WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| Document Number Override | e Primary Crash E | Primary Crash Document# | | Agency Crash Number 21-05575 | | Investigating Officer/Deputy DEPUTY T. CLAUER | | | |
|--|---------------------------|---|-------------------------|---------------------------------|-----------------------|---|----------|----------------------|--|
| Crash Date 06/19/2021 | Crash Time 09:45 PM | | Date Arrived 06/19/2021 | | Time Arrived 10:40 PM | | | | |
| Date Notified 06/19/2021 | Time Notified 09:59 PM | Time Notified 09:59 PM | | Total Units | | Total Injured Total Kille 00 00 | | id | |
| On Emergency | Hit and Run | t and Run Lane Closu | | | | Trailer or Towed | | Reporting Threshold | |
| Government Property | Active Sc | Crash Type DT4000 (STANDARD CRASH) School Bus Related NO | | | Tags | | | | |
| Reportable | Crash Type DT4000 (STA | | | | Amend | led | | Secondary Crash | |
| Diagram Diagram | | | | | | Reconstruction By | | | |
| Diagram | | | | | | 3,60013 | 5000001 | Зу | |
| | | | | | | | | | |
| | | | | | | Photos | вВу | | |
| | | | | | | | | | |
| | | | | | | | nalInfor | mation | |
| | | | | | | NONE | • | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| l, a sworn law enfo | rcement officer, agr | ee that I have not | t added a | ny CJIS data in ti | nis report. | | | | |
| ON 06-19-2021 I WAS DISPA WAS IN THE ROADWAY AN | | | | | | | | | |
| DRIVEABLE. NO INJURIES. | | | | | | | | | |

