18-10012

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Override Primary Crash Document # Agency Crash Number Investigating Officer/Deputy 18-10012 DEPUTY E. KNULL Date Arrived Time Arrived Crash Time Crash Date 6TL0B4X4JF 09/09/2018 12:41 PM 09/09/2018 01:13 PM Date Notified Time Notified Total Units Total Injured Total Killed 09/09/2018 12:41 PM 02 01 00 Reporting Hit and Run Lane Closure Trailer or Towed On Emergency Work Zone Threshold School Bus Related Tags Government Active School Zone NO Property Crash Type Secondary Amended Reportable DT4000 (STANDARD CRASH) Crash Description Diagram Reconstruction By Photos By KNULL Additional Information PHOTOS 1 D/177 CTH H Η NOT TO SCALE ✓ I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report. OPERATOR OF UNIT 2 WAS EB AND STOPPED TO TURN INTO DRIVEWAY OF E7882. UNIT 1 DID NOT STOP AND HIT THE REAR OF UNIT 2 AND THEN CONTINUED EB. ONLY DESCRIPTION IS A BROWN CAR. OPERATOR OF UNIT 2 CLAIMING INJURY BY WHIPLASH. DECLINED EMS OR TRANSPORT TO HOSPITAL. NO DAMAGE TO UNIT 2. UNIT 2 REMOVED BY OPERATOR AND UNIT 1 REMOVED BY OPERATOR.

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

	~~	ation —								()	
		OCATION CTHH EB					Latitude			Longitude	
	-	FTE				43.59410	01013		•	654875	
		CHERRY LN				X Coordin			Y Coord		
		HE TOWN OF DELLON	NA			263436.25			483096		
	IN SAUK COUNTY					Structure -	Гуре				
						NO STR	UCTURE				
C	Cra	sh Scene									
Τ	First Harmful Event MOTOR VEH IN TRANSPORT					First Harm	iful Event Lo	cation			
						ON ROA	DWAY				
		ner of Collision				Light Cond					
						DAYLIG					
	Road	d Surface Condition(s)				Roadway	Factor(s)				
	DR۱	(
	Envi	ronment Factor(s)									
	NO	NE				NONE					
┝	Wea	ther Condition(s)									
	CLE	. ,									
	-										
	Anim	nal Type					o Trafficway				
_	Croo	h Classification - Location					SWAY - OI	-			
		BLIC PROPERTY									
	-	al Land				NO SPECIAL JURISDICTION Access Control			Special Study		
					NO CONTROL						
F	Within Interchange Area Junction Location				Intersectio	ection Type					
	NO		NON-JUNCTION		NOT AN	INTERSE	CTION				
		t Summary									
	Unit Status Vehicle Operating As C										
		T AND RUN D C			S			AUTOMO			
-		iicle Type SSENGER CAR						Operating A	s Endorser	nents	
		l Occs	Train/Bus # Injured		ations Issued		Total Traile			Mat Types	
L	1			0	0		0		0		
		rance?	Direction Of Travel	Pre Crash		l.	Speed Lim	it	Total Lanes		
		KNOWN	EASTBOUND		Mark		55	2 Emergency Motor Vehicle Use		icle I Ise	
5	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT				Special Function UNKNOWN			NOT APPLICABLE			
	Traffic Way				ntrol			Traffic Control Inoperative/Missing			
		D-WAY, NOT DIVIDED		NO CON				NO			
					Road Curvature		Road Grade				
		CKTOP (BITUMINOUS k Bus or HazMat)	STRAIG	HI			LEVEL			
	NO	k Bus of Hazimat									
	Vehicle										
					Plate Type		St	Country of Issuance			
								Model			
5	2						Year				
1	0										
		Color BRO - BROWN			le			Bus Use NOT A BU	S		
				Vehicle D	Vehicle Damage						
:	5	UNDERCARRIAGE			· ·······························						
	/EHICLE	Extent Of Damage		UNKNO	WN						
-	ш	UNKNOWN									

