24-06167

WISCONSIN MOTOR VEHICLE CRASH REPORT

	Document Number Override 6TL0BJ1GPL	Primary Crash Document #	Agency 24-061	r Crash Number 167		Officer/Deputy MACASKILL	<u>.</u>	
ЪG	Crash Date 06/13/2024	Crash Time 12:10 PM		Date Arrived 06/13/2024		Time Arrived 12:24 PM		
Τ5	Date Notified 06/13/2024	Time Notified 12:12 PM	Total U 02	Total Units		Total Kille 00	d	
6TL0DDT5PG			e Closure	Work Zone	02	or Towed	Reporting Threshold	
6TL	Government Property	Active School Zone	e School	Bus Related	Tags			
	✓ Reportable	Crash Type DT4000 (STANDARD C	RASH)		✓ Amende	əd	Secondary Crash	
	Description						-	
	Diagram					Reconstruction	Ву	
	*				-	Photos By		
	Prairie Rd Prairie Rd				EUS 12	Additional Infor	mation	
				ot Drawn to				
	✔ I, a sworn law enforceme							
	ON 6/13/24 AT APPROXIMATELY 12 EASTBOUND ONTO CTH Z. OPERA TRAFFIC ON USH 12. UNIT 1 TURN STRICK UNIT 1.	TOR OF UNIT 1 STATED THE	ERE WAS A TRU	CK IN THE NORTHBOUN	ID TURN LANE BLO	OCKING THEIR	VIEW OF NORTHBOUND	
:	PROPERTY OWNER INFORMATION							

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Loc	ation									
	USH12 EB				Latitude			Longitud	le	
-	FTS	43.314549143			•	089925				
OF	USH12 EB		X Coordinate			Y Coord				
	THE TOWN OF PRAIR	276256.4			479944					
IN S	SAUK COUNTY					4/3344	10			
					Structure NO STR	UCTURE				
Cra	sh Scene									
	t Harmful Event				First Harm	nful Event L	ocation			
мо	TOR VEH IN TRANSP	ORT			ON ROA		oodion			
	ner of Collision				Light Con					
01	- ANGLE				DAYLIG					
Roa	d Surface Condition(s)				Roadway	Factor(s)				
DR	Y									
Env	ironment Factor(s)				-					
NO	NE				NONE					
Wea	ather Condition(s)				-					
CLI	EAR									
Anir	mal Type					o Trafficwa				
						CWAY - O	-			
	sh Classification - Location		Crash Classification - Jurisdiction							
-	BLIC PROPERTY		NO SPECIAL JURIS							
Tribal Land					Access Co NO CON				Special Study	
With	nin Interchange Area		Intersection Type							
NO	=	INTERSECTION				RSECTION	1			
Uni	it Summary	l								
	Status		Vehicle Ope	erating As C	g As Classification Unit Type					
IN T	FRANSIT		D CLASS	D CLASS			AUTOMOBILE			
Veh	icle Type		•	L			Operating As Endorsements			
PA	SSENGER CAR									
Tota	al Occs	Train/Bus # Recorded	Total # Cita	Total # Citations Issued Total Trail			ailers Total HazMat Types		Mat Types	
1			1 Pre CrashTire		0 e Speed Lim			0		
Insu	irance?	Direction Of Travel					nit	Total Lan	es	
YE	S	EASTBOUND		Mark		55			2	
	t Harmful Event: Collision		Special Fun							
	TOR VEH IN TRANSP	ORT	NO SPEC	IAL FUNC						
	fic Way			Traffic Control			Traffic Control Inoperative/Missing		tive/Missing	
	IDED HWY W/O TRAF	FIC BARRIER		STOP SIGN			NO			
	face Type	10)	Road Curva				Road Grade	9		
		3)	STRAIGH	1			LEVEL			
Truo NO	ck Bus or HazMat									
	Vehicle									
	License Plate Number		Plate Type	;		St	Country of Is	suance		
	ALP2125		AUT - AU	JTOMOBIL	.E	-		TATES		
	Vehicle Identification Nu	mber	Make			Year	Model			
0	5FNYF6H56MB0067		HONDA				PILOT			