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/19/2021

| | Location | | | | | | | | |
|---------|--|-------------------------|--|---------------------------|--|--|--|-------------|--|
| | ON USH12 EB | | | Latitude | | | Longitude | | |
| | 577 FT N | 43.548 | 43.548586194 | | -89.7873 | -89.787301153 | | | |
| | OF SHADY LANE RD IN THE TOWN OF DELT IN SAUK COUNTY | | X Coordinate 274838.65625 | | | Y Coordinate 4825512 | | | |
| | M DADIC CODE 1 | | Structure Type NO STRUCTURE | | | | | | |
| | Crash Scene | | | ' | | | | | |
| | First Harmful Event | | | T : | rmful Event L | | | | |
| | OTHER OBJECT - NOT | | | ocation | | | | | |
| | Manner of Collision | | ON ROADWAY Light Condition | | | | | | |
| | 00 - NO COLLISION W/V | DARK/ | UNLIT | | | | | | |
| | Road Surface Condition(s) | | | Roadwa | y Factor(s) | | | | |
| | DRY | | | | | | | | |
| | Environment Factor(s) | | | | | | | | |
| | NONE | | | NONE | | | | | |
| | Weather Condition(s) | | | | | | | | |
| | CLEAR | | | | | | | | |
| | AnimalType | | | | To Trafficwa | • | | | |
| | Crash Classification - Locate | מה | | | | | | | |
| | PUBLIC PROPERTY | | | | Crash Classification - Jurisdiction NO SPECIAL JURISDICTION | | | | |
| | Tribal Land Within Interchange Area Junction Location NO NON-JUNCTION NOT AN I | | | | Access Control Special Study FULL CONTROL | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | Unit Summary - | | | | | | | | |
| | Unit Status | | Vehicle Ope | erating As Classification | on | Unit Type | | | |
| | IN TRANSIT | | D CLASS | | AUTOMOBILE | | | | |
| 1 | Vehicle Type | | | | Operating As Endorsements | | | | |
| 0 | PASSENGER CAR | PASSENGER CAR | | | | | | | |
| | Total Occs Train/Bus#Recorded 02 | | Total#Citat | ions Issued | Total Trailers 0 | | Total HazMat Types 0 | | |
| | Insurance? | Direction Of Travel | Pre | CrashTire | Speed Lim | | TotalLane | s | |
| ⊨ | YES | EASTBOUND | | Mark | | | 04 | | |
| L L | Most Harmful Event: Collisio OTHER OBJECT - NOT | | Special Fun NO SPECI | ction IAL FUNCTION | | | Emergency Motor Vehicle Use NOT APPLICABLE | | |
| | Traffic Way | | Traffic Cont | rol | | | Traffic Control Inoperative/Missing | | |
| | | | | | | МО | | | |
| | DIVIDED HWY W/O TRA | FFIC BARRIER | NO CONT | ROL | | NO | | | |
| | Surface Type | FFIC BARRIER | Road Curva | ture | | Road Grade | 9 | | |
| | | FFIC BARRIER | | ture | | | e | | |
| | Surface Type | FFIC BARRIER | Road Curva | ture | | Road Grade | e | | |
| | Surface Type CONCRETE Truck Bus or HazMat NO | FFIC BARRIER | Road Curva | ture | | Road Grade | 9 | | |
| | Surface Type CONCRETE Truck Bus or HazMat NO Vehicle | FFIC BARRIER | Road Curva STRAIGH | ture T | Secretarian III | Road Grade | | | |
| | Surface Type CONCRETE Truck Bus or HazMat NO Vehicle License Plate Number | FFIC BARRIER | Road Curva STRAIGH | ture T | St | Road Grade LEVEL Country of Is | ssuance | | |
| | Surface Type CONCRETE Truck Bus or HazMat NO Vehicle License Plate Number ABA8466 | | Road Curva STRAIGH* Plate Type AUT - AU | ture T | WI | Road Grade LEVEL Country of Is UNITED S | ssuance | | |
| 01 | Surface Type CONCRETE Truck Bus or HazMat NO Vehicle License Plate Number ABA8466 Vehicle Identification N | Jumber | Road Curva STRAIGH* Plate Type AUT - AU Make | ture T | WI Year | Road Grade LEVEL Country of Is UNITED S | ssuance | | |
| 01 | Surface Type CONCRETE Truck Bus or HazMat NO Vehicle License Plate Number ABA8466 Vehicle Identification N 5NPE24AF8FH2000 | Jumber | Plate Type AUT - AU Make HYUNDA | TOMOBILE | WI | Country of Is UNITED S' Model SONATA | ssuance | | |
| 10 | Surface Type CONCRETE Truck Bus or HazMat NO Vehicle License Plate Number ABA8466 Vehicle Identification N | lumber 615 | Road Curva STRAIGH* Plate Type AUT - AU Make | TOMOBILE | WI Year | Road Grade LEVEL Country of Is UNITED S | ssuance | | |
| | Surface Type CONCRETE Truck Bus or HazMat NO Vehicle License Plate Number ABA8466 Vehicle Identification N 5NPE24AF8FH2006 Color Sit - SitVER (ALUI | lumber 615 | Plate Type AUT - AU Make HYUNDA | TOMOBILE | WI Year | Country of Is UNITED S' Model SONATA | ssuance | | |
| UNIT 01 | Surface Type CONCRETE Truck Bus or HazMat NO Vehicle License Plate Number ABA8466 Vehicle Identification N 5NPE24AF8FH2000 Color SiL - SiLVER (ALUI | Jumber 615 MINUM) | Plate Type AUT - AU Make HYUNDA Body Style 4D - 4DR Vehicle Da | TOMOBILE | WI Year 2015 | Country of Is UNITED S' Model SONATA Bus Use | ssuance TATES | | |

