18-10217

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash Document #		. .			gating Officer/Deputy ITY A. KULAS			
2	Crash Date 09/14/2018	Crash Time 06:22 PM		Date Arr 09/14/2		Time Arrived 06:28 PM	l			
9	Date Notified	Time Notified		Total Units		·		Total Killed	ed	
4	09/14/2018	06:22 PM		02		00		00		
6TL09426RL	On Emergency	and Run	ane Closu		Work Zone		or To	owed	Reporting Threshold	
6T	Government Property	Active School Z	Zone	School I NO	Bus Related	Tags				
	✓ Reportable	Crash Type DT4000 (STANDAR	D CRASH)			led		Secondary Crash	
	Description									
	Diagram						Reco	onstruction	Ву	
							Phote	os By		
								tional Infor	mation	
							NON	NE		
		رقیسے جار	0.200		(~~~	۵				
		<u> </u> [[U2]		Ji	<u>U2</u>	0;				
			<u> </u>			-				
	-									
					Linn St					
					Not to Scale					
					\odot					
	— I						I			
	► I, a sworn law enforceme									
	UNIT 1 WAS WEST BOUND ON L ALSO WEST BOUND AND WAS E	BEHINF UNIT 1. THE OP	PERATOR O	F UNIT 2	ADVISED SHE LOOKED	DOWN FOR S	OMET	THING AN	D WHEN SHE LOOKED	
	UP IT WAS TO LATE. THE FRON INATTENTIVE DRIVING.	T END OF UNIT 2 COLL	IDED WITH	THE RE	AR END OF UNIT 1. THE	OPERATOR O	F UNI	IT 2 WAS (CITED FOR	

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_ocation		
ON LINN ST/ STH33 WB 221 FT E	Latitude 43.474786663	Longitude -89.767930283
OF USH12 WB IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY	X Coordinate 276130.6875	Y Coordinate 4817263.5
	Structure Type NO STRUCTURE	

Crash Scene

NO	NON-JUNCTION	Intersection Type NOT AN INTERSECTION				
Within Interchange Area	Junction Location	NO CONTROL				
Tribal Land		Access Control	Special Study			
PUBLIC PROPERTY		NO SPECIAL JURISDICTION	N			
Crash Classification - Locat	ion	Crash Classification - Jurisdictio	n			
		TRAFFICWAY - ON ROAD	TRAFFICWAY - ON ROAD			
Animal Type		Relation To Trafficway	Relation To Trafficway			
CLEAR						
Weather Condition(s)						
NONE		NONE	NONE			
Environment Factor(s)						
Environment Fester(a)						
DRY						
Road Surface Condition(s)		Roadway Factor(s)	Roadway Factor(s)			
02FRONT TO REAR		DAYLIGHT	DAYLIGHT			
Manner of Collision		Light Condition	Light Condition			
MOTOR VEH IN TRANS	SPORT	ON ROADWAY				
First Harmful Event		First Harmful Event Location	First Harmful Event Location			

		,							
		Status		Vehicle Operating As Classifica	tion	Unit Type			
	IN T	RANSIT		D CLASS		AUTOMOBILE			
1	Vehi	cle Type				Operating A	As Endorsements		
6	(SP	ORT) UTILITY VEHICLE							
	Tota	Occs	Train/Bus # Injured	Total # Citations Issued Total Traile		ilers Total HazMat Types			
	2			0	0		0		
	Insu	ance?	Direction Of Travel	Pre CrashTire		nit	Total Lanes		
E	YES WESTBOUND		Mark 2			4			
UNIT	Most Harmful Event: Collision With			Special Function			Motor Vehicle Use		
	MO.	FOR VEH IN TRANSPO	RT	NO SPECIAL FUNCTION		NOT APP	PLICABLE		
	Traffic Way			Traffic Control		Traffic Con	trol Inoperative/Missing		
	TWO-WAY, NOT DIVIDED			NO CONTROL	NO				
	Surfa	асе Туре		Road Curvature		Road Grad	e		
	BLA	CKTOP (BITUMINOUS))	STRAIGHT		LEVEL			
	Truc	k Bus or HazMat							
	NO								
	١	Vehicle							
		License Plate Number		Plate Type	St	Country of Is	ssuance		
		490ZDF		AUT - AUTOMOBILE	WI	UNITED S	TATES		
-	_	Vehicle Identification Numb	er	Make	Year	Model			
6	6	1C4NJDEB1ED600207		JEEP	2014	COMPASS	S LA		
		Color		Body Style		Bus Use	10		
		BLK - BLACK		UT - SPORT UTILITY VEH	IICLE	NOT A BU	15		
	щ	Initial Contact Point		Vehicle Damage					
Ę	<u></u>	6REAR							
UNIT	VEHICL	Extent Of Damage		6REAR					
	2	MINOR DAMAGE							

