20-05093

WISCONSIN MOTOR VEHICLE CRASH REPORT

	Document Number Override	Primary Crash Document # Agency Crash Number Investigating Officer/Deputy 20-05093 DEPUTY E. KNULL							
Z	Crash Date 05/31/2020	Crash Time 12:30 AM		Date Arrived 05/31/2020			Time Arrived 08:37 AM		
0 I LUD4A4INL	Date Notified 05/31/2020	Time Notified 07:18 AM		Total U 01	nits	Total In 00	jured	Total Kille	d
	On Emergency	and Run	Lane Closu		Work Zone		ailer or 1	Towed	Reporting Threshold
0	Government Property	Active School	I Zone	School NO	Bus Related	Tags			
	Reportable	Crash Type DT4000 (STANDA	RD CRASH)		An	nended		Secondary Crash
	Description							construction	-
						þ	Pho	otos By	
					not to s	cale	Ado NC	ditional Infor DNE	mation
			ddrivew ishnala		2011				
			[]					
	I, a sworn law enforceme	nt officer agree th	at I have no	ot adder	I any CJIS data in th	is report			
	OPERATOR WAS ON DRIVEWAY F INJURIES REPORTED AND VEHICL	OR S2011 ISHNALA RE	O AND DROVE	OFF RIG	HT SIDE OF DRIVEWAY	AND STRU		THAT WAS (CLOSE TO DRIVEWAY. NO

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			-		(608) 356-4895		
Location -							
PRIVATE PROPERTY S2011 ISHNALA RD			Latitude 43.5728218	01	Longitude -89.801094475		
(FIRE S2011)	τον		X Coordinate 273815.125		Y Coordinate 4828241.5		
IN SAUK COUNTY			Structure Typ FIRE	е			
Crash Scene							
First Harmful Event			First Harmful	Event Location			
TREE			ROADSIDE				
Manner of Collision			Light Conditio	n			
00 - NO COLLISION W/	VEHICLE IN TRANSPORT		DARK/UNL	ΙТ			
Road Surface Condition(s)			Roadway Fac	tor(s)			
DRY							
Environment Factor(s)				NONE			
NONE			NONE				
Weather Condition(s)							
CLEAR							
Animal Type			Relation To T	rafficway			
			NON TRAF	FICWAY - PAR	KING LOT		
Crash Classification - Locat	ion		Crash Classifi	Crash Classification - Jurisdiction			
PRIVATE PROPERTY			PRIVATE P	PRIVATE PROPERTY			
Tribal Land			Access Contro	ol	Special Study		
			NO CONTR	OL			
Within Interchange Area	Junction Location		Intersection Type				
NO	NON-JUNCTION		NOT AN INTERSECT	ION			
Unit Summary							
Unit Status		Vehicle Op	perating As Classification	Unit Typ	De		
IN TRANSIT		D CLASS	6	AUTO	MOBILE		
Vehicle Type		I		Operatir	ng As Endorsements		

	Vehicle Type Operating As Endorsements									
01		21	Operating	As Endorsements						
0	(SP	ORT) UTILITY VEHICLE								
	Total	Occs	Train/Bus # Recorded	Total # Citations Issued	Total Tra	ilers	Total HazMat Types			
	3			0	0		0			
	Insur	ance?	Direction Of Travel	Pre CrashTire	Speed Li	mit	Total Lanes			
UNIT	YES NOT ON ROADW		NOT ON ROADWAY	Mark						
	Most	Harmful Event: Collision W	ith	Special Function		0,	Motor Vehicle Use			
	TRE	E		NO SPECIAL FUNCTION		NOT APP	PLICABLE			
	Traff	c Way		Traffic Control		Traffic Con	trol Inoperative/Missing			
	PAR	KING LOT OR PRIVAT	E PROPERTY	NO CONTROL	NO					
	Surfa	асе Туре		Road Curvature		Road Grade				
	BLA	CKTOP (BITUMINOUS))	STRAIGHT	LEVEL					
	Truc	k Bus or HazMat								
	NO									
	Vehicle									
		License Plate Number		Plate Type	St	Country of I				
		AFT7273		AUT - AUTOMOBILE	wi	UNITED STATES				
		Vehicle Identification Numb	ber	Make	Year	Model				
	01	2HNYD18834H535469		ACURA	2004	MDX				
		Color		Body Style	Bus Use					
		RED - RED		UT - SPORT UTILITY VEHI						
	щ	Initial Contact Point		Vehicle Damage						
UNIT	/EHICL	01 - RIGHT FRONT CO	RNER							
5	I	Extent Of Damage		01 - RIGHT FRONT CORNE	ER, 11 - LE	FT FRONT (CORNER, 12 - FRONT			
-	Ч,	DISABLING DAMAGE								