			Body Style)		1	PILOT Bus Use			
				UT - SPORT UTILITY VEHICLE						
	WHI - WHITE		UT - SPC	ORT UTILIT	TY VEHIC	LE				
			UT - SPC		TY VEHIC	LE				
						IF				

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WISCONSIN MOTOR VEHICLE CRASH REPORT

	щ			Vehicle Damage						
E	5						7 8 9 10 11			
UNIT	VEHICLE	Extent Of Damage		01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE 6 12 FRONT, 03 - RIGHT SIDE MIDDLE 5 4 3 2 1						
-	ÿ	DISABLING DAMAGE								
İ 🗌		Towed Due To Damage		Vehicle Removed By	Vehicle Removed By					
		TOWED DUE TO DISABLIN	NG DAMAGE	EVERETTS TOWIN	G					
		What Driver Was Doing		Vehicle Factors						
		LEFT TURN								
		Driver Prior Action Other		NOT APPLICABLE						
		Driver Actions FAILED TO YIELD RIGHT-								
L_	Щ		OF-WAT, LOOKED BU	IT DID NOT SEE						
UNIT	<u>ຍ</u>									
5	VEHICL									
	>									
		Owner Name		Owner Address						
		STEPHANIE ZULKOSKI		4385 SINGEL W	AY					
2	0	(608) 216-6754		DEFOREST, WI	53532 , US					
		Saguanaa Of Evanta								
	•	Sequence Of Events Event								
	0	LEFT TURN								
		Event								
	02	MOTOR VEH IN TRANSPO	RT							
		Event								
	03									
		Event								
	04									
	1	Policy Holder								
I Ş										
		Insurance Company		Individual						
UNIT		Insurance Company STATE-FARM-GENERAL-II	NS-CO	Individual STEPHANIE ZUL	KOSKI					
5		STATE-FARM-GENERAL-I	NS-CO		KOSKI					
5	I	STATE-FARM-GENERAL-II	NS-CO	STEPHANIE ZUL						
5		STATE-FARM-GENERAL-I	NS-CO	Citations Issued	Sex					
5		STATE-FARM-GENERAL-II Individual Driver	NS-CO	Citations Issued	Sex FEMALE					
		STATE-FARM-GENERAL-II Individual Driver STEPHANIE ZULKOSKI	NS-CO	Citations Issued	Sex					
		STATE-FARM-GENERAL-II Individual Driver STEPHANIE ZULKOSKI	NS-CO	Citations Issued	Sex FEMALE Race WHITE					
UNIT	IDIVIDUAL	STATE-FARM-GENERAL-II Individual Driver STEPHANIE ZULKOSKI (608) 216-6754 Address 4385 SINGEL WAY		Citations Issued 1 Date of Birth Driver License Numb	Sex FEMALE Race WHITE					
		STATE-FARM-GENERAL-II Individual Driver STEPHANIE ZULKOSKI (608) 216-6754 Address		Citations Issued 1 Date of Birth Driver License Numb	Sex FEMALE Race WHITE	ED STATES				
	IDIVIDUAL	STATE-FARM-GENERAL-II Individual Driver STEPHANIE ZULKOSKI (608) 216-6754 Address 4385 SINGEL WAY		Citations Issued 1 Date of Birth Driver License Numb	Sex FEMALE Race WHITE	ED STATES				
	INDIVIDUAL	STATE-FARM-GENERAL-II Individual Driver STEPHANIE ZULKOSKI (608) 216-6754 Address 4385 SINGEL WAY DEFOREST, WI 53532, US	3	Citations Issued 1 Date of Birth Driver License Numb	Sex FEMALE Race WHITE	ED STATES				
	INDIVIDUAL	STATE-FARM-GENERAL-II Individual Driver STEPHANIE ZULKOSKI (608) 216-6754 Address 4385 SINGEL WAY DEFOREST, WI 53532 , US	3	STEPHANIE ZUL Citations Issued 1 Date of Birth Driver License Numb STATE: WISCONS Safety Equipment	Sex FEMALE Race WHITE Per SIN COUNTRY: UNIT	ED STATES				
