WISCONSIN MOTOR VEHICLE CRASH REPORT

	Document Number Overrio	ae	Primary Crash Document #		3,			DEPUTY L. GJORGJIEV			
٥	Crash Date		Crash Time 07:20 PM		Date Arri 01/05/2		Time Arrived				
D 4	01/05/2020 Date Notified		Time Notified		Total Units		08:00 PM Total Injured Total Killed		ed		
٧/	01/05/2020		07:35 PM		01		00 00				
0 I LU9/R540	On Emergency	Hit	and Run	Lane Closu	ure	Work Zone	Trailer	or Towed	Reporting Threshold		
0 11	Government Property		Active Sc	hool Zone	School B	us Related	Tags				
	✓ Reportable		Crash Type DT4000 (STA	NDARD CRASH	l)		Amend	led	Secondary Crash		
İ	Description Diagram										
	Photos By 9188 Additional Information PHOTOS										
	↓ I, a sworn law enfo	orceme	nt officer agre	e that I have no	ot added	any C.IIS data in th	nis report				
								HE WAS DI ANI	ING TO TURN ON CO HWY		
	UNIT 1 WAS DRIVING SOUTHBOUND ON CO HWY G APPROACHING CO HWY Y. THE DRIVER OF THE VEHICLE STATED HE WAS PLANING TO TURN ON CO HWY Y HOWEVER HE DID NOT SEE THE SLIGHT CURVE TO THE LEFT PRIOR TO THE INTERSECTION. THE DRIVER STATED THE VEHICLE AND OF THE ROADWAY TO THE RIGHT AND ENTERED THE DITCH. THE DRIVER SAID HE THEN LOST CONTROL OF THE VEHICLE AND STRUCK THE UTILITY POLE AND THE STOP SIGN. THE DRIVER SAID THE VEHICLE ROLLED OVER AFTER HITTING THE UTILITY POLE AND LANDED ON ITS ROOF IN THE LANE OF TRAFFIC ON CO HWY Y. THE OCCUPANTS OF THE VEHICLE WERE NOT INJURED. THE UTILITY POLE AND THE STOP SIGN WERE BROKEN FROM THE IMPACT. UNIT 1 WAS TOWED DUE TO THE DAMAGE.										

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

Loc	ation									
	CTHY WB				Latitude			Longitude		
68 F	TW				43.626810418			_	3627908	
OF	CTHG SB				X Coordinate			Y Coord		
	HE TOWN OF WOOD	LAND			238717.0625 4835522.5					
IN S	AUK COUNTY									
					Structure	UCTURE				
					NO SIK	UCTURE				
Cra	sh Scene									
First	Harmful Event				First Harn	nful Event Lo	ocation			
DIT	СН									
	ner of Collision	SHOULDER RIGHT								
	NO COLLISION W/VE	Light Condition DARK/UNLIT								
		THICLE IN TRANSFORT			Roadway Factor(s)					
Road	d Surface Condition(s)				Roadway	racior(s)				
DRY	(
Envir	ronment Factor(s)									
	. ,				NONE					
NON	NE				NONE					
Wea	ther Condition(s)									
CLE	ΔR									
_										
Anim	nal Type					o Trafficwa	="			
					TRAFFIC	CWAY - O	N ROAD			
Cras	h Classification - Location				Crash Cla	ssification -	Jurisdiction			
PUE	BLIC PROPERTY				NO SPECIAL JURISDICTION					
Triba	l Land				Access C	ontrol	Special Study		Special Study	
					NO CONTROL					
Withi	in Interchange Area	Junction Location		Intersection	n Type				·	
NO		NON-JUNCTION		NOT AN	INTERSE	CTION				
Clos	ure Type	Į.	Reas	Reasons for Closure						
LAN	IE CLOSURE									
Date	Initial Lane/Rd Closed	Time Initial Lane/Rd Closed	TOW	TRUCK, I	FIRE/EMS	;				
01/0	5/2020	07:45 PM		·						
Date	All Lanes Open	Time All Lanes Open	Date	Date Scene Cleared Time Scene Cleared						
01/0	5/2020	09:10 PM	01/0				9:17 PM			
Llmi	· Cummon/	L								
	t Summary Status		I Vahiala On	aratina Aa C	loogification		Lust			
				ehicle Operating As Classification			Unit Type AUTOMOBILE			
	RANSIT		D CLASS	D CLASS			Operating As Endorsements			
	cle Type						Operating A	s Endorse	ments	
	SENGER CAR	17 10 10	T			T =	1	-		
	Occs	Train/Bus # Recorded					Total Trailers 0		Total HazMat Types	
3			1	1				0		
	ance?	Direction Of Travel	Pre CrashTire		•	Speed Limit		Total Lanes		
YES		SOUTHBOUND		Mark		55				
Most	Harmful Event: Collision	With	Special Fur				Emergency			
UTIL	LITY POLE		NO SPEC	IAL FUNC	TION		NOT APPLICABLE			
Traff	ic Way		Traffic Con	trol			Traffic Control Inoperative/Missing		tive/Missing	
TWC	D-WAY, NOT DIVIDED	NO CONT	ROL			NO				
Surfa	асе Туре	Road Curva	ature			Road Grade				
BLA	CKTOP (BITUMINOU	CURVE L	EFT			LEVEL				
	k Bus or HazMat	•					1			
NO										
	Vohiolo									
	Vehicle		DI : =			C4	Country			
	License Plate Number		Plate Type		_	St	Country of Is			
	AAJ3442			JTOMOBIL	.E	WI	UNITED ST	AIES		
_	Vehicle Identification Nu		Make	_		Year	Model			
5 3LNHL2GC5AR619969 LINCOLN						2010	MKZ			

