WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	•		Agency Crash Number 25-04715		Investigating Officer/Deputy SERGEANT M. TATE						
×	Crash Date 05/16/2025	Crash Time Date Arrived Time Arrived 06:55 PM 05/16/2025 06:58 PM										
155	Date Notified 05/16/2025	Time Notified 06:58 PM		Total Units 02		Total Injured 00	1 '					
-0F	On Emergency Hi	t and Run	Lane Closu	re	Work Zone	Trailer or 1	Towed		Reporting Threshold			
E E	Government Property	Active Sc	hool Zone	School NO	Bus Related	Tags						
	▼ Reportable	Crash Type DT4000 (STA	NDARD CRASH)	·	Amended			Secondary Crash			

Description Diagram Reconstruction By Photos By SGT TATE Additional Information **PHOTOS** W Monroe Ave (hwy 23) 2 02 208 Google

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

UNIT 1 WAS AT THE STOP SIGN ON S BURRITT AVE, FACING NORTH. UNIT 2 WAS EASTBOUND ON W MONROE AVE IN THE LEFT LANE. UNIT 1 ATTEMPTED TO CROSS W MONROE AVE TO CONTINUE ON N BURRETT AVE. UNIT 1 PULLED OUT IN FRONT OF UNIT 2. UNIT 2 ATTEMPTED TO AVOID THE CRASH BUT WAS UNSUCCESSFUL. UNIT 2 STRUCK THE REAR BUMPER OF UNIT 1. UNIT 1'S REAR BUMPER WAS TORN OFF. UNIT 2 HAD MINOR FRONT BUMPER DAMAGE. UNIT 1 OPERATOR WAS CITED.

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data. 1 of 9

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

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_		RSECTION			Latitude	· · · · ·		Longitude	
		STH23 EB			43.5891	61435		-89.797578734	
		STH23 EB			X Coordin			Y Coordinate	
ı	N TH	HE VILLAGE OF LAKE	DELTON					4830046.5	
I	N SA	AUK COUNTY							
					Structure				
L					NO STR	RUCTURE			
C	ras	sh Scene							
Ŧ	First H	Harmful Event			First Harr	mful Event	Location		
ı	иот	OR VEH IN TRANSPO	ORT	ON ROA	ADWAY				
1	Manne	er of Collision		Light Con	ndition				
1)3 - F	FRONT TO REAR			DAYLIG				
┸		Surface Condition(s)		Roadway	Factor(s)				
		Carraco Corranion(c)		rtoadway	1 40101(0)				
Į.	DRY								
E	Enviro	onment Factor(s)							
	NON	` '		NONE					
'	AOIAI	L			NONE				
١	Neath	ner Condition(s)							
1	CLEA	AR							
L									
1	Anima	al Type			Relation	To Trafficw	ay		
					TRAFFI	CWAY - 0	ON ROAD		
(Crash	Classification - Location			Crash Cla	assification	- Jurisdiction		
ı	PUBL	LIC PROPERTY			NO SPE	CIAL JU	RISDICTION		
h	Tribal	Land			Access Control			Special Study	
					PARTIA	L CONT	ROL		
1	Nithin	Interchange Area	Junction Location	Inters	section Type		-		
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		Summary ===					T		
ļ	Jnit S	Status		Vehicle Operating	As Classification	assification Unit Type			
	IN TRANSIT								
				D CLASS			AUTOMO		
١	/ehicl	le Type						BILE As Endorsements	
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Wisconsin Motor Vehicle Crash Form DT4000

