18-06330

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Overrid	е	Primary Crash I	Document #	Agency C 18-0633	Crash Number 0		nvestigating Officer/Deputy DEPUTY W. VERTEIN		
2	Crash Date 06/16/2018		Crash Time 04:12 PM		Date Arriv 06/16/20		Time Arrived 04:15 PM			
2	Date Notified		Time Notified		Total Units 03		Total Injured	Total Kill	ed	
ز	06/16/2018		04:15 PM				00	00	Reporting	
Ş	On Emergency	✓ Hit	and Run			Work Zone		or Towed	Threshold	
OILUDUJD	Government Property		Active School Zone School Bus Related NO				Tags			
	✓ Reportable		Crash Type DT4000 (STA	NDARD CRASH	H)		Amend	ed	Secondary Crash	
	Description								_	
	Diagram lake virginia road		sth 23/33		Not	o scale		Reconstruction Photos By W. VERTEIN Additional Info PHOTOS, V	N #9122	
	IN FRONT OF UNIT 3 THA	TE, TIMI AT WAS WITNE RIGHT. REAR EI	E, AND LOCATIC STOPPED IN TH SSES AND THE WHEN THE OPE ND WHICH CAUS	N, UNITS 2 AND 3 IE LANE OF TRAF OPERATOR OF U ERATOR OF THE F SED UNIT 2 TO ST	3 WERE SL FIC WAITII INIT 2 STA PICKUP PU FRIKE UNIT	OWING DOWN IN TH NG TO MAKE A LEFT TED A PICKUP TRUC ILLING A BOAT (UNIT	E LANE OF TRAI TURN ON LAKE K PULLING A BO 1) MERGED BAO	VIRGINIA ROA AT WENT ARO CK INTO THE I	OUND ANOTHER VEHICLE LANE OF TRAFFIC, IT	

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	cation								
-	STH23 WB				Latitude			Longitud	
	FT E NORTHWOODS DR				43.53295	56954		-89.921	670276
	THE TOWN OF EXCELS	SIOR			X Coordina			Y Coord	
	SAUK COUNTY				263922.6			482414	19
					Structure 7	Гуре			
Cra	ish Scene								
First	t Harmful Event				First Harm	ful Event L	ocation		
MO	TOR VEH IN TRANSPO	ORT		ON ROADWAY					
Man	ner of Collision				Light Cond	dition			
02	-FRONT TO REAR				DAYLIGI	HT			
Road	d Surface Condition(s)				Roadway	Factor(s)			
DR	Y								
Envi	ironment Factor(s)								
NO	NE				NONE				
Weather Condition(s)									
CLEAR Animal Type Crash Classification - Location PUBLIC PROPERTY									
					Relation T	o Trafficwa	ау		
							N ROAD		
					Crash Classification - Jurisdiction NO SPECIAL JURISDICTION				
Tribal Land				Access Control Special Study NO CONTROL				Special Study	
With	nin Interchange Area	Junction Location		Intersectio		INCOL			
NO	-	NON-JUNCTION			INTERSE	CTION			
	t Summary								
	Status		Vehicle Ope	lassification Unit Type TRUCK					
	AND RUN		D CLASS	D CLASS				rating As Endorsements	
HIT AND RUN D C Vehicle Type UTILITY TRUCK/PICKUP TRUCK							Operating A	s Endorsei	ments
							1 0		
UTI	LITY TRUCK/PICKUP		Total # Cita	tions Issued	1	Total Trai		Total Haz	Mat Types
UTI		TRUCK Train/Bus # Injured	Total # Cita 2	tions Issued	I	Total Tra		Total Haz 0	Mat Types
UTI Tota 1	LITY TRUCK/PICKUP		2	tions Issued			ilers		
UTI Tota 1	LITY TRUCK/PICKUP	Train/Bus # Injured	2 Pre	CrashTire Mark		1	ilers	0	
UTII Tota 1 Insur YES	LITY TRUCK/PICKUP	Train/Bus # Injured Direction Of Travel WESTBOUND With	2 Pre Special Fun	CrashTire Mark		1 Speed Lii	ilers mit Emergency	0 Total Lan 2 Motor Veh	es icle Use
UTII Tota 1 Insur YES Most	LITY TRUCK/PICKUP al Occs irrance? S it Harmful Event: Collision V TOR VEH IN TRANSPO	Train/Bus # Injured Direction Of Travel WESTBOUND With	2 Pre Special Fun NO SPEC	CrashTire Mark Intion IAL FUNC		1 Speed Lii	ilers mit Emergency NOT APP	0 Total Lan 2 Motor Veh LICABLE	es icle Use
UTII Tota 1 Insur YES Most Traff	LITY TRUCK/PICKUP	Train/Bus # Injured Direction Of Travel WESTBOUND With DRT	2 Pre Special Fun NO SPEC Traffic Cont	CrashTire Mark Iction IAL FUNC		1 Speed Lii	ilers mit NOT APP Traffic Cont	0 Total Lan 2 Motor Veh LICABLE	es icle Use
