Wisconsin Motor Vehicle Crash

Form DT4000

### **WISCONSIN MOTOR VEHICLE CRASH REPORT**

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

Crash Date 06/12/2025

Document Number Override	Primary Crash Document #	Agency Crash Number <b>25-05876</b>	Investigating Office DEPUTY S. MES	
Crash Date <b>06/12/2025</b>	Crash Time 11:31 AM	Date Arrived <b>06/12/2025</b>	Time Arrived 11:41 AM	
Date Notified 06/12/2025	Time Notified 11:31 AM	Total Units <b>02</b>		Fotal Killed <b>00</b>
On Emergency	lit and Run Lane C		Trailer or To	wed Reporting Threshold
Government Property	Active School Zone	School Bus Related NO	Tags	
<b>✓</b> Reportable	Crash Type PRIVATE PROPERTY/PA	RKING LOT	Amended	Secondary Crash
Description  Diagram	•			•
	the turn too s Unit 1 struck	Not to scale d right, cutting short, in which legally parked	Additi	. S.MESSNER
	unit 2.		РНО	103
Ho Chu	unk Casino Parking lot at S	3214 CTH BD		
		e not added any CJIS data in t		
AISLE AT A PARKING LOT AT S3	214 CTH BD, TOWNSHIP OF DEL <sup>-</sup> IIT 2, A SILVER 2024 KIA SORENT	BUICK ENCORE, BEARING WI# AZB TON, SAUK COUNTY, WISCONSIN. V O, BEARING WI# 919WGU. BOTH UN	VHILE TURNING, UNIT 1 TI	URNED TOO SHORT OF THE AISLE,

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	_oc	ation <b>——</b>									
Ì		KING LOT				Latitude			Longitu	ıde	
	CTHBD LOT S3214						913			3846157	
	(FIRE S3214) IN THE TOWN OF DELTON						X Coordinate		Y Coor	dinate	
							275847.6875			41.5	
							Туре				
							,,				
(	Cra	sh Scene									
1	First	Harmful Event				First Harm	ıful Event L	ocation			
	PAR	KED MOTOR VEHICL	LE			OFF RO	ADWAY, I	OCATION U	NKNOV	VN	
	Manı	ner of Collision				Light Condition					
	01 -	ANGLE				DAYLIGI	нт				
	Road	Surface Condition(s)				Roadway	Factor(s)				
	DRY	•									
	Envir	onment Factor(s)				1					
	NON	IE				NONE					
	Wea	ther Condition(s)				1					
	CLE	AR									
	Anim	al Type				Relation T	o Trafficwa	у			
								Y - PARKING	LOT		
		h Classification - Location /ATE PROPERTY				Crash Classification - Jurisdiction PRIVATE PROPERTY					
		I Land				Access Control Special Study					
						NO CONTROL					
	Withi	n Interchange Area	Junction Location NON-JUNCTION				tion Type N INTERSECTION				
	_	Summary =									
		Status		Vehicle One	erating Δs C	lassification		Unit Type			
		gg					AUTOMOBILE				
	IN TRANSIT  Vehicle Type					Operating As Endorsements					
01		(SPORT) UTILITY VEHICLE					operating / a Endorsoments				
	•	Occs	Train/Bus # Recorded	Total # Cita	tions Issued		Total Trail	ers	Total Ha	zMat Types	
	1			0			0		0	,,	
		ance?	Direction Of Travel	Pre	Pre CrashTire				Total Lar	ines	
=	YES		SOUTHBOUND		Mark	N/A					
		Harmful Event: Collision		· ·	Special Function			Emergency Motor Vehicle Use			
		KED MOTOR VEHICL	LE		NO SPECIAL FUNCTION						
		c Way		Traffic Control			Traffic Control Inoperative/Missing				
		KING LOT OR PRIVA	IE PROPERTY		NO CONTROL			NO Road Grade			
		CKTOP (BITUMINOU	<b>S</b> )		Road Curvature  STRAIGHT			LEVEL			
		Bus or HazMat	<del>-</del>	JINAIGH				LLVEL			
	NO										
	,	/ehicle									
		License Plate Number		Plate Type		St	Country of Issuance				
		AZB1485	AUT			WI	UNITED STATES				
5	01	Vehicle Identification Nur	Make			Model SNCOPE CY					
	0	KL4AMESL0SB0420		BUIC 2025			ENCORE GX				
		Color	Body Style  Bus Use  Bus Use								
	111	BLU - BLUE	UT - SPORT UTILITY VEHICLE  Vehicle Damage								
	LE LE	Initial Contact Point  02 - RIGHT SIDE FRO				7 8 9 10 11					
	₽	Extent Of Damage		02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 04 - RIGHT SIDE REAR			6 2 12				
כ	VEHICL	FUNCTIONAL DAMA	04 - RIGI				5 4 3 2 1				
		1 STOTIONAL DAMAGE									

