25-04314

WISCONSIN MOTOR VEHICLE CRASH REPORT

Document Number Overrie	de Primary Crash	Document #	Agency 25-043	Crash Number <b>14</b>	•	g Officer/Deputy NT E. KNULL			
Crash Date 05/06/2025	Crash Time 07:17 AM		Date Arr 05/06/2		Time Arrive 07:41 AM				
Date Notified 05/06/2025	Time Notified 07:17 AM	_	Total Un <b>02</b>	its	Total Injure <b>00</b>	Total InjuredTotal Killed0000			
On Emergency	Hit and Run	Lane Clos		Work Zone		r or Towed	Reporting Threshold		
Government Property	Active Sc	hool Zone	School E NO	Bus Related	Tags		•		
Reportable	Crash Type DT4000 (STA	NDARD CRASI	H)		Amen	ded	Secondary Crash		
Description  Diagram						Reconstruction	n Rv		
	THIEMAN H			NOT TO S	SCALE	Photos By Additional Info	rmation		

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### WISCONSIN MOTOR VEHICLE CRASH REPORT

	~~	ation								(608) 356-4895	
Ē		THIEMAN HILL RD				Latitude			Longitu	Ide	
		MIS				43.50660	9704		•	3642869	
		COON VALLEY DR				X Coordina	ate		Y Coor		
		HE TOWN OF REED: AUK COUNTY	SBURG			254767.7	96875		48215		
						Structure Type					
						NO STR	JCTURE				
(	Cra	sh Scene 💻									
Ĩ	First	Harmful Event				First Harm	ful Event Lo	ocation			
		OR VEH IN TRANSP	PORT			ON ROA	DWAY				
		ner of Collision				Light Cond					
		FRONT TO REAR				DAYLIGI					
		Surface Condition(s)			Roadway	-actor(s)					
	DRY	*									
ľ	Envir	onment Factor(s)									
	NOM	IE				NONE					
┢	Wea	ther Condition(s)									
	CLE										
	Anim	al Type					o Trafficwa				
	Crash Classification - Location PUBLIC PROPERTY Tribal Land Within Interchange Area Junction Location						WAY - OI	-			
						NO SPECIAL JURISDICTION Access Control NO CONTROL			Special Study		
									opoolal otday		
ŀ					Intersection Ty						
	NO	-	NON-JUNCTION			INTERSE	CTION				
ī	Jnit	Summary									
		Status		Vehicle Ope	erating As C	lassification		Unit Type			
	IN T				D CLASS			TRUCK			
•		cle Type					Operating As Endorsements		ements		
		ITY TRUCK/PICKUP					Tatal Tasil		T-4-111-		
	1 otal 1	Occs	Train/Bus # Recorded	Total # Cita <b>0</b>	tions Issued		Total Trail <b>0</b>	ers	1 otal Ha	zMat Types	
ł		ance?	Direction Of Travel	-	<u> </u>		U Speed Lin	nit	U Total La	nes	
	YES		NORTHBOUND	Pre	CrashTire Mark	e Speed Lii 45		2		anes	
ŀ	-	Harmful Event: Collision		Special Fun	Special Function				Emergency Motor Vehicle Use		
	MO	OR VEH IN TRANSF	PORT	NO SPEC	IAL FUNC	CTION		NOT APPI		E	
ľ	Traff	c Way		Traffic Control				Traffic Control Inoperative/Missing			
		-WAY, NOT DIVIDE	)	NO CONT				NO Road Grade			
				Road Curva							
ŀ		CKTOP (BITUMINOL	JS)	STRAIGH	I			LEVEL			
	NO										
		/ehicle									
		License Plate Number		Plate Type	•		St	Country of Is	suance		
		VN8430		LTK			WI	UNITED ST	TED STATES		
	-	Vehicle Identification Nu	Make	Make		Year	Model				
	01	1C6SRFJT9NN2698	19	RAM			2022	1500			
		Color		Body Style				Bus Use			
	ш	BLU - BLUE Initial Contact Point		PK - PIC Vehicle Da					г		
		06 - REAR								7 8 9 10 11	
• [	/EHICL	Extent Of Damage		06 - REA					6 12		
									54321		