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

		Towed Due To Dama	ige	Veh	icle Removed By							
		NOT TOWED		٥W	/NER							
		What Driver Was Doir	-	Veh	icle Factors							
		SLOW/STOPPING										
		Driver Prior Action Otl	her	NO	T APPLICABLE							
		Driver Actions										
	ш	NO CONTRIBUTIN	NG ACTION									
H	VEHICLE											
UNIT	Ĕ											
	Ē											
	-											
		Driver Distractions	2									
		NOT DISTRACTED	D									
0	6											
	•											
		Owner Name			Owner Address							
		HALEY MARIE HO	OFFMAN		429 LAKE ST # 2							
		(608) 393-6206			BARABOO, WI 53913 , US							
	Sequence Of Events											
	6	Event MOTOR VEH IN TRANSPORT										
	02	Event										
	03	Event										
	0	-										
	04	Event										
F	I	Policy Holder										
UNIT		Insurance Company			ndividual							
_		AMERICAN-FAMI	LT-INS-CO		IALEY HOFFMAN							
	l	Individual				1-						
		Driver HALEY MARIE HO	OFFMAN		Citations Issued	Sex FEMALE						
	Ā	(608) 393-6206			Date of Birth	Race						
L						WHITE						
UNIT	Ξ	Address		0	Driver License Number							
>	Ē	429 LAKE ST # 2										
	2	BARABOO, WI 53	913,US		STATE: WISCONSIN COUNTRY: UN	NITED STATES						
		Equipment	On Duty Crash	S	Safety Equipment							
		Seat Position			HOULDER & LAP BELT							
			LEFT SIDE (DRIVER/MOTORCY		BROOLDER & LAF BELI							
		Helmet Use		-	lelmet Compliance							
		Eye Protection		Т	int Compliance							
~	Ξ		Injury Severity	P	Nirbag							
01	001	Injury	NO APPARENT INJURY		NON DEPLOYED							
						Trapped/Extricated						
		NOT EJECTED					to 00/14/0040					
Wisco	nsin M	Notor Vehicle Crash	I his rep	ort do	pes not include any CJIS data.	Crash Da	te 09/14/2018					

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Medical Transport NOT TRANSPOR	ſED		EMS Agency Identi	fier	EMS Run #						
		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 U NO	se	Suspected Drug Use								
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type		Alcohol Test Results						
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Results						
2	001	Drug Type					1						
		Individual Condition											
		APPEARED NORI	MAL										
	I	Individual Passenger Citations Issued Sex											
	Ļ	Passenger DAVID JACOB THOMPSON (608) 963-3139			0	0 MALE							
E	DUA	(000) 903-3139			Date of Birth		Race WHITE						
UNIT	INDIVIDUAL	Address 429 LAKE ST # 2 BARABOO, WI 53	913,US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES								
		Equipment	On Duty Crash		Safety Equipment								
		Seat Position	RIGHT SIDE (TRAII		SHOULDER & LAP BELT								
		Helmet Use	(-	Helmet Compliance								
		Eye Protection			Tint Compliance								
6	002	Injury	Injury Severity		Airbag								
-	0	Ejected	NO APPARENT II	NJURT	NON DEPLOYEI		Trapped/Extricated						
	NOT EJECTED			-	NOT APPLICABL	NOT TRAPPED							
		Medical Transport			EMS Agency Identi	fier	EMS Run #						
		NOT TRANSPORT	ſED										
		Hospital			Date of Death		Time of Death	e of Death					
		Non Motorist	Striking Unit #	Prior Action		Location	1	To/From School					

1

WISCONSIN MOTOR VEHICLE **CRASH REPORT**

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1		Action						
	Ļ							
E	INDIVIDUAL							
UNIT								
	Ľ							
		Action Other						
		Sus	pected Alcohol Use	Suspected Drug Use				
	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 R	Results	
0	002	Drug Type				-1		
		Individual Condition						
		APPEARED NORMAL						
I	Uni	t Summary						
	Unit	Status		Vehicle Operating As Classifica	tion	Unit Type		
		RANSIT cle Type		D CLASS		AUTOMO	BILE s Endorsements	
02		SENGER CAR				- p		
	Tota 5	l Occs	Train/Bus # Injured	Total # Citations Issued 1	Total Trail 0	ers	Total HazMat Types 0	
	Insurance? Direction Of Travel YES WESTBOUND		Pre CrashTire	Speed Lin 25	nit	Total Lanes 4		
UNIT	Most Harmful Event: Collision With		Special Function	25		Motor Vehicle Use		
		TOR VEH IN TRANSPO	RT	NO SPECIAL FUNCTION Traffic Control		NOT APP	rol Inoperative/Missing	
	тwo	D-WAY, NOT DIVIDED		NO CONTROL		NO		
		ace Type ACKTOP (BITUMINOUS))	Road Curvature STRAIGHT		Road Grade		
	Truc	k Bus or HazMat	,					
	NO	Vehicle						
		License Plate Number		Plate Type	St	Country of Is		
		125YRC Vehicle Identification Numb)er	AUT - AUTOMOBILE	WI Year	UNITED ST Model	TATES	
02	02	3FAHP011X7R162014		FORD	2007	FUSION		
		Color RED - RED		Body Style SD - SEDAN		Bus Use	S	
F	Ë	Initial Contact Point 12FRONT		Vehicle Damage				
UNIT	VEHICLE	Extent Of Damage		12FRONT				
		Towed Due To Damage TOWED DUE TO DISA	BLING DAMAGE	Vehicle Removed By OWNER				
		What Driver Was Doing GOING STRAIGHT		Vehicle Factors				
		Driver Prior Action Other		NOT APPLICABLE				
1								

