WISCONSIN MOTOR VEHICLE CRASH REPORT

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

9	Government Property	Active S Crash Type	Active School Zone		Bus Related	Tags		Secondary	
<u>გ</u>	On Emergency	Hit and Run	and Run		Work Zone	Trailer or	Γowed	Reporting Threshold	
426	Date Notified 02/13/2018	Time Notified 03:33 PM			nits	Total Injured 00	•		
K3	Crash Date 02/12/2018	Crash Time 03:46 PM			rived 2018	Time Arrived 03:42 PM			
	Document Number Override	Primary Crash			Crash Number 65	Investigating Officer/Deputy DEPUTY A. KULAS			

Description



Reconstruction By	
Photos By	
Additional Information NONE	

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

UNIT 1 WAS NORTHBOUND ON CTH BD AND WAS STOPPED FOR A RED LIGHT. UNIT 2 WAS NORTH BOUND AND DID NOT SEE UNIT 1 STOPPED UNTIL THE LAST MINUTE. THE OPERATOR OF UNIT 2 SWERVED TO THE LEFT AND STRUCK THE REAR DRIVER SIDE AREA OF UNIT 1. BOTH VEHICLES SUSTAINED MINOR DAMAGE. THE OPERATOR OF UNIT 2 ADVISED THE BRAKES WERE NOT WORKING SO WELL. THE OWNER OF UNIT 2 RESPONDED AND REMOVED THE VEHICLE AND THE BRAKES APPEARED TO BE WORKING.