	INDIVIDUAL	STATE-FARM-GENERAL-II Individual Driver STEPHANIE ZULKOSKI (608) 216-6754 Address 4385 SINGEL WAY DEFOREST, WI 53532 , US fety Equipment	Scrash Seat Position	Citations Issued 1 Date of Birth Driver License Numb STATE: WISCONS	Sex FEMALE Race WHITE Per SIN COUNTRY: UNIT	ED STATES				
	INDIVIDUAL	STATE-FARM-GENERAL-II Individual Driver STEPHANIE ZULKOSKI (608) 216-6754 Address 4385 SINGEL WAY DEFOREST, WI 53532 , US fety Equipment Row 01 - FRONT ROW	S Crash	STEPHANIE ZUL Citations Issued 1 Date of Birth Driver License Numt STATE: WISCONS Safety Equipment SHOULDER & LA	Sex FEMALE Race WHITE Per SIN COUNTRY: UNIT	ED STATES				
	INDIVIDUAL	STATE-FARM-GENERAL-II Individual Driver STEPHANIE ZULKOSKI (608) 216-6754 Address 4385 SINGEL WAY DEFOREST, WI 53532 , US fety Equipment	Scrash Seat Position	STEPHANIE ZUL Citations Issued 1 Date of Birth Driver License Numb STATE: WISCONS Safety Equipment	Sex FEMALE Race WHITE Per SIN COUNTRY: UNIT	ED STATES				
	INDIVIDUAL	STATE-FARM-GENERAL-II Individual Driver STEPHANIE ZULKOSKI (608) 216-6754 Address 4385 SINGEL WAY DEFOREST, WI 53532 , US fety Equipment Row 01 - FRONT ROW Helmet Use	Scrash Seat Position	STEPHANIE ZUL Citations Issued 1 Date of Birth Driver License Numb STATE: WISCONS Safety Equipment SHOULDER & LA Helmet Compliance	Sex FEMALE Race WHITE Per SIN COUNTRY: UNIT	ED STATES				
	INDIVIDUAL	STATE-FARM-GENERAL-II Individual Driver STEPHANIE ZULKOSKI (608) 216-6754 Address 4385 SINGEL WAY DEFOREST, WI 53532 , US fety Equipment Row 01 - FRONT ROW	Scrash Seat Position	STEPHANIE ZUL Citations Issued 1 Date of Birth Driver License Numt STATE: WISCONS Safety Equipment SHOULDER & LA	Sex FEMALE Race WHITE Per SIN COUNTRY: UNIT	ED STATES				
UNIT		STATE-FARM-GENERAL-II Individual Driver STEPHANIE ZULKOSKI (608) 216-6754 Address 4385 SINGEL WAY DEFOREST, WI 53532, US fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection	S Crash Seat Position 07 - LEFT	STEPHANIE ZUL Citations Issued 1 Date of Birth Driver License Numb STATE: WISCONS Safety Equipment SHOULDER & LA Helmet Compliance Tint Compliance	Sex FEMALE Race WHITE Per SIN COUNTRY: UNIT	ED STATES				
		STATE-FARM-GENERAL-II Individual Driver STEPHANIE ZULKOSKI (608) 216-6754 Address 4385 SINGEL WAY DEFOREST, WI 53532, US fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection	S Crash Seat Position 07 - LEFT	STEPHANIE ZUL Citations Issued 1 Date of Birth Driver License Numt STATE: WISCONS Safety Equipment SHOULDER & LA Helmet Compliance Tint Compliance Airbag	Sex FEMALE Race WHITE BIN COUNTRY: UNIT	ED STATES				
UNIT	INDIVIDUAL	STATE-FARM-GENERAL-II Individual Driver STEPHANIE ZULKOSKI (608) 216-6754 Address 4385 SINGEL WAY DEFOREST, WI 53532 , US fety Equipment No Duty O Con Duty O On Duty O On Duty O On Duty O Con Duty O On Duty O On Duty O Con Duty O C	S Crash Seat Position 07 - LEFT	STEPHANIE ZUL Citations Issued 1 Date of Birth Driver License Numb STATE: WISCONS Safety Equipment SHOULDER & LA Helmet Compliance Tint Compliance	Sex FEMALE Race WHITE BIN COUNTRY: UNIT P BELT	ED STATES				