UTII Tota 1 Insui YES Most MO Traff	LITY TRUCK/PICKUP al Occs irrance? S it Harmful Event: Collision V TOR VEH IN TRANSPO fic Way O-WAY, NOT DIVIDED	Train/Bus # Injured Direction Of Travel WESTBOUND With DRT	2 Pre Special Fun NO SPEC Traffic Cont NO CONT	CrashTire Mark ICtion IAL FUNC		1 Speed Lii	ilers mit Emergency NOT APP	0 Total Lan 2 Motor Veh LICABLE rol Inopera	es icle Use
UTII Tota 1 Insur YES Most MO Traff TWO Surfa	LITY TRUCK/PICKUP	Train/Bus # Injured Direction Of Travel WESTBOUND With DRT	2 Pre Special Fun NO SPEC Traffic Cont	CrashTire Mark Iction IAL FUNC rol ROL iture		1 Speed Lii	ilers mit NOT APPI Traffic Cont NO	0 Total Lan 2 Motor Veh LICABLE rol Inopera	es icle Use
UTII Tota 1 Insur YES Most Traff Two Surfa BLA Truc	LITY TRUCK/PICKUP al Occs irrance? S at Harmful Event: Collision V TOR VEH IN TRANSPO fic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS ck Bus or HazMat	Train/Bus # Injured Direction Of Travel WESTBOUND With DRT	2 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva	CrashTire Mark Iction IAL FUNC rol ROL iture		1 Speed Lii	ilers mit NOT APPI Traffic Cont NO Road Grade	0 Total Lan 2 Motor Veh LICABLE rol Inopera	es icle Use
UTII Tota 1 Insur YES MOS Traff TWG Surfa BLA Truc NO	LITY TRUCK/PICKUP al Occs irrance? S at Harmful Event: Collision V TOR VEH IN TRANSPO fic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS ck Bus or HazMat	Train/Bus # Injured Direction Of Travel WESTBOUND With DRT	2 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva	CrashTire Mark Iction IAL FUNC rol ROL iture		1 Speed Lii	ilers mit NOT APPI Traffic Cont NO Road Grade	0 Total Lan 2 Motor Veh LICABLE rol Inopera	es icle Use
UTII Tota 1 Insur YES MOS Traff TWO Surfa BLA Truc NO	LITY TRUCK/PICKUP al Occs irrance? S it Harmful Event: Collision V TOR VEH IN TRANSPO fic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS ck Bus or HazMat	Train/Bus # Injured Direction Of Travel WESTBOUND With DRT	2 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva	CrashTire Mark Iction IAL FUNC rol ROL ature T		1 Speed Lii	ilers mit NOT APPI Traffic Cont NO Road Grade	0 Total Lan 2 Motor Veh LICABLE rol Inopera	es icle Use
UTII Tota 1 Insur YES MOS Traff TWO Surfa BLA Truc NO	LITY TRUCK/PICKUP al Occs st Harmful Event: Collision V TOR VEH IN TRANSPO fic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS sk Bus or HazMat Vehicle	Train/Bus # Injured Direction Of Travel WESTBOUND With DRT	2 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type	CrashTire Mark Iction IAL FUNC rol ROL ature T	TION	1 Speed Lin 55	ilers mit NOT APPI Traffic Cont NO Road Grade LEVEL	0 Total Lan 2 Motor Veh LICABLE rol Inopera	es icle Use
UTII Tota 1 Insuu YES MOS Traff TWO Surft BLA Truc NO	LITY TRUCK/PICKUP al Occs irrance? S it Harmful Event: Collision V TOR VEH IN TRANSPO fic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS isk Bus or HazMat Vehicle Plate Number NG1693 Vehicle Identification Num	Train/Bus # Injured Direction Of Travel WESTBOUND Nith DRT S)	2 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type LTK - LIG Make	CrashTire Mark IAL FUNC rol ROL iture T	TION	1 Speed Lin 55 St WI Year	ilers mit NOT APPI Traffic Cont NO Road Grade LEVEL	0 Total Lan 2 Motor Veh LICABLE rol Inopera	es icle Use