Location

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Crash Time 03:46 PM

8	ON CTHBD NB 84 FT S		Latitude 43.5322	33529		Longitude -89.777868624		
ll ll	OF N REEDSBURG RD N THE TOWN OF DELTON N SAUK COUNTY			X Coordii 275539.			Y Coordi 482367	
"	N OAGR GOOM I			Structure Type NO STRUCTURE				
С	crash Scene			•				
F	First Harmful Event			First Harr	nful Event L	ocation		
	MOTOR VEH IN TRANSPORT			ON RO				
	Manner of Collision D5SIDESWIPE/SAME DIRECTIO	N.		Light Cor				
	Road Surface Condition(s)			Factor(s)				
	DRY		, todaway	. 40.0.(0)				
	Environment Factor(s)			NONE				
	NONE			NONE				
٧	Weather Condition(s)							
C	CLEAR							
Α	Animal Type			Relation	Relation To Trafficway			
					TRAFFICWAY - ON ROAD			
	Crash Classification - Location PUBLIC PROPERTY				Crash Classification - Jurisdiction			
	Tribal Land				NO SPECIAL JURISDIC Access Control		Special Stud	
				NO CO	NTROL			
	· ·	n Location		ction Type				
		SECTION-RELATED	FOUR	-WAY INTE	RSECTIO	N		
	Init Summary		Vahiala On austin a As	0 !6 4 -		I to the		
L	Unit Status		Vehicle Operating As	Classification	n	Unit Type	BILE	
ll			Vehicle Operating As D CLASS	Classificatio	n	Unit Type AUTOMO Operating A		nents
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		NOT TOWED			NER					
		What Driver Was Doing SLOW/STOPPING		Vehicle Factors						
		Driver Prior Action Other			NOT APPLICABLE					
		Driver Actions		1						
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		Driver Distractions								
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_	1									
2	01									
		Owner Name		1	Owner Address					
		THOMAS W PAW	LACYK		N909 SPRING LAKE ESTATES DR					
		(902) 570-3444			NESHKORO, WI 54960 , US					
	9	Sequence Of E	vents							
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		Event								
	02	Evolit								
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LNO		Insurance Company		In	ndividual					
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		Individual								
		Driver		С	itations Issued	Sex				
	Г	THOMAS W PAW	LACYK			MALE				
	UA	(902) 570-3444		D	ate of Birth	Race				
LND	INDIVIDUA					WHITE				
5		Address N909 SPRING LAKE ESTATES DR		Driver License Number						
	Z	NESHKORO, WI 54960 , US			STATE: WISCONSIN COUNTRY: UNITED STATES					
			On Duty Crash	S	afety Equipment					
		Equipment								
		Seat Position		s	HOULDER & LAP BELT					
			LEFT SIDE (DRIVER/MOTORCY							
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		Medical Transport			EMS Agency Identi	ifier	EMS Run #	ŧ			
		NOT TRANSPORT	TED								
		Hospital			Date of Death		Time of De	Time of Death			
		Non Motorist	Striking Unit #	Prior Action	1	Location		To/From S	School		
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		Action Other									
			Suspected Alcohol U	Ise	Suspected Drug Us	Se Se					
	E	Orug & Alcohol	NO	300	NO						
		Alcohol Test Given			Alcohol Test Type		Alcohol Tes	st Results			
		TEST NOT GIVEN									
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test I	Results			
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		1 5 1 10 5									
		Individual Condition									
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		t Summary		Ιv	ehicle Operating As (Classification	Linit Type				
	Unit	t Summary Status RANSIT			ehicle Operating As 0	Classification	Unit Type AUTOMO	BILE			
	Unit IN T	Status				Classification	AUTOMO	PBILE As Endorsements			
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	Unit IN T Vehi (SP) Tota	Status RANSIT cle Type	ICLE Train/Bus # Inj	jured T	otal # Citations Issue	d Total	AUTOMO				
	Unit IN T Vehi (SP) Tota 1	Status FRANSIT cle Type ORT) UTILITY VEHI	Train/Bus # Inj	jured T	otal # Citations Issue	d Total	AUTOMO Operating	As Endorsements Total HazMat Types			
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02 UNIT 02	Unit IN T Vehi (SPC Tota 1 Insury YES MOO Traff TWG Surfa BLA Truc NO	Status RANSIT cle Type ORT) UTILITY VEHI I Occs rance? St Harmful Event: Collision TOR VEH IN TRANS ic Way D-WAY, NOT DIVIDION ace Type ACKTOP (BITUMING k Bus or HazMat Vehicle License Plate Numbe ABD5579 Vehicle Identification I 1FMZU24E4XUB4 Color BLK - BLACK Initial Contact Point	Train/Bus # Inj Direction Of Tr NORTHBOU On With SPORT ED DUS)	jured T 1 ravel JND S N T T T I	Pre CrashTire Mark pecial Function IO SPECIAL FUNC raffic Control RAFFIC SIGNAL oad Curvature TRAIGHT Plate Type AUT - AUTOMOBI Make FORD Body Style	d Total 0 e Speed 55 CTION St WI Year 1999	AUTOMO Operating A Trailers I Limit Emergency NOT APP Traffic Con NO Road Grad LEVEL Country of Is UNITED S Model EXPLORE Bus Use	Total HazMat Types Total Lanes 3 Motor Vehicle Use PLICABLE trol Inoperative/Missing e SSUANCE TATES			
02 UNIT 02	Unit IN T Vehi (SPC Tota 1 Insury YES MOO Traff TWG Surfa BLA Truc NO	Status RANSIT Cle Type ORT) UTILITY VEHI I Occs rance? St Harmful Event: Collision TOR VEH IN TRANS IC Way D-WAY, NOT DIVIDION CACKTOP (BITUMING IK Bus or HazMat Vehicle License Plate Number ABD5579 Vehicle Identification In 1FMZU24E4XUB4 Color BLK - BLACK Initial Contact Point UNKNOWN	Train/Bus # Inj Direction Of Tr NORTHBOU On With SPORT ED DUS)	jured T 1 ravel JND S N T T T I	Pre CrashTire Mark pecial Function IO SPECIAL FUNC raffic Control RAFFIC SIGNAL oad Curvature TRAIGHT Plate Type AUT - AUTOMOBI Make FORD Body Style JT - SPORT UTILI Vehicle Damage	d Total 0 e Speed 55 CTION St WI Year 1999	AUTOMO Operating A Trailers I Limit Emergency NOT APP Traffic Con NO Road Grad LEVEL Country of Is UNITED S Model EXPLORE Bus Use	Total HazMat Types Total Lanes 3 Motor Vehicle Use PLICABLE trol Inoperative/Missing e SSUANCE TATES			
UNIT 02	Unit IN T Vehi (SP) Tota 1 Insur YES MOO Traff TWO Surface BLA Truc NO	Status RANSIT cle Type ORT) UTILITY VEHI I Occs rance? St Harmful Event: Collision TOR VEH IN TRANS ic Way D-WAY, NOT DIVIDION ace Type ACKTOP (BITUMING k Bus or HazMat Vehicle License Plate Numbe ABD5579 Vehicle Identification I 1FMZU24E4XUB4 Color BLK - BLACK Initial Contact Point	Train/Bus # Inj Direction Of Tr NORTHBOU On With SPORT ED DUS)	jured T 1 ravel JND S N T T T I	Pre CrashTire Mark pecial Function IO SPECIAL FUNC raffic Control RAFFIC SIGNAL oad Curvature TRAIGHT Plate Type AUT - AUTOMOBI Make FORD Body Style JT - SPORT UTILI	d Total 0 e Speed 55 CTION St WI Year 1999	AUTOMO Operating A Trailers I Limit Emergency NOT APP Traffic Con NO Road Grad LEVEL Country of Is UNITED S Model EXPLORE Bus Use	Total HazMat Types Total Lanes 3 Motor Vehicle Use PLICABLE trol Inoperative/Missing e SSUANCE TATES			

