6TL0BMQKTS

18-09234

Wisconsin Motor Vehicle Crash Report

	ocument Number Override Primary Crash Document #				I rigitio) Glasti Hallion				Investigating Officer/Deputy DEPUTY T. SUTHERLAND				
L	Crash Date		Crash Time		Date /	Arrived	j		Time Arrived				
· I	08/22/2018	8 03:00 PM od Time Notified			08/22	/201	8		03:15 PM				
\$	Date Notified				Total Units			····	Total Injured Total Killed				
2	08/22/2018		03:07 PM		02				00 00	- Inst			
<u>.</u>	On Emergenc	Emergency Hit and Run Lane			Closure Work Z			e	Trailer or Towe	id		Reporting Threshold	
_	Governm Proper		Active	School Zone	NO School	ol Bus	Related		Tags				
ر	∨ Reportable		Crash Type DT4000 (S	TANDARD CR	(ASH)				Amended	L JĆ	֓֟֟֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	Secondary Crash	
ì	ocation	eriality program interiors	Various y transmission	gallikarjennemistanikaria	ব্যক্তিকর্মীনীর	en egytter	pilajyosa yahi ya ili.	<u>ভিত্তন করিছে জিল</u>	11.000 M 19.000 - 2.000	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	nusidos n		
Ī	ON LINN ST/ STH				Latitude		Longitude	- 1	VLongSource	Access (Control		
	154 FT E				43.474783		-89.76818		.T/ILT	0.5	1 2	1.0%-1	
	OF USH12 EB IN THE VILLAGE	OF WEST	BARABOO		X Coordinat 276109.96		Y Coordinat 4817263.5	5.17	Roadway Link ID# 64249	154	Iway Li	nk Offset	
	IN SAUK COUNT				2/6109.90		Tribal Land	130	<u> </u>	Structure	e Type		
-					Override		Titoai cana		STATE OF THE PROPERTY OF THE P	NO ST		URE	
	Crash Scene	agu turikir					al Leggies	eed subsyspea	ene artegue d'aboue plane de l'action.	erigender lieber das er	ekongrano e	etang e di neoro da partida	
	First Harmful Event				First Harmft			P.					
ļ	MOTOR VEH IN	IRANSPUR			Light Condi			7 <u>5</u>	<u> </u>			•	
	02FRONT TO R	FAR			DAYLIGH								
ŀ	Road Surface Condi					Environment Factor(s)							
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,												
	DRY			NONE									
	Roadway Factor(s)				Weather Condition(s)								
	WORK ZONE (CONSTRUCTIO	N/MAINTEN	IANCE/UTIL	ITY)	CLEAR								
	Animal Type				Relation To Trafficway TRAFFICWAY - ON ROAD								
	Crash Classification	- Location			Crash Class	sificati	on - Jurisdictio						
ļ	PUBLIC PROPE	RTY	· 200	·	NO SPECIAL JURISDIC								
	Tribal Land			a j	Access Cor NO CON			Spec	Special Study				
	Within Interchange	Area Ju	inction Locatio	n —	· · · · · · · · · · · · · · · · · · ·		ersection Type	••					
	NO	N	ON-JUNCTI	ON		1	T AN INTE	RSECTION	ON				
	Work Zone Crash L			1	Work Zone			WO W/	DIV.		,		
	ADVANCE WAR	NING AREA					IT OR MOV	ING WO	KN				
	Workers Present				Law Enforce	æmen	t Present						
	NO	<u> </u>		Addison/Doculo	l	imit		Normal P	osted Speed Limit				
	Work Zone Speed Limit Advisory/Regulation REGULATOR					ши		25	ootou opoou zami				
	7207		· · · · · · · · · · · · · · · · · · ·		et a restrict to the estimate	niya e kilê li	nder op bygg (alle Modifier	r v p sa A Mayo	en e	gy a yasayaya	/1/2011	s regulation of the end of these	
	Unit Summary			Vehicle Operatir	ng As Classifi	ication	<u> </u>	Unit Type	<u> </u>			· -	
	IN TRANSIT	#F		D CLASS	.9 7 10 01000111			AUTOMOBILE					
	Vehicle Type			1				Operating As Endorsements					
5	PASSENGER CA	AR						Spotting 1 to Endorson Trans					
	Total Occs	Train/Bus # I	njured	Total # Citations	slssued	Issued Total Trail		rs Total HazMat Types					
⊨	Insurance?	Direction Of WESTBOL		Pre Cra	ashTire Speed Lim								
LIND	YES WESTBOUND L Ma Most Harmful Event: Collision With NO SPECIAL NO SPECIAL				n Eme			Emergen NOT AF	Emergency Motor Vehicle Use NOT APPLICABLE				

