race WHITE | | |
| | | Address S6397 COUNTY ROAD PF NORTH FREEDOM, WI 53951 , US | Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES | | | |
| 02 | UNIT INDIVIDUAL | Safety Equipment | | On Duty Crash | | |
| | | | | Safety Equipment SHOULDER & LAP BELT | | |
| | | Row 01 - FRONT ROW | Seat Position 07 - LEFT | | | |
| | | Helmet Use | | Helmet Compliance | | |
| | | Eye Protection | | Tint Compliance | | |
| 02 | UNIT INDIVIDUAL | Injury | Injury Severity SUSPECTED MINOR INJURY | Airbag DEPLOYED-COMBINATION | | |
| | | Ejected NOT EJECTED | Ejection Path NOT EJECTED/NOT APPLICABLE | | Trapped/Extricated NOT TRAPPED | |

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UNIT 02 002 INDIVIDUAL
Medical Transport EMS GROUND EMS Agency Identifier 6000368 EMS Run #
Hospital ST CLARE HOSP Date of Death Time of Death
Distracted By NOT APPLICABLE (NOT DISTRACTED)
Distracted By Action NOT DISTRACTED
Non Motorist Striking Unit # Location
Prior Action
Action
Action Other To/From School
Drug & Alcohol Suspected Alcohol Use NO 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
Drug Type
Individual Condition APPEARED NORMAL

Unit Summary

UNIT 03 INDIVIDUAL
Unit Status IN TRANSIT Vehicle Operating As Classification D CLASS Unit Type TRUCK
Vehicle Type STRAIGHT TRUCK (INSERT TRUCK) Operating As Endorsements
Total Occs 1 Train/Bus # Recorded Total # Citations Issued 0 Total Trailers 0 Total HazMat Types 0
Insurance? YES Direction Of Travel EASTBOUND Pre CrashTire Mark Speed Limit 55 Total Lanes 2
Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT Special Function NO SPECIAL FUNCTION Emergency Motor Vehicle Use NOT APPLICABLE
Traffic Way TWO-WAY, NOT DIVIDED Traffic Control NO CONTROL Traffic Control Inoperative/Missing NO
Surface Type BLACKTOP (BITUMINOUS) Road Curvature STRAIGHT Road Grade LEVEL
Truck Bus or HazMat NO

UNIT 03 003 Vehicle
License Plate Number FB35089 Plate Type HTK - HEAVY TRUCK St WI Country of Issuance UNITED STATES
Vehicle Identification Number 1FDAF57FX1EC01513 Make FORD Year 2001 Model F550

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| | | | |
|---|---|---|--|
| UNIT VEHICLE | Color BLU - BLUE | Body Style PK - PICKUP | Bus Use |
| | Initial Contact Point 12 - FRONT | Vehicle Damage 12 - FRONT | |
| | Extent Of Damage DISABLING DAMAGE | | |
| | Towed Due To Damage TOWED DUE TO DISABLING DAMAGE | Vehicle Removed By CRAIGS TOWING | |
| | What Driver Was Doing GOING STRAIGHT | Vehicle Factors NOT APPLICABLE | |
| UNIT VEHICLE | Driver Prior Action Other | | |
| | Driver Actions NO CONTRIBUTING ACTION | | |
| | Owner Name JEFFERY BLUM | Owner Address 412 LYNN AVE BARABOO, WI 53913 , US | |
| Sequence Of Events | | | |
| UNIT | 01 | Event MOTOR VEH IN TRANSPORT | |
| | 02 | Event | |
| | 03 | Event | |
| | 04 | Event | |
| UNIT | Policy Holder | | |
| | Insurance Company WEST-BEND-MUTUAL-INS-CO | Individual JEFFERY BLUM | |
| UNIT INDIVIDUAL | Individual | | |
| | Driver JEFFERY BLUM | Citations Issued 0 | Sex MALE |
| | | Date of Birth | Race WHITE |
| | Address 412 LYNN AVE BARABOO, WI 53913 , US | Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES | |
| UNIT INDIVIDUAL | Safety Equipment | | On Duty Crash |
| | Safety Equipment SHOULDER & LAP BELT | | |
| | Row 01 - FRONT ROW | Seat Position 07 - LEFT | |
| | Helmet Use | | Helmet Compliance |
| | Eye Protection | | Tint Compliance |
| UNIT INDIVIDUAL | Injury | | Airbag NON DEPLOYED |
| | Injury Severity NO APPARENT INJURY | | |
| | Ejected NOT EJECTED | Ejection Path NOT EJECTED/NOT APPLICABLE | Trapped/Extricated NOT TRAPPED |
| Medical Transport NOT TRANSPORTED | | EMS Agency Identifier | EMS Run # |

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| | | | | | | |
|-------------|--|--|--|--|---------------------------------|----------------|
| UNIT | Hospital | | Date of Death | | Time of Death | |
| | Distracted By | | Distracted By Source NOT APPLICABLE (NOT DISTRACTED) | | | |
| | Distracted By Action NOT DISTRACTED | | | | | |
| | Non Motorist | | Striking Unit # | | Location | |
| | Prior Action | | | | | |
| | Action | | | | | |
| | Action Other | | | | | To/From School |
| | Drug & Alcohol | | Suspected Alcohol Use NO | | 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 | |
| 03 | Drug Type | | | | | |
| | Individual Condition APPEARED NORMAL | | | | | |
| | | | | | | |

Property Owner

| | | | | | | |
|----------------------|--|--|--|--|--|--|
| PROP OWNER 01 | Individual RICHARD SEYMOUR (254) 371-1305 | | Address E12227 CH T BARABOO, WI 53913 , US | | | |
| | | | | | | |

Fixed Objects Struck

| | | | | |
|-----------|---------------|----------------|------------------|-------------------|
| 01 | Striking Unit | Struck Object | Structure Number | Damage Tag Number |
| | 03 | MAILBOX | | |

Property Owner

| | | | | | | |
|----------------------|--|--|--|--|--|--|
| PROP OWNER 02 | Individual BRIAN HENDRICKSON (608) 356-9018 | | Address E12220 CH T BARABOO, WI 53913 , US | | | |
| | | | | | | |

Fixed Objects Struck

| | | | | |
|-----------|---------------|----------------|------------------|-------------------|
| 02 | Striking Unit | Struck Object | Structure Number | Damage Tag Number |
| | 03 | MAILBOX | | |