UTII Tota 1 Insur YES MOS Traff TWO Surfa BLA Truc NO	LITY TRUCK/PICKUP al Occs irance? S it Harmful Event: Collision V TOR VEH IN TRANSPO fic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS ck Bus or HazMat Vehicle License Plate Number NG1693 Vehicle Identification Num 1GCRKSE72DZ24618	Train/Bus # Injured Direction Of Travel WESTBOUND Nith DRT S)	2 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type LTK - LIC Make CHEVRO	CrashTire Mark IGL FUNC rol ROL Iture T	TION	1 Speed Lin 55 St WI	ilers mit Emergency NOT APPI Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST Model SILVERAD	0 Total Lan 2 Motor Veh LICABLE rol Inopera	es icle Use
UTII Tota 1 Insui YES MOS Traff TWO Surft BLA Truc NO	LITY TRUCK/PICKUP al Occs irance? S it Harmful Event: Collision V TOR VEH IN TRANSPO fic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS ck Bus or HazMat Vehicle License Plate Number NG1693 Vehicle Identification Num 1GCRKSE72DZ24618 Color	Train/Bus # Injured Direction Of Travel WESTBOUND Nith DRT S)	2 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type LTK - LIC Make CHEVRO Body Style	CrashTire Mark IAL FUNC rol ROL iture T	TION	1 Speed Lin 55 St WI Year	ilers mit NOT APPI Traffic Cont NO Road Grade LEVEL	0 Total Lan 2 Motor Veh LICABLE rol Inopera	es icle Use
UTII Tota 1 Insu YES Most MO Traff TWO Surfa BLA Truc NO	LITY TRUCK/PICKUP al Occs irance? S it Harmful Event: Collision V TOR VEH IN TRANSPO fic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS is Bus or HazMat Vehicle License Plate Number NG1693 Vehicle Identification Num 1GCRKSE72DZ24618 Color BLK - BLACK	Train/Bus # Injured Direction Of Travel WESTBOUND Nith DRT S)	2 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type LTK - LIG Make CHEVRO Body Style PK - PICI	CrashTire Mark IAL FUNC rol ROL iture T	TION	1 Speed Lin 55 St WI Year	ilers mit NOT APPI Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST Model SILVERAD Bus Use	0 Total Lan 2 Motor Veh LICABLE rol Inopera	es icle Use
UTII Tota 1 Insui YES MOS Traff TWO Surfa BLA Truc NO	LITY TRUCK/PICKUP al Occs irance? S it Harmful Event: Collision V TOR VEH IN TRANSPO fic Way O-WAY, NOT DIVIDED face Type ACKTOP (BITUMINOUS ck Bus or HazMat Vehicle License Plate Number NG1693 Vehicle Identification Num 1GCRKSE72DZ24618 Color	Train/Bus # Injured Direction Of Travel WESTBOUND Nith DRT S)	2 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva STRAIGH Plate Type LTK - LIC Make CHEVRO Body Style PK - PICI Vehicle Da	CrashTire Mark ICtion IAL FUNC rol ROL IT T SHT TRUC OLET KUP Image	:TION	1 Speed Lii 55 St WI Year 2013	ilers mit NOT APPI Traffic Cont NO Road Grade LEVEL Country of Is UNITED ST Model SILVERAD Bus Use	0 Total Lan 2 Motor Veh LICABLE rol Inopera suance TATES O S	es icle Use tive/Missing



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		Towed Due To Damage		hicle Remo			
		What Driver Was Doing UNKNOWN	ve	hicle Facto	ors		
		Driver Prior Action Other	NC	T APPL	ICABLE		
		Driver Actions					
.	Ц	FAILURE TO CONTROL, IMPROPER OVERTAKI	ING / F	PASSING	FRIGHT		
UNIT	VEHICLE						
С	Ψ						
	~						
		Driver Distractions UNKNOWN IF DISTRACTED					
		UNKNOWN IF DISTRACTED					
5	01						
		Owner Name MITCHELL ORLOWSKI		Owner A 523 1/2	ddress TREMONT ST		
		(608) 548-7418			ON, WI 53948 , US	6	
	ļ	Sequence Of Events					
	01	Event MOTOR VEH IN TRANSPORT					
	0						
	02	Event					
	3	Event					
	03						
	04	Event					
		Policy Holder					
UNIT		Insurance Company	- 1	Individual			
5		AMERICAN-FAMILY-INS-CO			L ORLOWSKI		
	-	Trailer/Towed					
2	1	Trailer Plate # Plate Type Make			State	Count	ry of Issuance
нÌ	у Н	Unit Type Individual RECREATIONAL WILLIAM E BELL				Addre: 5356	ss A ST.