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		Towed Due To Damage		Vehi	cle Removed By				
		NOT TOWED		OPE	RATOR				
		What Driver Was Doing		Vehi	cle Factors				
		RIGHT TURN							
		Driver Prior Action Other		NO	T APPLICABLE				
		Driver Actions		ļ					
	щ	OTHER CONTRIBUTING	ACTION						
╘	VEHICLE								
LNO	표								
	VE								
		Owner Name YUMAI HE			Owner Address W1838 COUNTY ROAD J				
7	01	TOMATTE			WISCONSIN DELL		S		
		Sequence Of Events							
	01	Event RIGHT TURN							
	2	Event							
	02	PARKED MOTOR VEHICI	LE 						
	03	Event							
	04	Event							
		D. II. II. II.							
╘	ı	Policy Holder							
LNO		Insurance Company SAFECO-INS-CO-OF-ILLINOIS			INDIVIDUAL MICHAEL STROMBERG				
				1.00					
		Individual DRIVER		LC	tations Issued	Sex			
		XIAOMEI WEI			itations issued	FEMALE			
	Ι				ate of Birth	Race			
_	INDIVIDUAL				WHITE				
	Σ	Address			Driver License Number  STATE: ILLINOIS COUNTRY: UNITED STATES				
_	N	W1838 COUNTY ROAD J WISCONSIN DELLS, WI 53965, US							
		Wiodowom Beelo, Wi	, 00		OTALE. IEEMOIO GOGITTITI. GITTED GTALEG				
		On Duty	v Crash	6/	Cofety Equipment				
	Sat	fety Equipment	y Olasii	36	Safety Equipment				
		Row Seat Position		s	HOULDER & LAP E	BELT			
		01 - FRONT ROW	07 - LEFT						
		Helmet Use	net Use		Helmet Compliance				
		Eye Protection			Tint Compliance				
_	Ξ	Injury Severity			Airbag				
NO APPARENT INJURY									
		Ejected	Ejection Path				Trapped/Extricated		
		NOT EJECTED	NOT EJECTED/NOT A				NOT TRAPPED		
	Medical Transport			E	EMS Agency Identifier		EMS Run #		
	NOT TRANSPORTED  Hospital				Date of Death Time of Death				
					alo oi bodiii		Table of Death		
		Distracted By UNKN	ed By Source OWN						
		Distracted By Action							
		UNKNOWN							

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		Non Motorist	king Unit#	Location							
		Prior Action									
FIND	INDIVIDUAL	Action									
		Action Other	Action Other To/From School								
	L	Drug & Alcohol NO	pected Alcohol U	Jse	Suspected Drug Use NO						
		Alcohol Test Given TEST NOT GIVEN			)		Alcohol Test	Results			
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Result	S				
2	001	Drug Type									
		Individual Condition	Individual Condition								
		NOT OBSERVED									
	Unit	t Summary $\blacksquare$									
		Status		V	ehicle Operating As Class	ification	Unit Type				
	LEGALLY PARKED				CLASS		AUTOMOBILE				
05		cle Type		•			Operating As Endorsements				
•	(SPORT) UTILITY VEHICLE				1		T				
	Total Occs Train/Bus # Recorded  O		0	otal # Citations Issued	Total Tra		Total HazMat Types  0				
<u>⊨</u>	Insurance? Direction Of Travel  YES NOT ON ROADWAY		ADWAY	Pre CrashTire Mark	Speed Li						
LIND	Most Harmful Event: Collision With  MOTOR VEH IN TRANSPORT				Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE				
	Traffic Way PARKING LOT OR PRIVATE PROPERTY				raffic Control IO CONTROL		Traffic Control Inoperative/Missing  NO				
		Surface Type			load Curvature		Road Grade				
		,			UNKNOWN LEVEL						
Truck Bus or HazMat  NO											
	'	Vehicle									
	02	License Plate Number			Plate Type St Country of Issuance AUT WI UNITED STATES						
		919WGU Vehicle Identification Number			AU I Make	WI Year	UNITED STATES  Model				
05		KNDRHDLG8R5258315			KIA	2024	SORENTO				
		Color SIL - SILVER (ALUMINUM)			Body Style Bus Use						
	ш	Initial Contact Point	iOWI)		UT - SPORT UTILITY VEHICLE  Vehicle Damage						
⊨	CLE	11 - LEFT FRONT CORNER			•	ORNER. 02 - RIG	GHT SIDE	7 8 9 10 11			
LIND	VEHICLE	Extent Of Damage FUNCTIONAL DAMAGE			01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT						
		Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR							

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i		What Driver Wee Dains	Vehicle Factors					
		5	Venicle Factors					
		LEGALLY PARKED						
			NOT APPLICABLE					
		Driver Prior Action Other	NOT AFFLICABLE					
		Driver Actions						
		NO CONTRIBUTING ACTION						
	VEHICLE	NO CONTRIBUTING ACTION						
UNIT	7							
Z	$\cong$							
	王							
	2							
		Owner Name	Owner Address					
		AMBER GREENDEER	735 CRESTVIEW DR					
02	02		REEDSBURG, WI 53959 , US					
0	0		KEEDODOKO, W 00000 , OO					
		Sequence Of Events						
	_	Event						
	Ò	To MOTOR VEH IN TRANSPORT						
	~	Event						
	02							
	က	Event						
	03							
	4	Event						
	04							
⊢ Policy Holder								
UNIT		Insurance Company	INDIVIDUAL					
		PROGRESSIVE-UNIVERSAL-INSURANCE-COMP	AMBER GREENDEER					
		I NOOKEOONE-ONIVEROAL-INSURANCE-COMP	AWDER GREENDEER					