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UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTION										
		Driver Distractions DISTRACTION/INATTENTION										
02	02											
		Owner Name RANDALL R NEUMAN	Owner Address E12589 NEUMAN RD									
		(608) 477-0179	BARABOO, WI 53913 , US									
	ę	Sequence Of Events										
	0	Event MOTOR VEH IN TRANSPORT										
	02	Event										
	03	Event										
	04	Event										
L		Policy Holder										
UNIT		Insurance Company	Individual RANDALL NEUMAN									
		RURAL-MUTUAL-INS-CO-(ATTN:-CLAIMS-DEPT)										
		Driver GRACE NICOLE NEUMAN	Citations Issued	Sex								
	JAL	(608) 477-0179	1 Date of Birth	FEMALE Race								
UNIT	VID	Address	Driver License Number									
Б	INDIVIDUA	E12589 NEUMAN RD BARABOO, WI 53913, US	STATE: WISCONSIN COUNTRY: UNITED STATES									
		On Duty Crash	Safety Equipment									
		Equipment Seat Position	SHOULDER & LAP BELT									
		1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY Helmet Use	Helmet Compliance									
		Eye Protection	Tint Compliance									
02	003	Injury Severity NO APPARENT INJURY	Airbag DEPLOYED-FRONT									
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABL	Trapped/Extricated NOT TRAPPED								
		Medical Transport	EMS Agency Identifier	EMS Run #								
		NOT TRANSPORTED Hospital	Date of Death	Time of Death								
		Non Motorist Striking Unit # Prior Action	Location	To/From School								
Wisco	nsin N	Aotor Vehicle Crash This repor	rt does not include any CJIS data.	Crash Date 09/14/2018								

WISCONSIN MOTOR VEHICLE **CRASH REPORT**

		Action							
	AL								
UNIT	INDIVIDUAL								
5	DIV								
	Z								
		Action Other							
	,	Drug & Alcohol	Suspected Alcohol L	Jse	Suspected Drug Us	se			
	-	Alcohol Test Given	NO		Alcohol Test Type		Alcohol Test Results		
		TEST NOT GIVEN	I		Aconorrescrype		Alcohor rest Nesults		
		Drug Test Given TEST NOT GIVEN	I		Drug Test Type		Drug Test Results		
02	003	Drug Type							
	0								
		Individual Condition							
		APPEARED NOR	MAL						
		Individual							
		Passenger JILLIAN KATHLE	EN SHANKS		Citations Issued 0		Sex FEMALE		
	INDIVIDUAL	(608) 393-4317			Date of Birth		Race WHITE		
UNIT	<u>N</u>	Address				nber			
	ND	E9903 STATE RO BARABOO, WI 53			STATE: WISCONSIN COUNTRY: UNITED STATES				
	_	,	,						
		Equipment	On Duty Crash		Safety Equipment				
		Seat Position			SHOULDER & LAP BELT				
		5SECOND SEAT Helmet Use	I-MIDDLE		Helmet Compliance				
					riemet oomplianet				
		Eye Protection			Tint Compliance				
03	004	Injury	Injury Severity		Airbag	D			
	0	Ejected	NO APPARENT I	NJURT	NON DEPLOYE Ejection Path	D	Trapped/Extricated		
		NOT EJECTED				NOT APPLICABL	NOT TRAPPED		
		Medical Transport NOT TRANSPOR	TED		EMS Agency Identi	tier	EMS Run #		
		Hospital			Date of Death		Time of Death		
			Striking Unit #	Prior Action		Location		To/From School	
1		Non Motorist	_						

