24-06955

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

1							<u></u>		
	Document Number Override	Primary Crash I	Jocument #	Agency 24-069	Crash Number 955	Investigating Officer/Deputy DEPUTY B. SONN Time Arrived 05:32 PM			
G3	Crash Date 06/30/2024	Crash Time 05:26 PM		Date Ar 06/30/2					
ľ,	Date Notified	Time Notified					T (177)		
JP(06/30/2024	05:26 PM		Total U 02	nits	Total Injured 00	Total Kille 00	a	
UDUL	On Emergency	and Run	Lane Clos	ure	Work Zone	Trailer	or Towed	Reporting Threshold	
6 I L	Government Property	Active Sc	hool Zone	School NO	Bus Related	Tags			
9	✓ Reportable	Crash Type DT4000 (STA	NDARD CRASH	H)		Amend	ed	Secondary Crash	
l	Description	•						•	
	Diagram		↓ ↓	Drawing	g not to scale, all posi	tions are esti	Reconstruction Photos By 9104	. Ву	
	5		<u> </u>						
				STOP	Trang	Additional Information PHOTOS, WITNESS STATEMENTS, DASH CAMERA VIDEO, BODY CAMERA VIDEO			
	Witness Ve	ehicle	DL			Tur Bre			
	✔ I, a sworn law enforceme	nt officer, agre	ee that I have n	ot addec	I any CJIS data in this	report.			
	DRIVER OF UNIT 1 SAID SHE WAS SLOW BEFORE CRASHING INTO T LEADING UP TO THE CRASH. DRIV TURN ONTO TRANQUILITY LN, BU END OF THIS VEHICLE. DRIVER O WAS PARKED ON STH 136 AT CTH	TRAVELING SOU HE BACK END OI /ER OF UNIT 2 AI T WAS YIELDING F UNIT 2 PULLED	JTHBOUND ON CT F UNIT 2. DRIVER DVISED HE WAS T THE RIGHT AWAY ONTO TRANQUIL	TH DL AND OF UNIT 1 RAVELING TO OTHE ITY LN, TO	TRIED TO SLAM ON THE APPEARED TO BE CONF SOUTH ON CTH DL AND R TRAFFIC. DRIVER OF U GET OFF THE ROADWA	BRAKES TO AV USED AND WAS CAME TO A ST NIT 2 STATED (, AFTER THE C	S NOT SURE WH OP, WITH HIS L HE WAS SLAMM RASH ENDED.	AT EVENTS TOOK PLACE EFT TURN SIGNAL ON, TO IED INTO THE BACK RIGHT WITNESS 1 STATED SHE	

WAS PARKED ON STH 136 AT CTH DL, AT THE STOP SIGN. WITNESS 1 STATED UNIT 2 HAD THE LEFT TURN SIGNAL ACTIVATED, AND WAS YIELD TO TRAFFIC BEFORE TURNING ONTO TRANQUILITY LN. WITNESS 1 STATED THAT DRIVER OF UNIT 1 WAS TRAVELING "PRETTY FAST", AND DID NOT APPEAR TO SLOW DOWN FOR UNIT 2. WITNESS 1 STATED DRIVER OF UNIT 1 HIT THE BACK RIGHT END OF UNIT 2, WITH THE LEFT FRONT END OF UNIT 1, SPINNING UNIT 2 APPROXIMATELY 180 DEGREES UPON IMPACT. DRIVER OF UNIT 1 WAS ISSUED A CITATION FOR FAILURE TO KEEP VEHICLE UNDER CONTROL. UNIT 1 WAS REMOVED BY CRAIG'S TOWING. DRIVER OF UNIT 2 DROVE THE VEHICLE FROM THE SCENE. OTHER SAUK COUNTY DEPUTY'S ASSISTED WITH TRAFFIC CONTROL UNTIL UNIT 1 WAS REMOVED FROM THE ROADWAY.

