

6TL0CX0Q7F  
21-00094

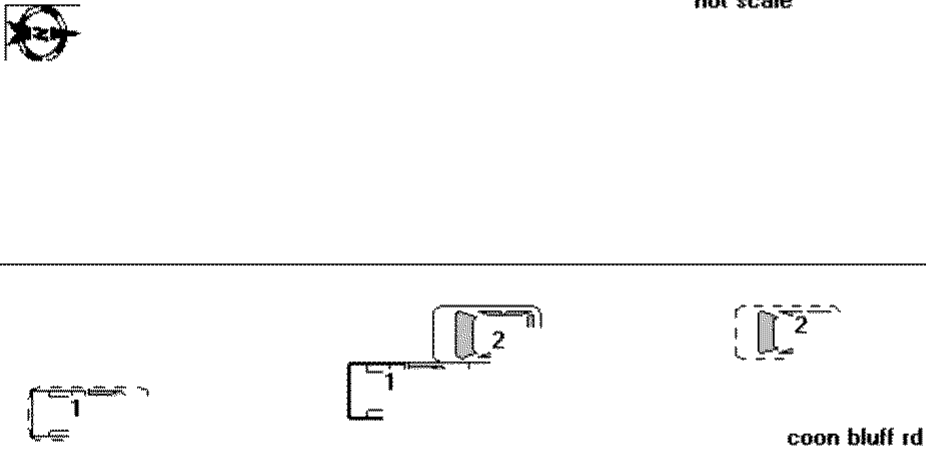
WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

6TL0CX0Q7F

Document Number Override		Primary Crash Document#	Agency Crash Number 21-00094	Investigating Officer/Deputy DEPUTY I. HANSON	
Crash Date 01/03/2021		Crash Time 04:35 PM	Date Arrived 01/03/2021	Time Arrived 04:50 PM	
Date Notified 01/03/2021		Time Notified 04:39 PM	Total Units 02	Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone	<input type="checkbox"/> Trailer or Towed	<input type="checkbox"/> Reporting Threshold
<input type="checkbox"/> Government Property	<input type="checkbox"/> Active School Zone	School Bus Related NO		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram  	Reconstruction By
	Photos By I HANSON
	Additional Information PHOTOS

I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

UNIT 2 WAS SOUTH ON COON BLUFF ROAD. UNIT 2 STATED UNIT 1 WAS TRAVELING LEFT OF CENTER DOWN THE ROAD AND THE DRIVERS SIDE MIRRORS ON EACH VEHICLE STRUCK EACH OTHER. UNIT 2 STOPPED AND UNIT 1 CONTINUED ON. UNIT 1 PULLED INTO THE OFFICE AREA OF CHRISTMAS MOUNTAIN RESORT. UNIT 2 LOCATED UNIT 1 AND CALLED LAW ENFORCEMENT. UNIT 1 STATED THEY WERE NORTH ON COON BLUFF ROAD AND SAID UNIT 2 WAS TO FAR OVER AND STRUCK THEM. UNIT 1 SAYS THEY PULLED INTO CHRISTMAS MOUNTAIN BECAUSE THEY KNEW UNIT 2 WAS FOLLOWING THEM. BOTH PARTIES ARE CLAIMING THE OTHER WAS LEFT OF CENTER. I DID NOT OBSERVE ANY SKID MARKS OR DEBRIS TO DETERMINE PLACEMENT OF THE VEHICLE AT TIME OF IMPACT OF MIRRORS. 9109

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Location

ON COON BLUFF RD 684 FT S OF CHRISTMAS MOUNTAIN RD IN THE TOWN OF DELLONA IN SAUK COUNTY	Latitude 43.610480633	Longitude -89.867780891
	X Coordinate 268574.53125	Y Coordinate 4832608
	Structure Type	

Crash Scene

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>	First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>02 - FRONT TO FRONT</b>	Light Condition <b>DARK/UNLIT</b>	
Road Surface Condition(s) <b>DRY</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>		
Weather Condition(s) <b>CLEAR</b>		
Animal Type	Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>	Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land	Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>

Unit Summary

UNIT 01	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>TRUCK</b>		
	Vehicle Type <b>UTILITY TRUCK/PICKUP TRUCK</b>	Operating As Endorsements			
	Total Occs <b>4</b>	Train/Bus # Recorded	Total # Citations Issued <b>2</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>NO</b>	Direction Of Travel <b>NORTHBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>45</b>	Total Lanes <b>2</b>
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>	Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>	Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>	Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>				