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Towed Due To Dama	age	Vehicle Removed By				
		NOT TOWED		OPERATOR				
		What Driver Was Doi	•	Vehicle Factors				
		GOING STRAIGH		BRAKES				
		Driver Prior Action Of	ther	BRAKES				
		Driver Actions						
	ш							
⊨	占							
UNIT	VEHICLE							
	7							
		Driver Distractions DISTRACTION/IN	ATTENTION					
02	02							
		Owner Name MODERN FOOD (CPOUR	Owner Address 1425 WISCONSIN DELLS PKY #10	n			
		(608) 254-0788	SKOOF	WISCONSIN DELLS FKT #10				
		,						
	9	∟ Sequence Of E	vents					
		Event						
	2	MOTOR VEH IN T	RANSPORT					
	02	Event						
	0	Frank						
	03	Event						
		Event						
	04							
-	1	Policy Holder						
UNIT		Insurance Company		Organization/Company				
ر		GEICO-CASUALT	TY-CO	MODERN FOOD GROUP				
	ı	Individual						
		Driver		Citations Issued	Sex			
	7	ANGUO LI (917) 536-5103		1	MALE			
_	INDIVIDUA	(317) 330-3103		Date of Birth	Race ASIAN			
LNO	\exists	Address		Driver License Number	1			
5		Address 7234 YELLOWSTONE 1						
	Z	FOREST HILLS, N	NY 11375 , US	STATE: NEW YORK COUNTRY: UNITED STATES				
		Equipment	On Duty Crash	Safety Equipment				
		Equipment						
		Seat Position		SHOULDER & LAP BELT				
			LEFT SIDE (DRIVER/MOTORCY	Helmat Canadiana				
		Helmet Use		Helmet Compliance				
		Eye Protection		Tint Compliance				
		-						
02	005	Injury	Injury Severity	Airbag				
0	Ō	Injury	NO APPARENT INJURY	NON DEPLOYED	T. 15			
		Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABL	Trapped/Extricated NOT TRAPPED			
		INOI LUCUIED		MOI LULUILUMUI AFFLICADL	HOLINALIED			

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 02/12/2018

Crash Time 03:46 PM

		Medical Transport			EMS Agency Identifier		EMS Run #				
		NOT TRANSPORTED									
		Hospital			Date of Dea	th	Time of Death	Time of Death			
						T					
		Non Motorist	Striking Unit #	Prior Action		Location		To/From School			
		Action	•								
	_										
_	INDIVIDUAL										
UNIT	9										
n	\leq										
	Z										
		Action Other									
	L	Orug & Alcohol	Suspected Alco NO	hol Use	Suspected I	Orug Use					
		Alcohol Test Given			Alcohol Tes	t Type	Alcohol Test Results				
		TEST NOT GIVEN									
		Drug Test Given TEST NOT GIVEN	I		Drug Test T	ype	Drug Test Results				
02	005	Drug Type			•						
	0										
		Individual Condition									
		APPEARED NOR	MAL								
	,	L Violations									
		UTC Number	Issue To?	Statute Number	Seq Num	Description	210				
	5	AE142280	001	346.89(1)	001	INATTENTIVE DRIVIN	NG				