Wisconsin Motor Vehicle Crash Report

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

		: Way -WAY, NOT DIVIDE		Traffic Control NO CONTROL			Traffic Co	ntrol Inoper	ative/Missin	9	*
	Surfa	ce Type CKTOP (BITUMINO		Road Curvature STRAIGHT			Road Gra	ide			
5		Bus or HazMat								_	
		Role DRIVER			Citations Issued		Use I Add	Oriver ress	individual		
2	The state of the state of	Last Name CROSS	***		First Name MCKARYN	- 0			Middle Initi		Suffix
	*******	Street Address 718 BASCOM HILL	Street Address 2				PO Box				
	Z	City BARABOO	State Wi	539	ip Code 3913		Country of Residence UNITED STATES Weight Phone Number		<u>s</u>		
LINO	NDIVIDUAL	DOB	Sex Rac	e 	Hair BROWN	Eyes BROWN	<u> </u>	8	Weight 150 Country of	(608) 2	219-2324 EXT.
	2	Driver's License Number			State WI		ense Jursid ATE		UNITED DL Expire	STATE	
		License Type NON-CDL DRIVER'S LICENSE			License Status VALID LICEN	<u> </u>	-		2018	Toal	
		Equipment On Duty Accident			Safety Equipment		ŧΤ				
	δ	Seat Position 1FRONT SEAT-L	Helmet Compliance								
		Pelmet Use			Tint Compliance						
		Eye Protection	Injury Severity		Airbag						
		<i>Injury</i> Ejected	NO APPAREN	INJURY	_	NON DEPLOYED			d/Extricated		
LIND	NDIVIDUAL	NOT EJECTED MedicalTransport		· · · · · · · · · · · · · · · · · · ·	NOT EJECTE EMS Agency Ide		PPLICA	NOT TRAPPED EMS Run #			
ر	2	NOT TRANSPORT	rED.		Date of Death			Time of Da	eath		
		Steking Unit #			Location	·		To/FromSchool			
		Non Motorist Prior Action	Non Motorist			Action					
	8										
					Action Other						
	A CONTRACTOR OF THE PARTY OF TH	Drug & Alcoh	Individual Conditi	on ORMAL							

Suspected Alcohol Use

Suspected Drug Use

Wisconsin Motor Vehicle Crash Report

2000									·				
logia de de la constitución de l	4	NO	<u>.</u>		N	40							
LIND		Alcohol Test Given Alcohol Test Type TEST NOT GIVEN				^	Icohol Test Re						
		Drug Test Given Drug Test Type TEST NOT GIVEN				Ü	rug Test Resu	ılts	- 12 - 12 - 12 - 12 - 12 - 12 - 12 - 12				
Standing Congression of Prince		Drug Type					.,		A.				
di timendadi saliyasi		•											
9		License Plate Number			F	Plate Type		St	Country of Issuance				
		CR0SS3				AUT - AUTO	OMOBILE	WI	UNITED STATES				
1		Vehicle Identification Nu	ımber					Year	Make				
į		1LNHM82W35Y615	556					2005	LINCOLN				
		Model				Body Style			CRM - CREAM (IVORY)				
		TOWN CAR S				4D - 4DR		TOPL	CKIN- CKEAN (IVOKT)				
		Initial Contact Point				Vehicle Dama	age						
		12FRONT Extent Of Damage				12FRONT	. 59)					
2	5	MINOR DAMAGE			'	12FROINT							
		Towed Due To Damage				Vehicle Factors							
		NOT TOWED											
		Vehicle Removed By				NOT APPLICABLE							
	100							100 mm	Bus Use				
		What Driver Was Doing	1	Driver Prior A	ction Other	<i>*</i>	NOT A BUS						
		GOING STRAIGHT				Driver Distrac	tions						
		Driver Actions OPERATED MOTO	R VEHICLE II	N INATTE		NOT DISTR							
j		CARELESS OR ER		**************************************									
LIND	Ĭ		j)										
ر	VEHICLE			500) 1000		<i>ŵ</i>							
		☐ Vehicle Owner	Same As Ope	AF.		Use Operator Address							
		Organization Type INDIVIDUAL		Comp	any Name				•				
		Last Name	<u> </u>	First	Name		<u> </u>	Middle	Suffix Date of Birth				
		CROSS		CAR	ĹA			M	· ·				
		Street Address		Stree	t Address2	-		PO Box					
		Street Address 718 BASCOM HILL	DRIVE		Zip Code	<u> </u>	 	Country of Resid	dence				
		City BARABOO	The state of the s	St WI	53913	8		UNITED STAT					
		Telephone Number	<u> </u>					·					
	Total Col	(608) 219-2324 EXT	<u>Ĺ</u>										
	Established Extension	Event /	AMERORI										
	5	MOTOR VEH IN TR	ANSPORT				<u> </u>						
	8	Event											
	အ	Event			·				·				
	8	Event	<u>.</u>										
5	2	UTC Number BB336938	Issue To? 001	Statute Nt 346.89(1		Seq Num 001	Description INATTEN	TIVE DRIVING	i				