Vehicle

UNIT 01 VEHICLE 01	License Plate Number <b>NH8818</b>	Plate Type <b>LTK - LIGHT TRUCK</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
	Vehicle Identification Number <b>1FTPW14565KE68285</b>	Make <b>FORD</b>	Year <b>2005</b>	Model <b>F150</b>	
	Color <b>GLD - GOLD</b>	Body Style <b>PK - PICKUP</b>		Bus Use	
	Initial Contact Point <b>10 - LEFT SIDE FRONT</b>	Vehicle Damage			
	Extent Of Damage <b>MINOR DAMAGE</b>	<b>10 - LEFT SIDE FRONT</b>			

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1300 LANGE COURT  
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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OWNER</b>		
	What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors		
	Driver Prior Action Other	<b>NOT APPLICABLE</b>		
	Driver Actions <b>UNKNOWN</b>			
01 01	Owner Name <b>AGLIBERTO JARAMILLO OLAYO</b>	Owner Address <b>2469A S 44TH ST #4 MILWAUKEE, WI 53219 , US</b>		
	<b>Sequence Of Events</b>			
01 02 03 04	Event <b>MOTOR VEH IN TRANSPORT</b>			
	Event			
	Event			
	Event			
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>MISAEEL REYES ESCUTIA (262) 202-3798</b>	Citations Issued <b>2</b>	Sex <b>MALE</b>	
	Address <b>8843 N 96TH ST #3 MILWAUKEE, WI 53224 , US</b>	Date of Birth [REDACTED]	Race <b>HISPANIC</b>	
	On Duty Crash	Driver License Number		
01 001	<b>Safety Equipment</b>		Safety Equipment	
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>SHOULDER &amp; LAP BELT</b>	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
01 001	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>	
	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>	
	Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #
	Hospital		Date of Death	Time of Death
01 001	<b>Distracted By</b>			
	Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>			
	Distracted By Action <b>NOT DISTRACTED</b>			
01 001	<b>Non Motorist</b>		Striking Unit #	
	Location			

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT	INDIVIDUAL	Prior Action	
		Action	
		Action Other	To/From School
01	001	<b>Drug &amp; Alcohol</b>	
		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
		Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type
		Alcohol Test Results	
		Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type
		Drug Test Results	
		Drug Type	
Individual Condition <b>APPEARED NORMAL</b>			
UNIT	INDIVIDUAL	<b>Individual</b>	
		Passenger <b>INGRID IVONNE ORTEGA PERALTA</b> (262) 202-3798	Citations Issued <b>0</b>
			Sex <b>FEMALE</b>
			Date of Birth [REDACTED]
			Race <b>HISPANIC</b>
Address <b>8843 N 96TH ST #3</b> <b>MILWAUKEE, WI 53224 , US</b>		Driver License Number	
01	002	<b>Safety Equipment</b>	
		On Duty Crash	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>
		Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</b>
		Helmet Use	Helmet Compliance
		Eye Protection	Tint Compliance
<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>	
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #
Hospital		Date of Death	Time of Death
<b>Distracted By</b>		Distracted By Source	
Distracted By Action			
<b>Non Motorist</b>		Striking Unit #	Location
Prior Action			

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UNIT	INDIVIDUAL	Action			
		Action Other		To/From School	
01	002	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use NO	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	
		Drug Type			
		Individual Condition APPEARED NORMAL			
		<b>Individual</b>			
		Passenger LESLEY RODRIGUEZ (262) 202-3798		Citations Issued 0	Sex FEMALE
		Address 8843 N 96TH ST #3 MILWAUKEE, WI 53224 , US		Date of Birth [REDACTED]	Race HISPANIC
		Driver License Number			
		01	003	<b>Safety Equipment</b>	
Row 02 - SECOND ROW	Seat Position 07 - LEFT			SHOULDER & LAP BELT	
Helmet Use				Helmet Compliance	
Eye Protection				Tint Compliance	
<b>Injury</b>				Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE			Trapped/Extricated NOT TRAPPED	
Medical Transport NOT TRANSPORTED				EMS Agency Identifier	EMS Run #
Hospital				Date of Death	Time of Death
<b>Distracted By</b>				Distracted By Source	
Distracted By Action					
01	003	<b>Non Motorist</b>		Striking Unit #	Location
		Prior Action			