is report does not include any CJIS data. 2 of 9

Crash Time 06:55 PM

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

							(000) 000 4000					
		Towed Due To Damage NOT TOWED		Vehicle Removed B	у							
		What Driver Was Doing GOING STRAIGHT		Vehicle Factors								
		Driver Prior Action Other		NOT APPLICABI	NOT APPLICABLE							
		Driver Actions FAILED TO YIELD RIGH	T OF WAY									
L	픙	FAILED TO TIELD RIGH	I-OF-WAT									
EN S	VEHICLE											
	>											
		Owner Name EAN HOLDINGS LLC		Owner Address 14002 E 21S		1500						
2	5			TULSA, OK 7	74134 142	4, US						
		Sequence Of Events										
		Event										
	2	Event	PORT									
	05	Event										
	03	Event										
	4	Event										
⊨	- 1	Policy Holder										
FIND		Insurance Company AMERICAN EXPRESS		ORGANIZATION								
		Individual		EARTHOLDINGS ELEC								
		DRIVER		Citations Issued Sex								
	ᆜ	SARAH ICKEN (608) 320-2024		1 FEMALE Date of Birth Race								
⊨	INDIVIDUAL	(000,000		WHITE								
P	≧	Address 826 HIBBARD ST		Driver License Nu	umber							
	Z	COLUMBUS, WI 53925 ,	us									
		On Dut	ty Crash	Safety Equipment								
	Sat	fety Equipment	ty Clasii	Salety Equipmen	ı							
		Row	Seat Position	SHOULDER &	LAP BEL	т						
		01 - FRONT ROW Helmet Use	07 - LEFT	Helmet Complian	ce							
		Eye Protection		Tint Compliance								
		Lye Protection		Tint Compliance								
2	00		Severity PPARENT INJURY	Airbag NON DEPLOY	ED							
		Ejected	Ejection Path			Trapped/Extricated						
		NOT EJECTED Medical Transport	NOT EJECTED/NOT AF	PPLICABLE EMS Agency Ider	ntifier	NOT TRAPPED EMS Run #						
		NOT TRANSPORTED		LINO Agency Idea	idiloi	LIVIO INGILIA						
		Hospital		Date of Death		Time of Death						
		Distracted By NOT	ted By Source APPLICABLE (NOT DIST	RACTED)		1						
		Distracted By Action NOT DISTRACTED										
ı		NOT DISTRACTED										

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data. $\begin{tabular}{ll} 3 & of & 9 \end{tabular}$

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

								` ,	
		Non Motorist Striki	ng Unit#	Location					
		Prior Action		·					
		Action							
	AL.								
FNS	INDIVIDUAL								
5	2								
	=								
		Action Other						To/From School	
		Susp	ected Alcohol l	lse	Suspected Drug Use				
	L	Drug & Alcohol NO	Colou Alconor C		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			
2	001	Drug Type							
ľ	0								
		Individual Condition							
		APPEARED NORMAL							
	I	Individual			I O'to fine a leave d	I 0			
	_	PASSENGER ROSEMARY ICKEN			Citations Issued 0	Sex FEMALE			
Ļ	INDIVIDUAL	(608) 320-2024			Date of Birth	Race WHITE			
ş		Address 826 HIBBARD ST			Driver License Number				
	Z	COLUMBUS, WI 53925	, US						
		On D	uty Crash		Safety Equipment				
	Sat	Row	Seat Po	osition	SHOULDER & LAP	BELT			
		01 - FRONT ROW	09 - R						
		Helmet Use			Helmet Compliance				
		Eye Protection			Tint Compliance				
2	005		Severity	NJURY	Airbag NON DEPLOYED				
		Ejected	Ejection Pa	ath	1		Trapped/Extricated		
		NOT EJECTED Medical Transport	NOT EJE	CTED/NOT APPL	EMS Agency Identifier		NOT TRAPPED EMS Run #		
		NOT TRANSPORTED							
		Hospital			Date of Death		Time of Death		
		Distracted By Distra	acted By Sourc	е	•		•		
		Distracted By Action							
		Non Motorist	ng Unit#	Location					
		NOT WOLDITS!							

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data. $4 \quad \text{of} \quad 9$

Crash Date 05/16/2025
Crash Time 06:55 PM

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

									(000) 000 4000	
		Prior Action								
İ		Action								
l.	INDIVIDUAL									
F	Ĭ									
5	2									
	Z									
		Action Other							To/From School	
			Suspected	Alcohol II	lee	Suspected Drug Use				
	L	Orug & Alcohol	NO	AICUNOI U	130	NO				
		Alcohol Test Given			Alcohol Test Type	•		Alcohol Test Results		
		TEST NOT GIVEN Drug Test Given			Drug Test Type		Drug Test Results	<u> </u>		
		TEST NOT GIVEN					_ rog rost results			
2	002	Drug Type			•					
	9									
		Individual Condition								
		APPEARED NORM	IAL							
		Individual								
		PASSENGER GAVIN COWELL (608) 320-2024			Citations Issued Sex					
	AL				0 Date of Birth	MALE Race				
⊨	INDIVIDUAL					WHITE				
N N	2	Address 826 HIBBARD ST				Driver License Number				
	Z	COLUMBUS, WI 53	925 , US							
			On Dustri Co	ach		Safaty Equipment				
	Saf	ety Equipment	On Duty Cr	asn		Safety Equipment				
		Row		Seat Po		SHOULDER & LAP BELT				
		02 - SECOND ROW Helmet Use	ı	09 - RI	GHT	Helmet Compliance				
						,				
		Eye Protection				Tint Compliance				
2	003	Inium	Injury Seve	rity		Airbag				
	ŏ		NO APPA	RENT II	NJURY	NON DEPLOYED		Trapped/Extricated		
		NOT EJECTED			un CTED/NOT APPI	LICABLE		NOT TRAPPED		
		Medical Transport				EMS Agency Identifier		EMS Run #		
		NOT TRANSPORTI Hospital	ED			Date of Death		Time of Death		
						240 01 20001		or boati		
		Distracted By	Distracted I	By Source	e					
		Distracted By Action								
		Non Motorist	Striking Uni	it #	Location					
		Prior Action								