Wisconsin Motor Vehicle Crash Report

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_	5	TOFSON IN	9				Policy Same	y Holder	ner	□Po	licy Hol	der Same	As Dri	ver	
TIND				La	st Name		First Name			Policy	Holder Co	mpany			
,	2씸[Organization 1 INDIVIDUAL	-	CI	ROSS	-1-17	CARLA								
		Summary	y 🖪	tarika yesi sarrasa s		overnesti (6.547)	en e	Balayas	ayaran					- 194 - 194	
		Status RANSIT			Vehic D CL		7.00 0.000			Jnit Type	omobile				
		de Type			15 02					Operating /		ements			
02		SENGER C	AR						<u>*</u>						
		Occs	Train/Bu	s # Injured	Total 0	# Citations Is	1					Total HazMat Types 0			
	Insurance? Direction Of Travel Pre Crash									Total Lanes					
UNIT	YES					25				2	**= -		;		
5		Harmful Even			Speci NO S	al Function	UNCTION		E	Emergency NOT APP	Motor Ve	hicle Use	en e		
		OR VEH IN	IRANS	PORI		Control					addining.	ative/Missir			
	-	D-WAY, NOT	DIVIDE	Đ	l l	CONTROL			ı	VO					
•	Surface Type Road Curvature									Road Grad	le lav	J			
		CKTOP (BIT		108)	318	AIGH I		•	<u> </u>	LYLL		· · · · · · · · · · · · · · · · · · ·			
02	NO	C Das or Hazzi							2	.35					
		Role DRIVER					Citations Issued	d 🕌		Use Dr		Individual			
07	~	New York Control of the Control of t					First Name			Augure Augure	rigaross		Middle Initial Suffix		
	STEINMETZ B						BROOKLYN	- 200				MIKAYLA			
		Street Addres		コピピエ #202			Street Address		. Fij			PO Box			
		1420 DRAPER STREET #202					State		Zip Co	ode		Country o			
—	3	BARABOO				WI 53913					UNITED				
LIND	INDIVIDUAL	DOB		Sex F	Race W	5.	Hair BROWN	Eyes GREE	N	Heigi 508	nt	Weight 135	1	Number 219-2324 EXT.	
_	ā	Driver's Licer	nse Numb	<u> </u>	<u> </u>	.63	State			se Jursidic	tion	Country o	f Issuanc	æ	
	_						WI STATE			[E	UNITED STATES DL Expire Year			S	
		License Type NON-CDL DRIVER'S LICENSE					VALID LICENSE					2026	. 1001		
		On Duty Accident				Safety Equipment									
		Equipment					SHOULDER & LAP BELT								
		Seat Position 1FRONT SEAT-LEFT SIDE (DRIVER/MOTORC													
	8	Helmet Use					Helmet Compliance								
		Eye Protection					Tint Compliance								
		Lyc / lotcouc		1000											
		Injur	V	Injury Seven	ity RENT INJU	RY	Airbag NON DEPLO	YED						•	
	2	Ejected	7	NOAFIA	ILLIVI IIIOO		Ejection Path				Trapped/E				
LIND	2	NOT EJEC		2.000 2.000			NOT EJECT		APF		NOT TRA				
5	INDIVIDUAL	MedicalTran		FD			EMS Agency Id	dentifier			EMS Run	#			
	Z	Hospital					Date of Death		-		Time of Da	eath			
	10000000000000000000000000000000000000	-		······				-			To/FromS	ab a al			
		Non Mo	torist	Striking Uni	τ#		Location				OFFICING	G1001			
		Prior Action					Action								
	02														
	_														