UNIT		STATE-FARM-GENERAL-II Individual Driver STEPHANIE ZULKOSKI (608) 216-6754 Address 4385 SINGEL WAY DEFOREST, WI 53532 , US fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Sev NO APP Ejected	S Crash Seat Position 07 - LEFT verity Verity	STEPHANIE ZUL Citations Issued 1 Date of Birth Driver License Numb STATE: WISCONS Safety Equipment SHOULDER & LA Helmet Compliance Tint Compliance Airbag DEPLOYED-CUR	Sex FEMALE Race WHITE Per SIN COUNTRY: UNIT P BELT					
UNIT		STATE-FARM-GENERAL-II Individual Driver STEPHANIE ZULKOSKI (608) 216-6754 Address 4385 SINGEL WAY DEFOREST, WI 53532 , US fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Sev NO APP Ejected	S Crash Seat Position 07 - LEFT verity PARENT INJURY Ejection Path	STEPHANIE ZUL Citations Issued 1 Date of Birth Driver License Numb STATE: WISCONS Safety Equipment SHOULDER & LA Helmet Compliance Tint Compliance Airbag DEPLOYED-CUR	Sex FEMALE Race WHITE Per SIN COUNTRY: UNIT P BELT	Trapped/Extricated				
UNIT		STATE-FARM-GENERAL-II Individual Driver STEPHANIE ZULKOSKI (608) 216-6754 Address 4385 SINGEL WAY DEFOREST, WI 53532 , US fety Equipment Non Duty (On Duty (On Duty (On Duty (On Duty (On Duty (Non APP Ejected NOT EJECTED	S Crash Seat Position 07 - LEFT verity PARENT INJURY Ejection Path	STEPHANIE ZUL Citations Issued 1 Date of Birth Driver License Numt STATE: WISCONS Safety Equipment SHOULDER & LA Helmet Compliance Tint Compliance Airbag DEPLOYED-CUR PPLICABLE	Sex FEMALE Race WHITE Per SIN COUNTRY: UNIT P BELT	Trapped/Extricated NOT TRAPPED				
UNIT		STATE-FARM-GENERAL-II Individual Driver STEPHANIE ZULKOSKI (608) 216-6754 Address 4385 SINGEL WAY DEFOREST, WI 53532 , US fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury No APP Ejected NOT EJECTED Medical Transport	S Crash Seat Position 07 - LEFT verity PARENT INJURY Ejection Path	STEPHANIE ZUL Citations Issued 1 Date of Birth Driver License Numt STATE: WISCONS Safety Equipment SHOULDER & LA Helmet Compliance Tint Compliance Airbag DEPLOYED-CUR PPLICABLE	Sex FEMALE Race WHITE Per SIN COUNTRY: UNIT P BELT	Trapped/Extricated NOT TRAPPED				
UNIT		STATE-FARM-GENERAL-II Individual Driver STEPHANIE ZULKOSKI (608) 216-6754 Address 4385 SINGEL WAY DEFOREST, WI 53532 , US fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Ejected NOT EJECTED Medical Transport NOT TRANSPORTED	S Crash Seat Position 07 - LEFT verity PARENT INJURY Ejection Path	STEPHANIE ZUL Citations Issued 1 Date of Birth Driver License Numt STATE: WISCONS Safety Equipment SHOULDER & LA Helmet Compliance Tint Compliance Airbag DEPLOYED-CUR PPLICABLE EMS Agency Identifie	Sex FEMALE Race WHITE Per SIN COUNTRY: UNIT P BELT	Trapped/Extricated NOT TRAPPED EMS Run #				

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		Distracted By	Distracted NOT APF	By Sourc PLICABL	e _E (NOT DISTR	RACT	ED)						
Distracted By Action NOT DISTRACTED													
		Non Motorist	Striking Un	iit #	Location								
		Prior Action											
		Action											