Wisconsin Motor Vehicle Crash Form DT4000 This report does not include any CJIS data. 5 of 9

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

											(000) 000 4000
		Action									
	INDIVIDUAL										
UNIT	ਰ										
5	<u>></u>										
	Ĭ										
		Action Other									To/From School
	ı	Drug & Alcohol	Suspected NO	d Alcohol U	Jse	Suspected NO	Drug Use				
		Alcohol Test Given			Alcohol Test Ty				Alcohol Tes	t Results	
		TEST NOT GIVEN			,						
		Drug Test Given TEST NOT GIVEN	/EN		Drug Test Type)		Drug Test Result	S		
9	003	Drug Type	Drug Type								
		Individual Condition									
		APPEARED NORM	//AL								
	,	L Violations									
		UTC Number	Issue To		tute Number	Description		AV FROM OT	on olon		
	2	BL507114	001	340	6.18(3)	FAIL/TIEL	_D RIGH I/W	AY FROM STO	JP SIGN		
	Unit Summary										
						Mahiala On anat	i		T =		
	Unit	Status				Vehicle Operat	ing As Classifi	cation	Unit Type	RII F	
	Unit IN T					Vehicle Operat D CLASS	ing As Classifi	cation	Unit Type AUTOMOI Operating A		nents
02	Unit IN T Vehi	Status RANSIT				-	ing As Classifi		AUTOMOI Operating A	s Endorsen	
	Unit IN T Vehi PAS Tota	Status RANSIT cle Type	Trair	n/Bus # Re	ecorded	D CLASS Total # Citation		Total Trai	AUTOMOI Operating A	s Endorsen Total Hazi	
	Unit IN T Vehi PAS Tota 2	Status TRANSIT Cle Type SSENGER CAR				D CLASS Total # Citation 0	is Issued	Total Trai	AUTOMOI Operating A	s Endorsen Total Hazi	Mat Types
02	Unit IN T Vehi PAS Tota 2	Status TRANSIT cle Type SSENGER CAR I Occs rance?	Dire	n/Bus # Re ction Of Tr STBOUN	ravel	Total # Citation Pre Cra		Total Trai	AUTOMOI Operating A	s Endorsen Total Hazi	Mat Types
02	Unit IN T Vehi PAS Tota 2 Insui YES	Status TRANSIT Cle Type SSENGER CAR I Occs rance? Status	Direct EAS	ction Of Tr	ravel	Total # Citation 0 Pre Cra Ma Special Function	ashTire ark	Total Trai 0 Speed Lir 45	AUTOMOI Operating A lers nit	Total Hazi Total Lane 4 Motor Vehice	Mat Types
	Unit IN T Vehi PAS Tota 2 Insui YES Most	Status RANSIT cle Type SSENGER CAR I Occs rance? It Harmful Event: Collision	Direct EAS	ction Of Tr	ravel	Total # Citation 0 Pre Cra Ma Special Function NO SPECIAL	ashTire ark	Total Trai 0 Speed Lir 45	AUTOMOI Operating A lers nit Emergency NOT APPI	Total Hazi 0 Total Lane 4 Motor Vehiu	Mat Types es cle Use
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Wisconsin Motor Vehicle Crash Form DT4000