UNIT	TOWED	Vehicle Identification Number					NA, WI 54541 , US
	1 TO	MNX75991J304					
ĺ		ndividual					
	1	Driver		Citations Is	ssued		Sex
	Ľ	MITCHELL ORLOWSKI (608) 548-7418		2			MALE
	٩U	(000) 340-1410	1	Date of Bir	th		Race WHITE
UNIT	INDIVIDUAL	Address		Driver Lice	nse Number		
5	IDI	Address 523 1/2 TREMONT ST					
	4	MAUSTON, WI 53948 , US			WISCONSIN COUN	TRY: UN	ITED STATES
		On Duty Crash	1	Safety Equ	lipment		
		Seat Position	— I I	RESTRA	INT USE UNKNOW	'n	
		1FRONT SEAT-LEFT SIDE (DRIVER/MOTORC)					

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		Helmet Use			Helmet Compliance						
		Eye Protection			Tint Compli	ance					
2	001	In the second	Injury Severity NO APPARE	NT INJURY	Airbag NOT APPLICABLE						
		Ejected NOT APPLICABLE			Ejection Pa	Ejection Path NOT EJECTED/NOT APPLICABL			Trapped/Extricated NOT APPLICABLE		
		Medical Transport NOT TRANSPORT	ED		EMS Agency Identifier			EMS Run #			
		Hospital			Date of Dea	ath		Time of Dea	th		
	I	Non Motorist Striking Unit #		Prior Action		Location	Location		To/From School		
		Action									
_	UAL										
UNIT	INDIVIDUAL										
	IND										
		Action Other									
			Suspected Alco	halllaa	Suspected						
	Ľ	Drug & Alcohol	Suspected Alco	noi use		J					
		Alcohol Test Given TEST NOT GIVEN			Alcohol Tes			Alcohol Test			
		Drug Test Given TEST NOT GIVEN			Drug Test T	уре		Drug Test R	esults		
2	001	Drug Type									
		Individual Condition									
		NOT OBSERVED									
	1	Violations									
	01	UTC Number AE138256	Issue To? 001	Statute Number 346.63(1)(a)	Seq Num 002	Description OPERATING W	HILE UND	ER THE IN	FLUENCE		
	02	UTC Number AE138257	Issue To? 001	Statute Number 346.67(1)	Seq Num 004	Description HIT AND RUN					
		Summary									
		Status			Vehicle Operati	ing As Classification		Unit Type			
02	Vehi	RANSIT			D CLASS			AUTOMON Operating A	SILE s Endorsements		
0		Occs	Train/Bus	# Injured	Total # Citation	s Issued	Total Traile	ers	Total HazMat Types		
	2 Insur	ance?	Direction	Of Travel	0 Bro Crr	ashTire	0 Speed Lim	iit	0 Total Lanes		
UNIT	YES	i	WESTB		Ma Ma	ark	55		2		
5	MO	Harmful Event: Collisio			Special Function			NOT APPI			
	тwo	ic Way D-WAY, NOT DIVIDE	ED		Traffic Control	DL		Traffic Control Inoperative/Missing NO			
		ace Type ICKTOP (BITUMINC	OUS)		Road Curvature	9		Road Grade LEVEL			

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	Truc NO	k Bus or HazMat						
		Vehicle						
		License Plate Number	Plate Type	St	Country of Issuance			
		706ZHD	AUT - AUTOMOBILE	wi	UNITED STATES			
02	02	Vehicle Identification Number 1HGCM56653A087145	Make HONDA	Year 2003	Model ACCORD EX			
		Color	Body Style		Bus Use			
		RED - RED	4D - 4DR NOT A BUS					
F	Ш	Initial Contact Point 6REAR	Vehicle Damage					
UNIT	ЭН	Extent Of Damage	4RIGHT SIDE REAR, 5-	-RIGHT RE	AR CORNER, 6REAR, 7LEFT REAR			
	VEHICL	DISABLING DAMAGE	CORNER, 8LEFT SIDE	REAR				
		Towed Due To Damage	Vehicle Removed By					
			STEVES AUTO SERVICE					
		What Driver Was Doing SLOW/STOPPING	Vehicle Factors					
		Driver Prior Action Other	NOT APPLICABLE					
	ш	Driver Actions NO CONTRIBUTING ACTION						
F	СГ							
UNIT	VEHICLE							