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/19/2021

| | | Towed Due To Damage NOT TOWED | | Vehicle Removed By | | | | |
|----------|--------------------------------------|--|--|---|--|--|--|--|
| | What Driver Was Doing GOING STRAIGHT | | | Vehicle Factors | | | | |
| | | | | | | | | |
| | | Driver Prior Action Other | | NOT APPLICABLE | | | | |
| TINO | VEHICLE | Driver Actions NO CONTRIBUTING ACT | ON | | | | | |
| 5 | 0.1 | OwnerName SHELBY J NORTHCUTT (608) 477-5400 | | Owner Address 85C GRAND CANYON DR APT 209 BARABOO, WI 53913 , US | 5 | | | |
| | | l Sequence:oli⊃vents: | | | | | | |
| | 8 | Event OTHER OBJECT - NOT FI | XED | | | | | |
| | 20 | Event | | | | | | |
| | 03 | Event | | | | | | |
| | 94 | Event | | | | | | |
| _ | | Policy Holder | | | | | | |
| HN | | Insurance Company PROGRESSIVE-CASUAL TY-INS-CO | | Individual SHELBY NORTHCUTT | | | | |
| | | projection | | | | | | |
| | | Individual | | | | | | |
| | | individual Driver | | | l Sex | | | |
| | | Driver CHRISTOPHER COTE MA | | Citations Issued | Sex MALE | | | |
| <u>_</u> | | Driver | | Citations Issued | Sex | | | |
| LINO | INDIVIDUAL | Driver CHRISTOPHER COTE MA | APT 205 | Citations issued 0 | Sex MALE Race WHITE | | | |
| LIND | INDIVIDUAL | Address 85C GRAND CANYON DR BARABOO, WI 53913, US | APT 205 S | Citations Issued 0 Date of Birth Driver License Number | Sex MALE Race WHITE | | | |
| HNO | INDIVIDUAL | Driver CHRISTOPHER COTE MA (608) 477-5400 Address 85C GRAND CANYON DR BARABOO, WI 53913 , US | APT 205 S | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN | Sex MALE Race WHITE | | | |
| LIND | INDIVIDUAL | Driver CHRISTOPHER COTE MA (608) 477-5400 Address 85C GRAND CANYON DR BARABOO, WI 53913 , US On Duty Row | APT 205 S Crash Seat Position | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment | Sex MALE Race WHITE | | | |
| LIND | INDIVIDUAL | Driver CHRISTOPHER COTE MA (608) 477-5400 Address 85C GRAND CANYON DR BARABOO, WI 53913 , US Fety Equipment Row 01 - FRONT ROW | APT 205 S Crash Seat Position | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT | Sex MALE Race WHITE | | | |
| | e INDIVIDUAL | Driver CHRISTOPHER COTE MA (608) 477-5400 Address 85C GRAND CANYON DR BARABOO, WI 53913 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection | APT 205 S Crash Seat Position 07 - LEFT | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance | Sex MALE Race WHITE | | | |
| | INDIVIDUAL | Driver CHRISTOPHER COTE MA (608) 477-5400 Address 85C GRAND CANYON DR BARABOO, WI 53913 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection | APT 205 S Crash SeatPosition 07 - LEFT | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance | Sex MALE Race WHITE | | | |
| | e INDIVIDUAL | Driver CHRISTOPHER COTE MA (608) 477-5400 Address 85C GRAND CANYON DR BARABOO, WI 53913 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection | APT 205 S Crash Seat Position 07 - LEFT | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag NON DEPLOYED | Sex MALE Race WHITE | | | |
| | g INDIVIDUAL | Driver CHRISTOPHER COTE MA (608) 477-5400 Address 85C GRAND CANYON DR BARABOO, WI 53913 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Se NO API Ejected NOT EJECTED Medical Transport | APT 205 S Crash Seat Position 07 - LEFT Everity PARENT INJURY Ejection Path | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag NON DEPLOYED | Sex MALE Race WHITE SITED STATES Trapped/Extricated | | | |
| | g INDIVIDUAL | Driver CHRISTOPHER COTE MA (608) 477-5400 Address 85C GRAND CANYON DR BARABOO, WI 53913 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Se NO API Ejected NOT EJECTED | APT 205 S Crash Seat Position 07 - LEFT Everity PARENT INJURY Ejection Path | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED | Sex MALE Race WHITE SITED STATES Trapped/Extricated NOT TRAPPED | | | |
| | g INDIVIDUAL | Driver CHRISTOPHER COTE MA (608) 477-5400 Address 85C GRAND CANYON DR BARABOO, WI 53913 , US Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Se NO API Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital | APT 205 S Crash Seat Position 07 - LEFT Everity PARENT INJURY Ejection Path NOT EJECTED/NOT API | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier Date of Death | Sex MALE Race WHITE SITED STATES Trapped/Extricated NOT TRAPPED EMS Run# | | | |
| | g INDIVIDUAL | Driver CHRISTOPHER COTE MA (608) 477-5400 Address 85C GRAND CANYON DR BARABOO, WI 53913 , US On Duty On Duty On Duty On Duty On Duty On Duty On API Ejected NOT - FRONT ROW Injury Se NO API Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital | APT 205 S Crash Seat Position 07 - LEFT Everity PARENT INJURY Ejection Path NOT EJECTED/NOT API | Citations Issued 0 Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UN Safety Equipment SHOULDER & LAP BELT Helmet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier Date of Death | Sex MALE Race WHITE SITED STATES Trapped/Extricated NOT TRAPPED EMS Run# | | | |