Wisconsin Motor Vehicle Crash Report

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

	Marie Carlo			ļ					ě A			
	and the second s											
					Action Othe	er . 				· .		
		Drug & Algoh Individual Condition APPEARED NORMAL										
		Suspected Alcohol Use		Suspected NO	Drug Use							
_	3	NO Alcohol Test Given	Alcohol Test 7	Гуре		Alcohol Test Results						
	5	TEST NOT GIVEN										
_	NDIVIDUAL	Drug Test Given TEST NOT GIVEN	Drug Test Typ	oe .		Drug Test Results	Į.		<u></u>			
		Drug Туре	···		-	<u></u>	- 4	- 44				
			•				n A					
					Blata Tana		St	Counto	y of Issuance			
		License Plate Number 325YPH			Plate Type AUT - AU	TOMOBILE	WI		ED STATES			
		Vehicle Identification Number				Miles de la companie	Year 2012	Make	/ROLET			
		2G1WG5E37C1319905 Model			Body Style		2012	Color		<u></u>		
		IMPALA LT	4D - 4DR		<u>.</u> .	GLD -	- GOLD	<u>.</u>				
		Initial Contact Point 6REAR		Vehicle Da	maye							
05	02	Extent Of Damage			6REAR							
_		MINOR DAMAGE Towed Due To Damage		Vehicle Fa	ctors		 ;					
		NOT TOWED	.5.5		NOT AP	PLICABLE						
		Vehicle Removed By				1 = 1		<u>-</u>				
		What Driver Was Doing RIGHT TURN		Driver Prio	r Action Other		Bus Use NOT A BUS					
		Driver Actions NO CONTRIBUTING ACTION	Driver Distractions NOT DISTRACTED									
H	<u>Б</u>	NO CONTRIBUTING ACTION	NOT DIS	INACIED								
FIND												
	ġ											
		☐ Vehicle Owner Same As Ope	erator	<u> </u>	Use Operator Address							
		Organization Type		any Name	e							
		INDIVIDUAL	First N	ama .			liddle	Suffix	Date of Birth			
		Last Name STEINMETZ	JENN	IIFER		_ L						
		Street Address S374 GERKEN LANE	Street	Address	2	P	O Box					
		City	St	Zip Co			country of Re					
		ELROY Telephone Number	WI	53929	9		INITED ST	AIES		<u> </u>		
			,							 		
	5	Event MOTOR VEH IN TRANSPORT										
												

Event

Wisconsin Motor Vehicle Crash Report

			·					
						1		
	03	Event						
	-02000	Event				A		
	8			1				
느	8	Insurance Company PEKIN-INS-CO		Policy Holder Same As Owner	Policy Holder	r Same As Dr <u>i</u> yer		
LIND	3 5 5	Organization Type INDIVIDUAL	Last Name STEINMETZ	First Name JENNIFER	Policy Holder Compa	any		
1	Des		0721111272		en sage et en			
!	Diag					Reconstruction By		
		1						
						Photos By		
						Photos by		
					. ,	Additional Information		
						NONE		
				<u> </u>				
		جَــَـَـَـَا) آ	ጃግ	1: 0- 1				
		<u> </u>		Linn Street				
			1/2					
			Construction Zone					
			Construction Zono					
		Kwik Trip	•					
		Not To Scale						
			_					
			 					
	ON	08-22-18 UNIT 2 WAS WESTED	OUND ON LINN STREET MAKIN REAR-ENDED UNIT 2. BOTH U	G A RIGHT TURN INTO THI NITS THEN PULLED INTO	E KWIK TRIP GAS STA THE GAS STATION PA	ATION IN WEST BARABOO. UNIT 1 WAS ARKING LOT. NO INJURIES REPORTED.		
	Ļ.,							
	СН	ANGED ADDRESS FOR OWNER	R OF UNIT 1.					

Wisconsin Motor Vehicle Crash Report

Signature						gawesii.			
I, a sworn law	enforcemen	t officer, agre	e that I have no	t added	d any CJIS d	lata is	n this repo	t	
Law Enforceme	nt Agenc	у 🛌		70.00578ch(6)		(30) (43) (b)	The Manager of States Makes	sana ili salah sanaar	
Agency Space			.,-						100 100 100 100 100 100 100 100 100 100
Officer Rank DEP	Officer Last N		Officer First	Name		Office	er Middle Nan	ne	Suffix
DOT Officer ID 9195				er ID			Officer Badge Number 9195		
Officer EMail									
Local Agency Number		Law Enforceme	nt Agency Jurisdic	tion			Law Enforce	ment Agenc	y type
Law Enforcement Age	-	PARTMEN			Agency Name COUNTY S	SHER	IFF		9
Law Enforcement Age 1300 LANGE COU	•	fress		Law Enforcement Agency Street Address2					
Law Enforcement Agency City LEA State BARABOO Wi					Law Enforcement Agency Zip Code 53913				
Law Enforcement Agency Phone Number ORI Number (608) 356-4895 EXT. WI0570000					BFUNC Age 5600	ncy	j Ž	TraCS Agen 205	acy Number