	2							
		Driver Distractions						
		NOT DISTRACTED						
02	02							
		Owner Name	Owner Address					
		NATALIE BROWN	940 22ND ST					
			REEDSBURG, WI 539	959 , US				
		Sequence Of Events						
	0	MOTOR VEH IN TRANSPORT						
	02	Event						
	03	Event						
		Event						
	04							
E		Policy Holder						
UNIT		Insurance Company AMERICAN-FAMILY-INS-CO	Individual NATALIE BROWN					
		Individual						
1		Driver	Citations Issued		Sex			
	٦L	MEGAN BROWN (608) 408-3357	0		FEMALE			
	IDUAL	, ,	Date of Birth		Race WHITE			
	=							

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NN	Address 940 22ND ST REEDSBURG, WI 53959 , US				Driver License Nun B650556007070 STATE: WISCO		NITED STATES			
	l	Equipment	On Duty Crash		Safety Equipment					
	i				SHOULDER & LAP BELT					
			EFT SIDE (DRIVI	ER/MOTORCY						
		Helmet Use	•		Helmet Compliance	9				
	Eye Protection				Tint Compliance					
02	B Injury Injury Severity NO APPARENT INJURY			INJURY	Airbag NON DEPLOYE	D				
	Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital				Ejection Path		Trapped/Extricated			
					EMS Agency Ident	fier	EMS Run #			
				Date of Death		Time of Death				
			Striking Unit #	Prior Action		Location		To/From School		
		Non Motorist				Location				
UNIT	INDIVIDUAL	Action Other								
		Suspected Alcohol Use			Suspected Drug Us	6e				
	Ľ	Drug & Alcohol	NO		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			
02	002	Drug Type								
		Individual Condition								
		APPEARED NORI	MAL							
	I	Individual								
		Passenger BROOKLYN THO	MPSON		Citations Issued 0		Sex FEMALE			
	AL	(608) 472-1129			Date of Birth		Race			
F	INDIVIDUAL						WHITE			
UNIT		Address	e et		Driver License Nun	nber				
	INC	311 N VINCENNE ADAMS, WI 53910			STATE: WISCO	NSIN COUNTRY: U	NITED STATES			
		Equipment	On Duty Crash							

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					Safety Equipment						
		Seat Position			SHOULDER & I	AP BELT					
		3FRONT SEAT-	RIGHT SIDE (TRA	IN ENGINEER							
		Helmet Use			Helmet Complianc	e					
		Eye Protection			Tint Compliance						
~	ო		Injury Severity		Airbag						
02	003	Injury	NO APPARENT	INJURY	NON DEPLOYE	D					
		Ejected			Ejection Path			ped/Extrication			
		NOT EJECTED			NOT EJECTED			T TRAPP	ED		
		Medical Transport NOT TRANSPOR	TED		EMS Agency Ident	ifier	EMS	8 Run #			
		Hospital			Date of Death		Time	e of Death			
		licopital			But of Bout			of Doutin			
		Non Motorist Striking Unit # Prior Action				Location				To/From School	
		Action									
	۹L										
⊢	INDIVIDUAL										
UNIT	≒										
	ā										
	Z										
		Action Other									
	ſ	Drug & Alcohol	Suspected Alcohol	Use	Suspected Drug U NO	se					
	-				_						
		Alcohol Test Given TEST NOT GIVEN	1	Alcohol Test Type			hol Test Re	esults			
		Drug Test Given		Drug Test Type			g Test Resi	ults			
		TEŠT NOT GIVEN	I	2.09.000.700							
02	003	Drug Type			•						
0	õ										
		Individual Condition									
		APPEARED NOR	MAL								
	llni	t Summary									
		Status			Vehicle Operating As	Classification	Unit	Туре			
	IN T	RANSIT			D CLASS			TOMOBIL	E		
03	Vehi	cle Type					Ope	rating As E	Indorseme	ents	