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | | Non Motorist | Unit# | Location | | | | | |
|-------|------------|---|---------------|-------------------|---|-------------------|--------------------------------|----------------|--|
| | | Prior Action | | <u> </u> | | | | | |
| | | Action | | | | | | | |
| | | | | | | | | | |
| _ | INDIVIDUAL | | | | | | | | |
| TINO. | 3 | | | | | | | | |
| _ | 2 | | | | | | | | |
| | | | | | | | | | |
| | | Action Other | | | | | | To/From School | |
| | | Suspec | ted Alcohol t | jse | Suspected Drug Use | | | | |
| | 1 | Drug & Alcohol NO | | I | NO | | I | | |
| | | AlcoholTestGiven AlcoholTestTyp TEST NOT GIVEN | | Alconol Fest Type | 9 | | Alcohol Test Results | | |
| | | Drug Test Given TEST NOT GIVEN | | Drug Test Type | | Drug Test Results | | | |
| 01 | 8 | <u> </u> | | 1 | | | | | |
| | 0 | | | | | | | | |
| | | Individual Condition | | | | | | | |
| | | APPEARED NORMAL | | | | | | | |
| | | ndividual | | | | | | | |
| | | Passenger SHELBY JANE NORTHCL | JTT | | Citations Issued 0 | | Sex FEMALE | | |
| | INDINIDUAI | (608) 477-8177 R | | | Date of Birth | | Race WHITE | | |
| N N | | Address | | | Driver License Number | | | | |
| | Z | 85C GRAND CANYON DR BARABOO, WI 53913 , U | | | STATE: WISCONSIN COUNTRY: UNITED STATES | | | | |
| | | O- B. b. | Cuaria | | Defeate Feet insect | | | | |
| | Sai | Ол Duty Crash afety Equipment | | | Safety Equipment | | | | |
| | | | | | SHOULDER & LAP BELT | | | | |
| | | HelmetUse | | | Helmet Compliance | | | | |
| | | Eye Protection | | | Tint Compliance | | | | |
| _ | N | Injury Se | everity | | Airbag | | | | |
| 2 | 280 | 6:50:11111111111111111111111111111111111 | | | NON DEPLOYED | | | | |
| | | Ejected Ejection Path NOT EJECTED NOT EJECTED/NOT APP | | | LICABLE | | Trapped/Extricated NOT TRAPPED | | |
| | | Medical Transport NOT TRANSPORTED | | | EMS Agency Identifier | | EMS Run# | | |
| | | Hospital | | | Date of Death | | Time of Death | | |
| | | Distract | ed By Sourc |) | | | | | |
| | | Distracted By | | | | | | | |
| | | Distracted By Action | | | | | | | |
| | | Non Motorist | Unit# | Location | | | | | |

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/19/2021

| | | Prior Action | | | | | |
|------|------------|--------------------------------|-------------------|--------------------------|-------------------|----------------------|----------------|
| | | Action | | | | | |
| | 뒿 | | | | | | |
| UNIT | INDIVIDUAL | | | | | | |
| 5 | 20 | | | | | | |
| | 2 | | | | | | |
| | | | | | | | |
| | | Action Other | | | | | To/From School |
| | | | | | | | |
| | L | Drug & 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 Results | 3 | |
| 01 | 002 | Drug Type | • | | | | |
| | ٠ | | | | | | |
| | | Individual Condition | | | | | |
| | | APPEARED NORMAL | | | | | |
| l | | | | | | | |