UNIT	INDIVIDUAL												
		Action Other										To/From School	
			Suspected	Alaahal I	100		Suspected Drug Use						
	L	Drug & Alcohol	NO	AICONOL	J26		NO						
		Alcohol Test Given		Alcohol Test Ty	уре				Alcohol Tes	t Results			
		TEST NOT GIVEN Drug Test Given TEST NOT GIVEN		Drug Test Type			Drug Test Results						
_	7	Drug Type											
0	001	0 11											
		Individual Condition											
			/IAL										
		<i>C</i> - 1 - 4				_							_
		Violations UTC Number	Issue To?	Sta	atute Number	l r	Description						
	01	BD755096	001		6.18(2)	Ē	AIL/YIELD WHILE	MAKIN	G LEFT T	JRN (RESI	JLTING BO	DDILY HARM)	
	Unit	t Summary											
	-	Status					icle Operating As Class	sification		Unit Type			
						D CLASS			AUTOMOBILE Operating As Endorsements				
02		Vehicle Type PASSENGER CAR								Operating As Endorsements			
		Occs	Train	/Bus # Re	ecorded Total # Citations Issued				Total Traile	rs	Total HazM	lat Types	
	2					0			0		0		
⊢	Insur YES	Insurance? Direction Of Travel YES NORTHBOUND					Pre CrashTire Speed Lim		nit Total Lanes 2		S		
UNIT		Harmful Event: Collisio					cial Function SPECIAL FUNCTIO	ON		Emergency Motor Vehicle Use			
		ic Way					fic Control			Traffic Control Inoperative/Missing			
	TWO-WAY, NOT DIVIDED						DP SIGN			NO			
	Surface Type BLACKTOP (BITUMINOUS)					d Curvature RAIGHT			Road Grade	•			
		k Bus or HazMat	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			0.1							
	NO												
	1	Vehicle											
		License Plate Number	r				tе Туре			Country of Is			
		590UJW					T - AUTOMOBILE			UNITED S	TATES		
8	02	Vehicle Identification I JM3KE4CE6D014				Ma MA				Model CX-5 TOUI	રા		
						1.00				27.0100			

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Color		Body Style		Bus Use			
		RED - RED	LL - CARRYALL	.L - CARRYALL					
	Щ	Initial Contact Point		Vehicle Damage					
E	5	12 - FRONT		01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE					
UNIT	Ĭ	Extent Of Damage		FRONT, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT			6 <u>§</u> 12		
	VEHICL	DISABLING DAMAGE		CORNER, 12 - FROM			5 4 3 2 1		
	>	Towed Due To Damage		Vehicle Removed By					
		TOWED DUE TO DISABLING		EVERETTS TOWING					
		What Driver Was Doing		Vehicle Factors					
		GOING STRAIGHT		NOT APPLICABLE					
		Driver Prior Action Other		NOT AFFLICABLE					
		Driver Actions NO CONTRIBUTING ACTION							
.	Щ	NO CONTRIBUTING ACTION	N Contraction of the second seco						
UNIT	VEHICLE								
5	H								
	2								
		Owner Name		Owner Address					
02	02	CLARA BAKKEN		420 21ST ST	WIE2570 110				
0	0	(608) 370-0176		PRAIRIE DU SAC	, WI 55576 , US				
	ę	Sequence Of Events							
		Event							
	01	MOTOR VEH IN TRANSPOR	Т						
	2	Event							
	02								
	03	Event							
	0								
	04	Event							
	0								
F	l	Policy Holder							
UNIT		Insurance Company		Individual					
		SECURA-INS-CO		CLARA BAKKEN					
	I	Individual							
		Driver		Citations Issued	Sex				
	_	CLARA BAKKEN		0	FEMALE				