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### WISCONSIN MOTOR VEHICLE CRASH REPORT

01	01 01 VEHICLE	NOT TOWED What Driver Was Doing BACKING Driver Prior Action Other Driver Actions UNSAFE BACKING Owner Name LARRY ADKINS (262) 496-4535		OPERATOR Vehicle Factor	s				
01	01	BACKING Driver Prior Action Other Driver Actions UNSAFE BACKING Owner Name LARRY ADKINS							
01	01	Driver Prior Action Other Driver Actions UNSAFE BACKING Owner Name LARRY ADKINS			CABLE				
01	01	Driver Actions UNSAFE BACKING Owner Name LARRY ADKINS							
01	01	UNSAFE BACKING Owner Name LARRY ADKINS		1					
01	01	Owner Name LARRY ADKINS							
01	01	LARRY ADKINS							
01	01	LARRY ADKINS							
01	01	LARRY ADKINS							
	Ś	LARRY ADKINS							
	Ś	LARRY ADKINS		Owner Ad	dress				
	Ś	(262) 496-4535			HIEMAN HILL				
	ſ			REEDSE	BURG, WI 539	959 , US			
	ſ								
	<u> </u>	Sequence Of Events Event							
	0	MOTOR VEH IN TRANSPOR	RT						
	02	Event							
	03	Event							
		Event							
	04								
ъ	F	Policy Holder							
UNIT		Insurance Company		INDIVIDUA					
	ļ	STATE-FARM-CLASSIC-INS	5-00	LARRY A	DKINS				
	I	ndividual DRIVER		Citations Iss	und S	ex			
		LARRY ADKINS		0		IALE			
	IAL	(262) 496-4535	Date of Birth						
E	Ĩ					HITE			
UNIT		Address S3913 THIEMAN HILL RD		Driver License Number					
	Z	REEDSBURG, WI 53959, U	IS	STATE: W	ISCONSIN C	OUNTRY: UNIT	ED STATES		
	Sof	On Duty C	rash	Safety Equi	pment				
	Sai		1						
				NONE US	ED - VEHICL	EOCCUPANT			
		Helmet Use		Helmet Compliance					
	·	Eye Protection		Tint Complia	Tint Compliance				
2	01	the forward the second	-	Airbag					
	<u></u> Г			NON DEP	LOTED		Trapped/Extricated		
			, IOT EJECTED/NOT A	PPLICABLE			NOT TRAPPED		
	Medical Transport			EMS Agend	y Identifier		EMS Run #		
		NOT TRANSPORTED							
				Date of Dea	เฑ		I ime of Death		
		Hospital							
		Distracted	By Source PLICABLE (NOT DISTI	RACTED)					
			By Source PLICABLE (NOT DISTI	RACTED)					
		REEDSBURG, WI 53959 , U         Fety Equipment       On Duty Ci         Row       On Duty Ci         01 - FRONT ROW       Helmet Use         Eye Protection       NO APPA         Ejected       E         NOT EJECTED       N         Medical Transport       N	rash Seat Position 07 - LEFT erity ARENT INJURY jection Path	Safety Equi NONE US Helmet Con Tint Complia Airbag NON DEP PPLICABLE	pment ED - VEHICL npliance ance LOYED	E OCCUPANT	Trapped/Extricated NOT TRAPPED		

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## WISCONSIN MOTOR VEHICLE CRASH REPORT