UNIT

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		Towed Due To Dama	age	Vehicle Removed By						
		NOT TOWED		OPERATOR						
		-		Vehicle Factors						
		GOING STRAIGH	т							
		Driver Prior Action Ot	ther	UNKNOWN						
		Driver Actions FAILURE TO CONTROL, UNKNOWN								
L	Щ	FAILURE TO COM								
UNIT	₽									
	VEHICLE									
	>									
		Driver Distractions								
		UNKNOWN IF DIS	STRACTED							
-	-									
0	0									
		a b								
		Owner Name		Owner Address						
				3 3						
	9	Sequence Of E	vents							
		Event								
	6	MOTOR VEH IN T	RANSPORT							
	02	Event								
	0									
	03	Event								
	7 Event									
	1	ndividual								
	•	Driver		Citations Issued	Sex					
		Biller		0						
	AL			Date of Birth	Race					
⊢	Ы									
UNIT	INDIVIDUAL	Address		Driver License Number						
	P									
	=	, ,								
		Equipment	On Duty Crash	Safety Equipment						
		Seat Position		NONE USED - VEHICLE OCCUPAN	r					
			LEFT SIDE (DRIVER/MOTORCY	NONE USED - VEHICLE OCCUT AN						
		Helmet Use		Helmet Compliance						
				· · · · · · · · · · · · · · · · · · ·						
		Eye Protection		Tint Compliance						
01	001	Injury								
	0		NO APPARENT INJURY	NOT APPLICABLE	Tranned/Extricated					
		Ejected NOT APPLICABL	F	Ejection Path NOT EJECTED/NOT APPLICABL	Trapped/Extricated NOT APPLICABLE					
		Medical Transport	L	EMS Agency Identifier	EMS Run #					
		NOT TRANSPOR	TED							

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

		Hospital			Date of Death			Time of Death			
		Non Motorist	Striking Unit #	Prior Action		Location				To/From School	
		Action									
	INDIVIDUAL										
F	DU										
UNIT	N										
	ND										
	=										
		Action Other									
		Suspected Alcohol Use Suspected Drug Use									
	Ľ	Drug & Alcohol									
		Alcohol Test Given			Alcohol Test Type			Alcohol Test	Results		
		TEST NOT GIVEN									
		Drug Test Given TEST NOT GIVEN			Drug Test Type			Drug Test Results			
2	001	Drug Type						Alcohol Test Results Drug Test Results Unit Type AUTOMOBILE Operating As Endorsements ilers Total HazMat Types			
0	00										
		Individual Condition	Individual Condition								
		NOT OBSERVED									
1	Unit	t Summary									
		Status			ehicle Operating As C	Classification					
		RANSIT		D	CLASS						
02		iicle Type PORT) UTILITY VEHICLE						Operating As	s Endorsem	ents	
		l Occs	Train/Bus # In	jured To	otal # Citations Issue	ł	Total Trail	lers	Total HazN	lat Types	
	2			0			0		0		
	Insur YES	rance?	Direction Of T	_	Pre CrashTire Mark	•	Speed Lin 55	nit	Total Lanes	5	
UNIT		Harmful Event: Collisi			pecial Function		55	Emergency I		le Use	
	MO			N	O SPECIAL FUN	IAL FUNCTION		NOT APPL	ICABLE		
		-			raffic Control		Traffic Contro		ol Inoperativ	/e/Missing	
					oad Curvature						
					STRAIGHT			Road Grade			
		k Bus or HazMat	•								
	NO										
	1	Vehicle		1 -			O :				
		License Plate Numbe 678DNY	r		Plate Type St AUT - AUTOMOBILE WI		St WI	Country of Iss			
		Vehicle Identification	Number		Make		Year	UNITED STATES Model			
02	02	1J4GW58S1XC57			JEEP		1999 CHEROKEE				
		Color			Body Style		_	Bus Use NOT A BUS			
	111	GRY - GRAY Initial Contact Point			JT - SPORT UTILI /ehicle Damage	I Y VEHICL	.E		•		
E	VEHICLE	6REAR		Ň	Shiele Damaye						
UNIT	HIC	Extent Of Damage		1	NO DAMAGE						
-	< E	NO DAMAGE									
		Towed Due To Dama	ge		/ehicle Removed By						
		NOT TOWED		OPERATOR							