	DUAL	(608) 370-0176		Date of Birth	Race				
⊢	Ы			WHITE					
N.	Σ	Address		Driver License Number					
	INDIVI	420 21ST ST							
	4	PRAIRIE DU SAC, WI 53578	, US	STATE: WISCONSIN COUNTRY: UNITED STATES Safety Equipment					
	-	On Duty Cr	ash						
	Sat	fety Equipment							
	1	Row	Seat Position	SHOULDER & LAP BELT					
		01 - FRONT ROW	07 - LEFT						
		Helmet Use		Helmet Compliance					
		Eye Protection		Tint Compliance					
8	002	Injury Seve	-	Airbag					
	Õ		TED MINOR INJURY	DEPLOYED-COMBINATION					
			ection Path			Trapped/Extricated			
			OT EJECTED/NOT APP			NOT TRAPPED			
		Medical Transport		EMS Agency Identifier		EMS Run #			
		EMS GROUND		6000555					
Misco	nsin M	Notor Vehicle Crash	This repo	ort does not include any C	JIS data	Crash D	ate 06/13/2024		

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Hospital SAUK PRAIRIE HO	OSP		Date of Death		Time of Death		
		Distracted By	Distracted E	By Source LICABLE (NOT DISTRA	CTED)				
		Distracted By Action NOT DISTRACTED)						
	I	Non Motorist	Striking Uni	t# Location					
		Prior Action							
		Action							
_	JAL								
UNIT	INDIVIDUAL								
_	IND								
		Action Other						To/From School	
	L	Drug & Alcohol	Suspected A	Alcohol Use	Suspected Drug Use				
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	9		Alcohol Test Results		
,		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results			
02	002	Drug Type							
		Individual Condition							
			IAL						
	l	Individual				F			
	Ļ	Passenger RYAN BAKKEN			Citations Issued 0	Sex MALE			
⊢	DIVIDUA	(608) 370-0176	00) 370-0170			Race WHITE			
UNIT		Address 420 21ST ST			Driver License Number				
	R	PRAIRIE DU SAC,	WI 53578	, US					
,	Sat	fety Equipment	On Duty Cra	ash	Safety Equipment				
		Row 02 - SECOND ROV	N	Seat Position 09 - RIGHT	SHOULDER & LAP BELT				
,		Helmet Use	•		Helmet Compliance				
		Eye Protection			Tint Compliance				
02	003	Injury	Injury Seve		Airbag DEPLOYED-COMBINATION				
		Ejected	Eje	ection Path		INATION	Trapped/Extricated		
		NOT EJECTED Medical Transport		OT EJECTED/NOT APPI	EMS Agency Identifier		NOT TRAPPED EMS Run #		
		EMS GROUND Hospital			6000555 Date of Death		Time of Death		
		SAUK PRAIRIE HO	OSP		t doog not include any CI			06/13/2024	

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Distracted E	Distracted By Source	e				
		Distracted By Actio	'n					
		Non Motori	Striking Unit #	Location				
		Prior Action						
		Action						
	JAL							
UNIT	INDIVIDUAL							
_	IND							
		Action Other						To/From School
	L	Drug & Alcoh	Suspected Alcohol	Jse	Suspected Drug Use			
		Alcohol Test Given		Alcohol Test Type	9		Alcohol Test Results	
		Drug Test Given TEST NOT GIVE	EN	Drug Test Type		Drug Test Results		
02	003	Drug Type						
		Individual Condition	n					
		APPEARED NO	RMAL					
	Pro	perty Owner						
01	Indiv LAU				Address S8751 JACOBY ROAD PRAIRIE DU SAC, WI			
PROP OWNER					,			
	Fixe	d Objects St	ruck					
	01	•	Struck Object FENCE				Structure Number	Damage Tag Number