Ö	(SP	ORT) UTILITY VEH									
		I Occs	Train/Bus # In		Total # Citations Issue	-	otal Trailers		otal HazMa	at Types	
	3	ranaa?	Direction Of T		0	0	beed Limit	0 T(otal Lanes		
	Insu YES	rance?	WESTBOUN		Pre CrashTir Mark	e ^{Sp} 55		2			
UNIT		Harmful Event: Collisi			Special Function		Eme	ergency Mo	otor Vehicle	e Use	
		TOR VEH IN TRAN			NO SPECIAL FUN	CTION	NO	TAPPLIC	CABLE		
	Traff	ic Way		· · · ·	Traffic Control		Traf	fic Control	Inoperativ	e/Missing	
		D-WAY, NOT DIVID	ED		NO CONTROL		NO				
					Road Curvature			d Grade			
	BL/	CKTOP (BITUMIN	005)		STRAIGHT		LE\	/EL			

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	NO	k Bus or HazMat						
		Vehicle						
		License Plate Number	Plate Type	St	Country of Issuance			
		119RNW	AUT - AUTOMOBILE	wi	UNITED STATES			
33	03	Vehicle Identification Number	Make	Year	Model			
0	0	2CNFLCEC6B6404822	CHEVROLET	2011	EQUINOX LS			
		Color GRY - GRAY	Body Style Bus Use NOT A BUS					
_	щ	Initial Contact Point	Vehicle Damage					
UNIT	<u></u>	7LEFT REAR CORNER						
Б	VEHICL	Extent Of Damage MINOR DAMAGE	6REAR, 7LEFT REAR	CORNER				
	>	Towed Due To Damage	Vehicle Removed By					
		NOT TOWED	OPERATOR					
		What Driver Was Doing	Vehicle Factors					
		SLOW/STOPPING						
		Driver Prior Action Other						
		Driver Actions						
	Щ	NO CONTRIBUTING ACTION						
UNIT	VEHICLE							
Σ	Ē							
	>							
		Driver Distractions NOT DISTRACTED						
		NOT DISTRACTED						
03	03							
		Owner Name	Owner Address					
		ANDREW EVANS	1021 WATER AVE					
		(608) 377-0535	HILLSBORO, WI 5463	34 , US				
		Sequence Of Events						
	0	Event MOTOR VEH IN TRANSPORT						
	02	Event						
		Event						
	03	Lvent						
	04	Event						
F		Policy Holder						
UNIT		Insurance Company PARTNERS-MUTUAL-INS-CO	Individual ANDREW EVANS					
		Individual						
		Driver	Citations Issued		Sex			
	Ļ	ANDREW EVANS (608) 377-0535	0		MALE			
	IDUAL		Date of Birth		Race WHITE			
E	₽							

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NN	Address 1021 WATER AVE HILLSBORO, WI 54634 , US Equipment On Duty Crash		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES							
		Equipment	On Duty Crash		Safety Equipment					
]	Seat Position			SHOULDER & LAP BELT					
		1FRONT SEAT-L Helmet Use	LEFT SIDE (DRIV	ER/MOTORCY	Helmet Compliance					
						5				
		Eye Protection			Tint Compliance					
03	004	Injury	Injury Severity NO APPARENT	INJURY	Airbag NON DEPLOYE	D				
		Ejected NOT EJECTED			Ejection Path	NOT APPLICABL	Trapped/Extricated NOT TRAPPED			
		Medical Transport			EMS Agency Ident		EMS Run #			
		NOT TRANSPOR	TED							
		Hospital			Date of Death		Time of Death			
		Non Motorist	Striking Unit #	Prior Action		Location		To/From School		
		Action								
UNIT	INDIVIDUAL	Action Other								
	Ľ	Drug & Alcohol	Suspected Alcohol	Use	Suspected Drug Us					
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type Alcohol Test Results					
		Drug Test Given TEST NOT GIVEN	l		Drug Test Type Drug Test Results					
03	004	Drug Type								
		Individual Condition								
		APPEARED NOR	MAL							
	I	ndividual								
		Passenger BRANDON EVAN	IS		Citations Issued 0		Sex MALE			