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WISCONSIN MOTOR VEHICLE **CRASH REPORT**

		What Driver Was Doing		Vehicle Factors					
		STOP IN TRAFFIC Driver Prior Action Other		NOT APPLICABLE					
		Driver Phor Action Other							
UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTION	N						
		Driver Distractions							
02	02								
		Owner Name LINDA LOU WILCOX (608) 524-0551		Owner Address E7882 COUNTY ROAD H LYNDON STATION, WI 53944, US	5				
		Sequence Of Events							
	6	Event							
	02	Event							
	03	Event							
	64	Event							
		Policy Holder							
UNIT		Insurance Company		Individual					
		BRISTOL-WEST-INS-CO		LINDA WILCOX					
		Individual							
		Driver LINDA LOU WILCOX		Citations Issued	Sex				
	AL	(608) 524-0551		0 Date of Birth	FEMALE Race				
⊑	'IDUAL				WHITE				
ÎN	N	Address E7882 COUNTY ROAD H		Driver License Number					
-	INDIVI	LYNDON STATION, WI 5394	4 , US	STATE: WISCONSIN COUNTRY: UNITED STATES					
		Equipment On Duty Cr	ash	Safety Equipment					
		Seat Position 1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		SHOULDER & LAP BELT					
		Helmet Use		Helmet Compliance					
		Eye Protection		Tint Compliance					
02	32	Injury Seve	rity	Airbag					
Ö	002		TED MINOR INJURY	NON DEPLOYED					
		Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABL	Trapped/Extricated NOT TRAPPED				
		Medical Transport		EMS Agency Identifier EMS Run #					
		NOT TRANSPORTED							
	onsin M DT40	Motor Vehicle Crash 00	This repo	rt does not include any CJIS data. 5 of 7	Crash Date 09/09/2018 Crash Time 12:41 PM				

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		Hospital			Date of Death						
		Non Motorist	Striking Unit #	Prior Action		Location		To/From School			
		Action									
	_										
	INDIVIDUAL										
E	Ы										
UNIT	Σ										
_	Ē										
	2										
		Action Other									
	_		Suspected Alcohol L	lse	Suspected Drug Us	se					
	L	Drug & Alcohol No			NO						
		Alcohol Test Given	•		Alcohol Test Type		Alcohol Test Results				
		TEST NOT GIVEN	l								
		Drug Test Given			Drug Test Type		Drug Test Results				
		TEŠT NOT GIVEN									
02	002	Drug Type									
	0										
		Individual Condition									
		APPEARED NOR	MAL								
		Individual Citations Issued Sex									
		Passenger CHARLES BRUCE WILCOX (608) 524-0551			0		Sex MALE				
	AL				Date of Birth Race						
ш	S				WHITE						
UNIT	NDIVIDUA	Address			Driver License Num	nber					
	Ē	E7882 COUNTY ROAD H									
	2	LYNDON STATIO	N, WI 53944 ,US		STATE: WISCONSIN COUNTRY: UNITED STATES						
		Equipmont	On Duty Crash		Safety Equipment						
		Equipment									
		Seat Position			SHOULDER & L	SHOULDER & LAP BELT					
		3FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER Helmet Use									
					Helmet Compliance	9					
		Eve Drotestian			T I O II						
		Eye Protection			Tint Compliance						
	3	Injury Severity			Airbag						
02	003	Injury	NO APPARENT I	NJURY	NON DEPLOYED						
		Ejected			Ejection Path Trapped/Extricated						
NOT EJECTED					NOT APPLICABL	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			

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WISCONSIN MOTOR VEHICLE CRASH REPORT

UNIT	INDIVIDUAL	Action Other			
	Ľ	Drug & Alcohol NO	Suspected Drug Use		
		Alcohol Test Given TEST NOT GIVEN Drug Test Given	Alcohol Test Type Drug Test Type	Alcohol Test Results Drug Test Results	
		TEST NOT GIVEN	Didg rest type		
02	003	Drug Type			
		Individual Condition			
		APPEARED NORMAL			