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UNIT	INDIVIDUAL	Action	
		Action Other	To/From School
01	003	<b>Drug &amp; Alcohol</b>	
		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
		Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type
		Alcohol Test Results	
		Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type
		Drug Test Results	
		Drug Type	
		Individual Condition <b>APPEARED NORMAL</b>	
UNIT	INDIVIDUAL	<b>Individual</b>	
		Passenger <b>IAN ORTEGA RODRIGUEZ</b> (262) 202-3798	Citations Issued <b>0</b>
			Sex <b>MALE</b>
			Date of Birth [REDACTED]
			Race <b>HISPANIC</b>
	Address <b>8843 N 96TH ST #3</b> <b>MILWAUKEE, WI 53224 , US</b>	Driver License Number	
01	004	<b>Safety Equipment</b>	
		On Duty Crash	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>
		Row <b>02 - SECOND ROW</b>	Seat Position <b>09 - RIGHT</b>
		Helmet Use	Helmet Compliance
		Eye Protection	Tint Compliance
	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
	Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier	EMS Run #
	Hospital	Date of Death	Time of Death
	<b>Distracted By</b>		
	Distracted By Source		
	Distracted By Action		
	<b>Non-Motorist</b>		
	Striking Unit #	Location	
	Prior Action		

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UNIT INDIVIDUAL
Action
Action Other To/From School
Drug & Alcohol Suspected Alcohol Use Suspected Drug Use
Alcohol Test Given Alcohol Test Type Alcohol Test Results
Drug Test Given Drug Test Type Drug Test Results
Drug Type
Individual Condition
Violations
UTC Number Issue To? Statute Number Description
BG022581 001 343.05(3)(a) OPERATE W/O VALID LICENSE (1ST VIOLATION)
BG022582 001 344.62(1) OPERATE MOTOR VEHICLE W/O INSURANCE

Unit Summary

UNIT 02
Unit Status Vehicle Operating As Classification Unit Type
IN TRANSIT D CLASS AUTOMOBILE
Vehicle Type Operating As Endorsements
(SPORT) UTILITY VEHICLE
Total Occs Train/Bus # Recorded Total # Citations Issued Total Trailers Total HazMat Types
4 0 0 0 0
Insurance? Direction Of Travel Pre Crash Tire Mark Speed Limit Total Lanes
YES SOUTHBOUND 45 2
Most Harmful Event: Collision With Special Function Emergency Motor Vehicle Use
MOTOR VEH IN TRANSPORT NO SPECIAL FUNCTION NOT APPLICABLE
Traffic Way Traffic Control Traffic Control Inoperative/Missing
TWO-WAY, NOT DIVIDED NO CONTROL NO
Surface Type Road Curvature Road Grade
BLACKTOP (BITUMINOUS) STRAIGHT LEVEL
Truck Bus or HazMat
NO

UNIT 02 VEHICLE
Vehicle
License Plate Number Plate Type St Country of Issuance
ZU47377 AUT - AUTOMOBILE IL UNITED STATES
Vehicle Identification Number Make Year Model
5TDJW5G13DS081657 TOYOTA 2013 UTILITY
Color Body Style Bus Use
MAR - MAROON (BURGUNDY) 4D - 4DR
Initial Contact Point Vehicle Damage
10 - LEFT SIDE FRONT 10 - LEFT SIDE FRONT
Extent Of Damage
MINOR DAMAGE

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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OWNER</b>	
	What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors	
	Driver Prior Action Other	<b>NOT APPLICABLE</b>	
	Driver Actions <b>UNKNOWN</b>		
02	Owner Name <b>YURIY SKUBA (773) 727-2250</b>		Owner Address <b>1301 REGENT DR MUNDELEIN, IL 60060 , US</b>
	<b>Sequence Of Events</b>		
01	Event <b>MOTOR VEH IN TRANSPORT</b>		
	Event		
	Event		
	Event		
02	<b>Policy Holder</b>		
	Insurance Company <b>ERIE-INS-CO</b>	Individual <b>YURIY SKUBA</b>	
03	<b>Individual</b>		
	Driver <b>YURIY SKUBA (773) 727-2250</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>
		Date of Birth [REDACTED]	Race
	Address <b>1301 REGENT DR MUNDELEIN, IL 60060 , US</b>	Driver License Number [REDACTED] <b>STATE: ILLINOIS COUNTRY: UNITED STATES</b>	
04	<b>Safety Equipment</b>		On Duty Crash
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	<b>Injury</b>		Airbag
05	<b>NO APPARENT INJURY</b>		<b>NON DEPLOYED</b>
	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
	Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier
	Hospital		EMS Run #
	Date of Death		Time of Death
02	<b>Distracted By</b>		
	Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>		
Distracted By Action <b>NOT DISTRACTED</b>			