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

							4090			
		Towed Due To Damage NOT TOWED		Vehicle Removed By						
		What Driver Was Doing		Vehicle Factors						
		GOING STRAIGHT		NOT APPLICABLE						
		Driver Prior Action Other		NOT APPLICABLE						
		Driver Actions NO CONTRIBUTING ACT	ION	•						
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	>									
		Owner Name		Owner Address						
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05	0			WAUSAU, WI 544	01,05					
	•	Sequence Of Events								
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	05	Event								
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.		Policy Holder								
L		Insurance Company		INDIVIDUAL						
		l								
5		PROGRESSIVE-CLASSIC	:-INS-CO	MINJAE VANG						
ס		PROGRESSIVE-CLASSIC	:-INS-CO	MINJAE VANG						
D	ı	Individual DRIVER	:-INS-CO	MINJAE VANG Citations Issued	Sex					
ס		Individual DRIVER MINJAE VANG	C-INS-CO	Citations Issued	MALE					
		Individual DRIVER	C-INS-CO	Citations Issued	MALE Race	IVE HAWAIIAN OR OTHER PACIFIC IS	SLA			
		DRIVER MINJAE VANG (715) 679-4115 Address	C-INS-CO	Citations Issued	MALE Race ASIAN OR NAT	IVE HAWAIIAN OR OTHER PACIFIC IS	SLA			
UNIT	INDIVIDUAL	DRIVER MINJAE VANG (715) 679-4115 Address 3516 WILDWOOD LN		Citations Issued 0 Date of Birth	MALE Race ASIAN OR NAT	IVE HAWAIIAN OR OTHER PACIFIC IS	SLA			
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TINU	INDIVIDUAL	Individual DRIVER MINJAE VANG (715) 679-4115 Address 3516 WILDWOOD LN WAUSAU, WI 54401 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury S NO AP Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital	Seat Position 07 - LEFT everity PARENT INJURY Ejection Path NOT EJECTED/NOT A	Citations Issued 0 Date of Birth Driver License Numbe Safety Equipment SHOULDER & LAP Helmet Compliance Tint Compliance Airbag NON DEPLOYED APPLICABLE EMS Agency Identifier Date of Death	MALE Race ASIAN OR NAT	Trapped/Extricated NOT TRAPPED EMS Run #	SGLA			

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		_							` ,		
		Non Motorist	Striking Ur	nit#	Location						
		Prior Action									
		Action									
	A.										
TND	INDIVIDUAL										
5	2										
	=										
		Action Other							To/From School		
			Suspected	Alcohol I	lee	Suspected Drug Use					
	L	Orug & Alcohol	NO	Alcohorc		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				
05	004	Drug Type			<u> </u>						
	0										
		Individual Condition									
		APPEARED NORM	//AL								
	ı	ndividual PASSENGER				Totaliana Innest	I o				
		BRAELYN	RUDOLI	РН		Citations Issued 0	Sex FEMALE				
Ļ	INDIVIDUAL					Date of Birth	Race WHITE				
Ę		Address 227859 SNOWBIR	D AVE			Driver License Number					
	Z	WAUSAU, WI 5440									
			On Duty C	rash		Safety Equipment					
	Sat	ety Equipment		Seat Po	peition	SHOULDER & LAP	BELT				
		01 - FRONT ROW		09 - RI							
		Helmet Use				Helmet Compliance					
		Eye Protection				Tint Compliance					
05	900		NO APP		N IIIPV	Airbag NON DEPLOYED					
	Ŭ	Ejected	E	jection Pa	ith	1		Trapped/Extricated			
		NOT EJECTED Medical Transport	N	IOT EJE	CTED/NOT APPL	EMS Agency Identifier		NOT TRAPPED EMS Run #			
		NOT TRANSPORT	ED								
		Hospital				Date of Death		Time of Death			
		Distracted By	Distracted	By Source	е	•		•			
		Distracted By Action									
		Non Matari	Striking Ur	nit#	Location						
		Non Motorist									

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This report does not include any CJIS data. 8 of 9

Crash Time 06:55 PM

Crash Date 05/16/2025

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Prior Action					
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_	Ν						
LNO	VID						
_	INDIVIDUAL						
	=						
		Action Other					To/From School
		Action Other					10/110111 3011001
	L	Drug & Alcohol NO	Jse	Suspected Drug Use NO			
		Alcohol Test Given	Alcohol Test Type	<u> </u>		Alcohol Test Results	
		TEST NOT GIVEN					
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results	S	
05	900	Drug Type					
-	0						
İ		Individual Condition					
		APPEARED NORMAL					