



6TL09XQXXD  
18-01579

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

Crash Scene

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>		First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>05--SIDESWIPE/SAME DIRECTION</b>		Light Condition <b>DARK/LIGHTED</b>	
Road Surface Condition(s) <b>DRY</b>		Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>			
Weather Condition(s) <b>CLEAR</b>			
Animal Type		Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>		Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land		Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>	

Unit Summary

UNIT 01	Unit Status <b>HIT AND RUN</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>	
	Vehicle Type <b>PASSENGER CAR</b>				Operating As Endorsements	
	Total Occs <b>1</b>	Train/Bus # Injured	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>UNKNOWN</b>	Direction Of Travel <b>UNKNOWN</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit	Total Lanes <b>4</b>	
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>		Special Function <b>UNKNOWN</b>		Emergency Motor Vehicle Use <b>UNKNOWN</b>	
	Traffic Way <b>UNKNOWN</b>		Traffic Control <b>UNKNOWN</b>		Traffic Control Inoperative/Missing <b>UNKNOWN</b>	
	Surface Type <b>UNKNOWN</b>		Road Curvature <b>UNKNOWN</b>		Road Grade <b>UNKNOWN</b>	
	Truck Bus or HazMat <b>NO</b>					

UNIT 01 VEHICLE 01	<b>Vehicle</b>					
	License Plate Number		Plate Type	St	Country of Issuance	
	Vehicle Identification Number		Make	Year	Model	
	Color		Body Style		Bus Use <b>NOT A BUS</b>	
	Initial Contact Point <b>UNKNOWN</b>		Vehicle Damage <b>UNKNOWN</b>			
	Extent Of Damage <b>UNKNOWN</b>					
	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>			
	What Driver Was Doing <b>UNKNOWN</b>		Vehicle Factors <b>UNKNOWN</b>			
	Driver Prior Action Other					

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UNIT 01	VEHICLE 01	Driver Actions <b>UNKNOWN</b>				
		Driver Distractions <b>UNKNOWN IF DISTRACTED</b>				
		Owner Name		Owner Address , ,		
<b>Sequence Of Events</b>						
UNIT 01	INDIVIDUAL 001	01	Event <b>MOTOR VEH IN TRANSPORT</b>			
		02	Event			
		03	Event			
		04	Event			
<b>Individual</b>						
UNIT 01	INDIVIDUAL 001	Unknown		Citations Issued <b>0</b>	Sex	
				Date of Birth	Race	
		Address , ,		Driver License Number		
		<b>Equipment</b>	On Duty Crash	Safety Equipment		
		Seat Position <b>UNKNOWN</b>		<b>RESTRAINT USE UNKNOWN</b>		
		Helmet Use		Helmet Compliance		
		Eye Protection		Tint Compliance		
		<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NOT APPLICABLE</b>		
		Ejected <b>NOT APPLICABLE</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABL</b>	Trapped/Extricated <b>NOT APPLICABLE</b>	
		Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #	
		Hospital		Date of Death	Time of Death	
		<b>Non Motorist</b>	Striking Unit #	Prior Action	Location	To/From School

WISCONSIN MOTOR VEHICLE  
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UNIT	INDIVIDUAL	Action			
		Action Other			
	01	001	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use
			Suspected Drug Use		
			Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results
			Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results
			Drug Type		
Individual Condition <b>NOT OBSERVED</b>					

**Unit Summary**

UNIT	02	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>	
		Vehicle Type <b>PASSENGER CAR</b>				Operating As Endorsements	
		Total Occs <b>1</b>	Train/Bus # Injured	Total # Citations Issued	Total Trailers <b>0</b>	Total HazMat Types	
		Insurance? <b>YES</b>	Direction Of Travel <b>WESTBOUND</b>	<input type="checkbox"/> <b>Pre Crash Tire Mark</b>	Speed Limit <b>25</b>	Total Lanes <b>4</b>	
		Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
		Traffic Way <b>DIVIDED HWY W/O TRAFFIC BARRIER</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
		Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
		Truck Bus or HazMat <b>NO</b>					

UNIT	VEHICLE	<b>Vehicle</b>			
		License Plate Number <b>364BRX</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>1G2ZG58B774223083</b>	Make <b>PONTIAC</b>	Year <b>2007</b>	Model <b>G6/SE</b>
		Color <b>GRY - GRAY</b>	Body Style <b>4D - 4DR</b>		Bus Use <b>NOT A BUS</b>
		Initial Contact Point <b>2--RIGHT SIDE FRONT</b>	Vehicle Damage		
		Extent Of Damage <b>MINOR DAMAGE</b>	<b>2--RIGHT SIDE FRONT</b>		
		Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By		
		What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors		
		Driver Prior Action Other	<b>NOT APPLICABLE</b>		

WISCONSIN MOTOR VEHICLE CRASH REPORT

UNIT VEHICLE	Driver Actions <b>NO CONTRIBUTING ACTION</b>				
	Driver Distractions <b>NOT DISTRACTED</b>				
	Owner Name <b>GARRETT DENNIS KIPPLEY (608) 370-2715</b>		Owner Address <b>N828 CLUB CIRCLE DR PRAIRIE DU SAC, WI 53578 , US</b>		
UNIT 02	<b>Sequence Of Events</b>				
	01	Event <b>MOTOR VEH IN TRANSPORT</b>			
	02	Event			
	03	Event			
UNIT 04	04	Event			
UNIT	<b>Policy Holder</b>				
	Insurance Company <b>PROGRESSIVE-UNIVERSAL-INSURANCE-COMP</b>		Individual <b>GARRETT KIPPLEY</b>		
UNIT INDIVIDUAL	<b>Individual</b>				
	Driver <b>GARRETT DENNIS KIPPLEY (608) 370-2715</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>	
			Date of Birth [REDACTED]	Race <b>WHITE</b>	
	Address <b>N828 CLUB CIRCLE DR PRAIRIE DU SAC, WI 53578 , US</b>		Driver License Number [REDACTED] <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
	<b>Equipment</b>	On Duty Crash	Safety Equipment		
	Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>		<b>SHOULDER &amp; LAP BELT</b>		
	Helmet Use		Helmet Compliance		
	Eye Protection		Tint Compliance		
	UNIT 002	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>	
		Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABL</b>	Trapped/Extricated <b>NOT TRAPPED</b>
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #		
Hospital		Date of Death	Time of Death		
<b>Non Motorist</b>		Striking Unit #	Prior Action	Location	To/From School

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<b>UNIT</b>	<b>INDIVIDUAL</b>	Action		
		Action Other		
<b>02</b>	<b>002</b>	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
		Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results
		Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results
		Drug Type		
		Individual Condition <b>APPEARED NORMAL</b>		