WISCONSIN MOTOR VEHICLE CRASH REPORT

UNIT	INDIVIDUAL	<b>Non Motorist</b>		Striking Unit#	Location		
		Prior Action					
		Action					
02	005	Action Other				To/From School	
		<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use NO	Suspected Drug Use NO		
		Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type		Alcohol Test Results	
		Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type		Drug Test Results	
		Drug Type					
		Individual Condition <b>APPEARED NORMAL</b>					
		<b>Individual</b>					
		Passenger <b>NATALIA KLEVCHUK</b> (773) 727-2250			Citations Issued <b>0</b>		Sex <b>FEMALE</b>
		Address <b>1301 REGENT DR</b> <b>MUNDELEIN, IL 60060 , US</b>			Date of Birth [REDACTED]		Race
		Driver License Number <b>STATE: ILLINOIS COUNTRY: UNITED STATES</b>					
02	006	<b>Safety Equipment</b>		On Duty Crash		Safety Equipment	
		Row <b>01 - FRONT ROW</b>		Seat Position <b>09 - RIGHT</b>		<b>SHOULDER &amp; LAP BELT</b>	
		Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
		<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>		Airbag <b>NON DEPLOYED</b>	
		Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</b>	
Medical Transport <b>NOT TRANSPORTED</b>			EMS Agency Identifier		EMS Run#		
Hospital			Date of Death		Time of Death		
<b>Distracted By</b>							
Distracted By Source							
Distracted By Action							
<b>Non Motorist</b>		Striking Unit#	Location				

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT INDIVIDUAL	Prior Action		
	Action		
	Action Other		To/From School
02 006	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use NO	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
	Drug Type		
	Individual Condition APPEARED NORMAL		
UNIT INDIVIDUAL	<b>Individual</b>		
	Passenger ANDREW SKUBA (773) 727-2250	Citations Issued 0	Sex MALE
	Date of Birth [REDACTED]	Race WHITE	
	Address 1301 REGENT DR MUNDELEIN, IL 60060 , US	Driver License Number	
02 007	<b>Safety Equipment</b>	On Duty Crash	Safety Equipment CHILD RESTRAINT SYSTEM - FORWARD FACING
	Row 02 - SECOND ROW	Seat Position 08 - MIDDLE	CHILD RESTRAINT SYSTEM - FORWARD FACING
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	<b>Injury</b>	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED	
Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #
Hospital		Date of Death	Time of Death
<b>Distracted By</b>	Distracted By Source		
Distracted By Action			
<b>Non-Motorist</b>	Striking Unit #	Location	
Prior Action			

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UNIT	INDIVIDUAL	Action			
		Action Other		To/From School	
02	007	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use NO	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	
		Drug Type			
		Individual Condition APPEARED NORMAL			
		<b>Individual</b>			
		Passenger ARSEN SKUBA (773) 727-2250	Citations Issued 0	Sex MALE	
		Address 1301 REGENT DR MUDELEIN, IL 60060 , US	Date of Birth [REDACTED]	Race WHITE	
		Driver License Number			
		02	008	<b>Safety Equipment</b>	On Duty Crash
Row 02 - SECOND ROW	Seat Position 09 - RIGHT			CHILD RESTRAINT SYSTEM - FORWARD FACING	
Helmet Use	Helmet Compliance				
Eye Protection	Tint Compliance				
<b>Injury</b>	Injury Severity NO APPARENT INJURY			Airbag NON DEPLOYED	
Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE			Trapped/Extricated NOT TRAPPED	
Medical Transport NOT TRANSPORTED	EMS Agency Identifier			EMS Run #	
Hospital	Date of Death			Time of Death	
<b>Distracted By</b>	Distracted By Source				
Distracted By Action					
<b>Non Motorist</b>	Striking Unit #	Location			
Prior Action					

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UNIT INDIVIDUAL          02 008	Action		
	Action Other		To/From School
	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
	Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results
	Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results
	Drug Type		
	Individual Condition <b>APPEARED NORMAL</b>		