	UAL				Date of Birth		Race WHITE			
UNIT	VID	Address			Driver License Nur	aber	WHITE			
Б	INDIVIDUAL	1021 WATER AVE HILLSBORO, WI S								
		Equipment	On Duty Crash							

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					Safety Equipment						
		Seat Position			SHOULDER & I						
			T-LEFT SIDE(MOT	ORCYCLE/BI							
		Helmet Use	`		Helmet Compliance						
		Eye Protection			Tint Compliance						
		Lyer folection			Tint Compliance						
03	005	Injury	Injury Severity		Airbag						
U	0	Ejected	NO APPARENT I	NJURY	NON DEPLOYE	D	Trapped/Extricated				
		NOT EJECTED				NOT APPLICABL	NOT TRAPPED				
		Medical Transport			EMS Agency Ident	ifier	EMS Run #				
		NOT TRANSPOR Hospital	IED		Date of Death		Time of Death				
		liospital			Date of Death		Time of Dealin				
		Non Motorist	Striking Unit #	Prior Action		Location		To/From School			
		Action	4								
	AL										
F	Ŋ										
UNIT	¥										
	INDIVIDUAL										
	Z										
		Action Other									
			Suspected Alcohol L	Jse	Suspected Drug U	se					
	Ľ	Drug & Alcohol	NO		NO						
		Alcohol Test Given TEST NOT GIVEN	J		Alcohol Test Type		Alcohol Test Results				
		Drug Test Given			Drug Test Type		Drug Test Results				
		TEST NOT GIVEN	1								
03	005	Drug Type									
		Individual Condition									
		APPEARED NOR	MAL								
		Individual									
		Passenger			Citations Issued		Sex				
	۲	TALON RILEY			0		MALE				
L	INDIVIDUAL				Date of Birth		Race WHITE				
UNIT	Σ	Address			Driver License Nur	nber					
	Ð	1020 WATER AVE									
	E HILLSBORO, WI 54634 , US										
			On Duty Crash		Safety Equipment						
		Equipment									
		Seat Position			SHOULDER & LAP BELT						
		6SECOND SEAT Helmet Use	I-RIGHT SIDE		Helmet Complianc	٩					
		rieiniet 03e				0					

18-06330

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Eye Protection				Tint Compliance						
03	900	Injury	Injury Severity NO APPARENT I	NJURY	Airbag NON DEPLOYE	D					
		Ejected NOT EJECTED			Ejection Path	NOT APPLICABL	Trapped/Extricated				
		Medical Transport			EMS Agency Ident		EMS Run #				
		NOT TRANSPOR Hospital	TED		Date of Death		Time of Death				
		lioophui									
	Non Motorist Striking Unit # Prior Action					Location		To/From School			
		Action									
	JAL										
UNIT	INDIVIDUAL										
	NDI										
	=										
		Action Other									
			Suspected Alcohol L	Jse	Suspected Drug Use						
	L	Drug & Alcohol Alcohol Test Given	NO		NO Alcohol Test Type		Alcohol Test Results				
		TEST NOT GIVEN	N								
		Drug Test Given TEST NOT GIVEN	N		Drug Test Type	Drug Test Results					
3	900	Drug Type			1						
		Individual Condition									
		APPEARED NOR	MAL								
	Indiv	ness			Address		D	ate of Birth			
5	1000	SSICA BAUER 8) 495-0026			110 N STH 58 PO BOX 12						
WITN ESS					CAZENOVIA, WI	53924,US					
r	Wit	ness									
02	ZAC	vidual CHERY ERNSTME 8) 415-7638	YER		Address 110 N STH 58	E2024 118		ate of Birth			
WITN ESS	(000	6) 415-7050			CAZENOVIA, WI	55924 , 05					
		ness									
03	JEN	vidual			Address S778 DEMASKIE		D	ate of Birth			
WITN (1000	8) 548-7742			LA VALLE, WI 53	941,US					
МŇ											