		Non Motorist	king Unit #	Location						
		Prior Action								
E	DUAL	Action								
UNIT	INDIVIDUAL									
		Action Other						To/From School		
	1	Drug & Alcohol NC	spected Alcohol L	lse	Suspected Drug Use			I		
		Alcohol Test Given		Alcohol Test Type			Alcohol Test	t Results		
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Resu	lts			
2	001	Drug Type	Drug Type							
		Individual Condition								
APPEARED NORMAL										
		t Summary								
		Status <b>RANSIT</b>			ehicle Operating As Classi CLASS	fication	Unit Type			
02	Vehi	Vehicle Type (SPORT) UTILITY VEHICLE					Operating As Endorsements			
		Train/Bus # Recorded		corded To	otal # Citations Issued	Total Tra <b>0</b>	ailers	Total HazMat Types 0		
		Insurance? Direction Of Travel YES NORTHBOUND			Pre CrashTire Mark	Speed L <b>45</b>	imit	Total Lanes <b>2</b>		
UNIT		Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT			Special Function NO SPECIAL FUNCTION			Motor Vehicle Use LICABLE		
Ì		Traffic Way TWO-WAY, NOT DIVIDED			raffic Control O CONTROL		Traffic Contr <b>NO</b>			
		ace Type ACKTOP (BITUMINOUS			oad Curvature <b>TRAIGHT</b>		Road Grade			
	Truc	k Bus or HazMat	·)	3						
	NO									
		Vehicle License Plate Number		F	Plate Type	St	Country of Is	suance		
		AZY1023		1	AUT W		UNITED ST			
02	02	Vehicle Identification Num 1FMJU2AT5JEA63043			Make F <b>ORD</b>	Year <b>2018</b>	Model EXPEDITIC			
	U	Color	5		Body Style	2010	Bus Use			
		BLU - BLUE		L	JT - SPORT UTILITY V	/EHICLE				
	Ē	Initial Contact Point 12 - FRONT		١	/ehicle Damage			7 8 9 10 11		
UNIT	VEHICLE	Extent Of Damage	GE		01 - RIGHT FRONT CO	DRNER, 12 - Fl	RONT	6 5 4 3 2 1		
		Towed Due To Damage			/ehicle Removed By			I		

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## WISCONSIN MOTOR VEHICLE CRASH REPORT

		What Driver Was Doing		Vehicle	Factors				
		STOP IN TRAFFIC Driver Prior Action Other		ΝΟΤ Δ	PPLICABLE				
		Driver Phor Action Other							
		Driver Actions							
	щ	NO CONTRIBUTING ACTIO	N						
UNIT	VEHICLE								
5	EH								
	>								
		Owner Name			vner Address				
02	02	LYDIA CULP (608) 495-2348			551 COUNTY RO EDSBURG, WI 5				
	0	(000) 430-2040				,000			
		Sequence Of Events							
	01	Event	· <b>-</b>						
	0		(1						
	02	Event							
	03	Event							
	04	Event							
⊢	l	Policy Holder							
UNIT					VIDUAL				
				LYDIA CULP					
		Individual			Citations Issued Sex				
		DRIVER LYDIA ALICE CULP (608) 495-2348			0 FEMALE				
	INDIVIDUAL				of Birth	Race			
Ę	IDI				WHITE				
UNIT	DIV	Address S4551 COUNTY ROAD S		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
	Z	REEDSBURG, WI 53959, U	S						
		Or Dute Or							
	Saf	On Duty Cr fety Equipment	asn	Safety Equipment					
	l	Row Seat Position			SHOULDER & LAP BELT				
		01 - FRONT ROW	07 - LEFT						
		Helmet Use			Helmet Compliance				
		Eye Protection	Tint Compliance						
02	002	Injury Seve	-	Airba	-				
0	8			NON	N DEPLOYED				
			ection Path OT EJECTED/NOT APF	PLICAB	LE		Trapped/Extricated NOT TRAPPED		
		Medical Transport			Agency Identifier		EMS Run #		
		NOT TRANSPORTED							
		Hospital		Date	of Death		Time of Death		
		Distracted By Distracted NOT APP	By Source PLICABLE (NOT DISTRA	ACTED)	)				
		Distracted By Action <b>NOT DISTRACTED</b>							
		Non Motorist	it # Location						
			•						

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## WISCONSIN MOTOR VEHICLE CRASH REPORT

		Prior Action						
UNIT	INDIVIDUAL	Action						
	L	Action Other Drug & Alcohol	Suspected Alcohol Us	e	Suspected Drug Use			To/From School
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	5	
02	002	Drug Type						
		Individual Condition						
		APPEARED NORM	IAL					