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Color	E	Body Style	Bus Use					
		GRY - GRAY		SD - SEDAN						
	쁘	Initial Contact Point	\	Vehicle Damage						
UNIT	≌	11 - LEFT FRONT CORNER Extent Of Damage		5 - ALL AREAS						
n	VEHICL	DISABLING DAMAGE	,	iv neenhenv						
		Towed Due To Damage	\	Vehicle Removed By						
		TOWED DUE TO DISABLING	B DAMAGE F	PETERSON TOWING						
		What Driver Was Doing	\	Vehicle Factors						
		NEGOTIATING CURVE Driver Prior Action Other		NOT APPLICABLE						
		Briver i flor Action Other								
		Driver Actions	L							
	쁘	FAILURE TO CONTROL, RA	N OFF ROADWAY							
UNIT	VEHICL									
ח	世									
		Owner Name		Owner Address S2913 GARNER HILL RD HILLSBORO, WI 54634 , US						
2	2	SCOTT ARLIN JAMISON (608) 475-0139								
		,								
	9	Sequence Of Events								
		Event								
	5	RUN OFF ROADWAY RIGHT								
	05	Event UTILITY POLE								
	03	TRAFFIC SIGN POST								
	9	OVERTURN/ROLLOVER								
╘	ı	Policy Holder								
UNIT		Insurance Company Individual PEKIN-INS-CO SCOTT JAMISON								
				SCOTT JAMISON						
		Individual Driver		Citations Issued	Sex					
		SCOTT ARLIN JAMISON		1	MALE					
	DUAI	(608) 475-0139		Date of Birth	Race					
╘	₫				WHITE					
N N	INDIN	Address S2913 GARNER HILL RD		Driver License Number						
	Z	HILLSBORO, WI 54634 , US		STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sat	On Duty Cr fety Equipment	ash	Safety Equipment						
		Row	Seat Position	SHOULDER & LAP BELT						
		01 - FRONT ROW	07 - LEFT							
		Helmet Use		Helmet Compliance						
		Eye Protection		Tint Compliance						
01	00	Injury Seve	-	Airbag						
	0	7 F 140 711 17	RENT INJURY ection Path	NON DEPLOYED	Trannad/Extricated					
		l '	ection Path OT EJECTED/NOT APPI	LICABLE	Trapped/Extricated NOT TRAPPED					
		Medical Transport		EMS Agency Identifier	EMS Run #					
		NOT TRANSPORTED								