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	Towed Due To Damage		Vehicle Removed By						
	TOWED DUE TO DISABLIN	NG DAMAGE	CRAIGS TOWING						
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors						
	Driver Prior Action Other		NOT APPLICABLE						
	Driver Phot Action Other								
	Driver Actions								
ш	FAILURE TO CONTROL								
느겁									
UNIT									
			1						
	Owner Name TIMOTHY A DEERING		Owner Address E11045 WYNSON						
01	(608) 477-1012		BARABOO, WI 5						
	Sequence Of Events								
	Event								
6	TREE								
02	Event								
0									
03	Event								
	Event								
04									
_	Policy Holder								
UNIT	Insurance Company		Individual						
>	JOHNSEN CENTRAL AGE	NCY	TIMOTHY DEERING						
	Individual								
	Driver		Citations Issued	Sex					
F	ISABEL MARIE DEERING (608) 477-1012		0	FEMALE					
			Date of Birth	Race					
	Address		Driver License Numbe	2r					
	E11045 WYNSONG DR								
≤	BARABOO, WI 53913, US		STATE: WISCONS	SIN COUNTRY: UNITED STATES					
Sa	On Duty C	Crash	Safety Equipment						
04									
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP	FBELI					
	Helmet Use		Helmet Compliance						
	Eye Protection		Tint Compliance						
			A internet						
01	Injury Sev	PARENT INJURY	Airbag DEPLOYED-COME	BINATION					
		Ejection Path		Trapped/Extricated					
		NOT EJECTED/NOT AF	PPLICABLE	NOT TRAPPED					
	Medical Transport		EMS Agency Identifier	r EMS Run #					
	NOT TRANSPORTED								
	Hospital		Date of Death	Time of Death					
	Distracted Du Course								
	Distractor	H By Source							
	Distracted By NOT AP	d By Source PLICABLE (NOT DISTI	RACTED)	·					
	Distracted By Distracted Distracted By Action NOT DISTRACTED	d By Source PLICABLE (NOT DISTI	RACTED)						

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		Non Motorist	Striking Unit #	Location							
		Prior Action									
		Action									
	Ļ										
E	INDIVIDUAL										
UNIT											
	IND										
		Action Other						To/From School			
		Drug & Alcohol	Suspected Alcohol U	se	Suspected Drug Use						
	-	Alcohol Test Given		Alcohol Test Type	-		Alcohol Test Results				
		TEST NOT GIVEN									
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results					
5	001	Drug Type									
	0										
		Individual Condition									
			APPEARED NORMAL								
	ļ	Individual									
	_	Passenger AARON WRAY SWENSON			Citations Issued Sex 0 MALE						
	INDIVIDUAL	(608) 393-6269			Date of Birth Race WHITE						
UNIT	IVIC	Address 421 2ND ST BARABOO, WI 53913 ,US			Driver License Number						
	IN				STATE: WISCONSIN COUNTRY: UNITED STATES						
			On Duty Crash		Orfety Environment						
	Saf	fety Equipment			Safety Equipment						
		Row 01 - FRONT ROW	Seat Po 09 - RI		SHOULDER & LAP	BELT					
		Helmet Use	00 11		Helmet Compliance						
		Eye Protection			Tint Compliance						
			niur Sovority								
2	002	Injury	injury Severity NO APPARENT I	NJURY	Airbag DEPLOYED-COMBINATION						
		Ejected NOT EJECTED	Ejection Pa	th CTED/NOT APP	Trapped/Extrica						
		Medical Transport	NOTEJE		EMS Agency Identifier		NOT TRAPPED EMS Run #				
		NOT TRANSPORTE	ED								
		Hospital			Date of Death		Time of Death				
	ļ	Distracted By	Distracted By Source	•	<u>+</u>						
		Distracted By Action									
			Striking Unit #	Location							
		Non Motorist			rt does not include any C II		0.15	05/31/2020			

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		Prior Action								
Action										
		Action Other							To/From School	
			Suspected	Alcohol	Use	Suspected Drug Use				
	L	Drug & Alcohol	NO		··· · · - · -	NO		1		
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type			Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Result	6		
2	002	Drug Type					<u> </u>			
•	00									
		Individual Condition								
		NOT OBSERVED	NOT OBSERVED							
	I	ndividual								
		Passenger ZOE ELIZABETH DEERING (608) 477-1270 Address			Citations Issued		Sex FEMALE			
	NDIVIDUAL				Date of Birth		Race			
UNIT	IVID				Driver License Number					
	IND	E11045 WYNSONG DR BARABOO, WI 53913 , US				STATE: WISCONSIN COUNTRY: UNITED STATES				
	Saf	ety Equipment	On Duty Cr	ash		Safety Equipment				
	Row Seat Position 02 - SECOND ROW 08 - MIDDLE					SHOULDER & LAP BELT				
		Helmet Use				Helmet Compliance				
		Eye Protection				Tint Compliance				
-	33		Injury Seve	rity		Airbag				
5					INJURY	NON DEPLOYED				
	Ejected Ejection Path NOT EJECTED NOT EJECTED/NOT API					PLICABLE Trapped/Ext				
	Medical Transport NOT TRANSPORTED					EMS Agency Identifier		EMS Run #		
		Hospital				Date of Death		Time of Death		
	Distracted By Source									
		Distracted By Distracted By Action								
		Non Motorist	Striking Uni	t#	Location					
		Prior Action								

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		Action					
	IAL						
UNIT	INDIVIDUAL						
	NDIV						
	-						
		Action Other					To/From School
	Ľ	Suspected Alco Drug & Alcohol NO	phol Use	Suspected Drug Use			
	ĺ	Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	I		Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Result	S	
0	003	Drug Type			ł		
		Individual Condition					
		NOT OBSERVED					