1		Action							
	AL								
UNIT	INDIVIDUAL								
Б	DIV								
	Z								
		Action Other							
	L	Drug & Alcohol	Suspected Alcohol L NO	lse	Suspected Drug Us	se			
		Alcohol Test Given TEST NOT GIVEN	l		Alcohol Test Type		Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN	l		Drug Test Type		Drug Test Results		
02	004	Drug Type							
	U	Individual Condition							
		APPEARED NOR							
		APPEARED NOR	MAL						
	l	Individual					1-		
	_	Passenger KAPRIECE L TOL	LAKSEN		Citations Issued 0		Sex FEMALE		
	INDIVIDUAL	(608) 963-7990	(608) 963-7990				Race WHITE		
UNIT	<u>I</u>	Address			Driver License Nun	nber			
	ND	500 14TH AVE BARABOO, WI 53	913,US		STATE: WISCONSIN COUNTRY: UNITED STATES				
		Equipment	On Duty Crash		Safety Equipment				
		Seat Position 6SECOND SEA1			SHOULDER & LAP BELT				
		Helmet Use			Helmet Compliance)			
		Eye Protection			Tint Compliance				
	10		Injury Severity		Airbag				
03	005	Injury	NO APPARENT I	NJURY	NON DEPLOYE	D			
			•		Ejection Path		Trapped/Extricated		
		NOT EJECTED Medical Transport			EMS Agency Identi		NOT TRAPPED EMS Run #		
		NOT TRANSPOR	TED						
		Hospital			Date of Death		Time of Death		
		Non Motorist	Striking Unit #	Prior Action		Location	1	To/From School	

		Action							
	UAL								
UNIT	INDIVIDUAL								
	IND								
		Action Other							
	Ľ	Drug & Alcohol	Suspected Alcohol U	se	Suspected Drug Us	Se			
		Alcohol Test Given			Alcohol Test Type		Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN	I		Drug Test Type		Drug Test Results		
02	005	Drug Type							
		Individual Condition							
		APPEARED NOR	MAL						
		Individual							
	_	Passenger ELIZABETH JEAN	N SHOWERS		Citations Issued 0		Sex FEMALE		
┝	INDIVIDUAL	(608) 963-9494			Date of Birth		Race WHITE		
UNIT		Address E12766 CLINGMA			Driver License Nun	nber	1		
	Z	BARABOO, WI 53			STATE: WISCONSIN COUNTRY: UNITED STATES				
		Equipment	On Duty Crash		Safety Equipment				
		Seat Position	LEFT SIDE(MOT		SHOULDER & L	AP BELT			
		Helmet Use			Helmet Compliance	9			
		Eye Protection			Tint Compliance				
2	900	Injury	Injury Severity		Airbag	_			
	0	Ejected	NO APPARENT I	NJURY	NON DEPLOYE	D	Trapped/Extricated		
		NOT EJECTED			NOT EJECTED/		NOT TRAPPED		
		Medical Transport NOT TRANSPOR	TED		EMS Agency Ident	fier	EMS Run #		
		Hospital			Date of Death		Time of Death		
		Non Motorist	Striking Unit #	Prior Action		Location	1	To/From School	

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WISCONSIN MOTOR VEHICLE **CRASH REPORT**

UNIT	INDIVIDUAL	Action									
		Action Other									
	Ľ	Drug & Alcohol	Suspected Alcohol U NO	se	Suspected Drug Us	se					
		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	900	Drug Type	Drug Type								
		Individual Condition	ndividual Condition								
		APPEARED NORI	MAL								
	I	Individual									
		Passenger ASHLEY LYNN RACHUJ (608) 393-3265			Citations Issued 0		Sex FEMALE				
	UAL				Date of Birth		Race WHITE				
UNIT	dN	Address			Driver License Num	nber	WHITE				
D	INDIVIDUAI	E10146 BUCK BA REEDSBURG, WI				NSIN COUNTRY: UN	IITED STATES				
		Equipment	On Duty Crash		Safety Equipment						
		Seat Position			SHOULDER & LAP BELT						
		Helmet Use	RIGHT SIDE (TRAII	NENGINEER	Helmet Compliance)					
		Eye Protection			Tint Compliance						
	~		Injury Severity		Airbag						
02	007	Injury	NO APPARENT II	NJURY	DEPLOYED-FR	ONT					
		Ejected NOT EJECTED			Ejection Path		Trapped/Extricated NOT TRAPPED				
		Medical Transport			EMS Agency Identi		EMS Run #				
		NOT TRANSPORT	ſED								
		Hospital			Date of Death		Time of Death				
		Non Motorist	Striking Unit #	Prior Action	1	Location	L	To/From School			

UNIT	INDIVIDUAL	Action					
	L	Action Other Drug & Alcohol Alcohol Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN			Suspected Drug Use NO Alcohol Test Type Drug Test Type Drug Test Type		
02	01 007	Drug Type Individual Condition APPEARED NORMAL Violations UTC Number AE142387 003 Statute Number 346.89(1) 001 Description INATTENTIVE DRIVING					