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Hospital			Date of Death		Time of Death					
		Distracted By	Distracted E	By Source LICABLE (NOT DISTRAC	CTED)							
		Distracted By Action NOT DISTRACTED)									
		Non Motorist	Striking Uni	t # Location								
		Prior Action		1								
		Action										
	_											
	JAI											
LIND	INDIVIDUAL											
\supset	DIV											
	Z											
		Action Other						To/From School				
		Drug & Alcohol	Suspected /	Alcohol Use	Suspected Drug Use NO							
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results					
		TEST NOT GIVEN		, , , , , , , , , , , , , , , , , , , ,								
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Type Drug Test Result							
7	001	Drug Type				ı						
J	0											
		Individual Condition										
		APPEARED NORM	IAL									
		Individual										
		Passenger DAVID J JAMISON	ı		Citations Issued Sex							
	AL	(608) 489-4468	l		0 Date of Birth		MALE Race					
_	DO,				Date of Birth		WHITE					
LINO	IDINIDUAL	Address			Driver License Number							
_	IND	S2913 GARNER HI HILLSBORO, WI 54										
			,									
			On Duty Cra	ash	Safety Equipment							
	Sat	fety Equipment										
		Row 02 - SECOND ROW	ı	Seat Position 09 - RIGHT	NONE USED - VEHICLE OCCUPANT							
		Helmet Use			Helmet Compliance							
		Eye Protection			Tint Compliance							
	01		Injury Sever	rity	Airbag							
2	002	I '		RENT INJURY	NON DEPLOYED							
Ejected Ejection Path							Trapped/Extricated					
		NOT EJECTED	N	OT EJECTED/NOT APPL			NOT TRAPPED					
		Medical Transport NOT TRANSPORTI	ED		EMS Agency Identifier		EMS Run #					
		Hospital	_		Date of Death		Time of Death					

WISCONSIN MOTOR VEHICLE CRASH REPORT

		_						, ,		
		Distracted By	Distracted By	Source						
		Distracted By Action								
	,	Non Motorist	Striking Unit	# Location						
		Prior Action		1						
		Action								
	٦L									
LIND	יחם!									
5	INDIVIDUAL									
	Z									
		Action Other						To/From School		
	L	Drug & Alcohol	Suspected Al	conol Use	Suspected Drug Use 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				
5	002	Drug Type								
0	0									
		Individual Condition								
		APPEARED NORMAL								
	ı	Individual								
		Passenger			Citations Issued		Sex			
	٦٢	SHANE A KNAUS (608) 464-7213					MALE			
⊨	INDIVIDUAL	,			Date of Birth Race WHITE		Race WHITE			
LNO	DIV	Address E724 CO HWY Q			Driver License Number					
	Z	WONEWOC, WI 53968 , US								
			On Duty Cras	sh	Safety Equipment					
	Sat	fety Equipment								
		Row 01 - FRONT ROW		Seat Position 09 - RIGHT	SHOULDER & LAP BELT					
		Helmet Use			Helmet Compliance					
		Eye Protection			Tint Compliance					
5	003	Iniury	Injury Severit	y ENT IN HIDV	Airbag NON DEPLOYED					
		Injury NO APPARENT INJURY Ejected Ejection Path			NON DEI EGTED	Trapped/Extricated				
		NOT EJECTED	NO	T EJECTED/NOT APPL			NOT TRAPPED			
		Medical Transport NOT TRANSPORT	ED		EMS Agency Identifier		EMS Run #			
		Hospital	_ -		Date of Death		Time of Death			
		Dietrosta ID	Distracted By	Source						
		Distracted By								

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Crash Date 01/05/2020

Crash Time 07:20 PM

		Distracted By Action								
		Non Motorist	Striking Unit #	Location						
		Prior Action								
	٩L	Action								
NIT	INDIVIDUAL									
	Z									
		Action Other						To/From School		
	ı	Drug & Alcohol No			Suspected Drug Use NO					
		Alcohol Test Given TEST NOT GIVEN	l	Alcohol Test Type	e		Alcohol Test Results			
		Drug Test Given TEST NOT GIVEN	I	Drug Test Type		Drug Test Results	l			
10	003	Drug Type								
		Individual Condition								
	,	APPEARED NORMAL								
	5	Violations UTC Number BB957373	Issue To?	Statute Number 346.57(2)	Description FAILURE TO KEEP	VEHICLE UNDE	R CONTROL			
	Pro	perty Owner		•						
PROP 01	Gove SAU (608	ernment JK COUNTY HWY I B) 356-3855	DEPT		Address 620 STH 136 PO BOX 26 BARABOO, WI 53913	, us				
	Fixe	ed Objects Stru	ıck							
	٤	Ü	ruck Object RAFFIC SIGN I	POST			Structure Number	Damage Tag Number 337846		
	Pro	perty Owner								
PROP OWNER 02		Inization/Company RNON ELECTRIC B) 634-3121			Address 110 SAUGSTAD RD WESTBY, WI 54667,	US				
	Fixe	d Objects Stru	ick							
	05		ruck Object FILITY POLE				Structure Number	Damage Tag Number		