Wisconsin Motor Vehicle Crash Form DT4000

Crash Date 06/30/2024 Crash Time 05:26 PM 24-06955

WISCONSIN MOTOR VEHICLE **CRASH REPORT**

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

Lo	cation										(000) 330-40	
OI 18	N BREEZY 6 FT N	KNOLL LN/ S					Latitude 43.43873	37045		Longitud -89.743	de 3712861	
OF BREEZY KNOLL LN/ STH136 EB IN THE TOWN OF BARABOO						X Coordinate Y Coordinate 277957,46875 4813194.5						
	IN SAUK COUNTY						Structure ⁻	Туре				
Cr	ash Sc	ene										
Fir	st Harmful E	vent					First Harm	nful Event L	ocation			
м	OTOR VEH	IN TRANSPO	RT				ON ROA	DWAY				
Ma	anner of Coll	lision					Light Cond	dition				
03	- FRONT	TO REAR					DAYLIG	нт				
Ro	ad Surface	Condition(s)					Roadway	Factor(s)				
DF	RY											
En	ivironment F	actor(s)										
N	ONE						NONE					
	eather Cond	ition(s)										
	LEAR											
An	imal Type							o Trafficwa	,			
Cr	ash Classifir	cation - Location						CWAY - O	N ROAD			
-	JBLIC PR											
Tribal Land						Access Control Special Study				Special Study		
	Within Interchange Area Junction Location NO INTERSECTION Closure Type Ref					NO CONTROL						
						Intersectio	on Type VAY INTERSECTION					
					Poos	ons for Close		RSECTION	N			
	THER CLC	SURE			Neasu							
Da					LAW	AW ENFORCEMENT, TOW TRUCK						
	6/30/2024		05:32 PM									
	ate All Lanes	Open	Time All Lanes Open 06:02 PM			Scene Clear	ed		ne Scene Clea : :12 PM	ired		
	30/2024		06:02 PW		06/30	/2024		00	TZ PIVI			
	nit Sum	mary		Vehi	cle Ope	erating As C	lassification	1	Unit Type			
	TRANSIT				LASS	g			AUTOMO	BILE		
	hicle Type								Operating A		ments	
	PASSENGER CAR											
То 1	tal Occs		Train/Bus # Recorded	Tota 1	I # Citat	tions Issued	d Total Trail				zMat Types	
	surance?		Direction Of Travel	_	Dro	CrashTire		Speed Lir	nit	0 Total Lan	es	
	ES		SOUTHBOUND		Pre	Crash i ire Mark		45		2		
	Most Harmful Event: Collision With				cial Fun	ction IAL FUNC			Emergency NOT APPI			
		I IN TRANSPO	RT		ic Cont							
	Traffic Way TWO-WAY, NOT DIVIDED				CONT				Traffic Control Inoperative/Missing NO			
Surface Type				d Curva				Road Grade				
			STR	STRAIGHT LEVEL								
NC NC		ıa∠ıviat										
	Vehicle	;										
		Plate Number		Plat	te Type			St	Country of Is	suance		
	AJK677					TOMOBIL	.E	WI	UNITED ST	ATES		
5		dentification Num 551664155054	ber	Mal	ke NTIAC			Year 2006	Model G6			
9		001004105054		1 PU	DALLA	,		2000	90			

24-06955

WISCONSIN MOTOR VEHICLE CRASH REPORT

1		Color		Body Style		Bus Use					
		RED - RED		SD - SEDAN							
	111	Initial Contact Point		Vehicle Damage		<u> </u> г					
–	VEHICLE	11 - LEFT FRONT CORN	IED	Childe Damaye			7 8 9 10 11				
UNIT			IER	10 - LEFT SIDE FROM	IT, 11 - LEFT FR	ONT CORNER,	6 12				
5	Η	Extent Of Damage		12 - FRONT			54321				
	>	DISABLING DAMAGE									
		Towed Due To Damage		Vehicle Removed By							
		TOWED DUE TO DISABI	LING DAMAGE	CRAIGS TOWING							
		What Driver Was Doing		Vehicle Factors							
		GOING STRAIGHT									
		Driver Prior Action Other		UNKNOWN							
		Driver Actions									
	щ	FAILURE TO CONTROL, LOOKED BUT DID NOT SEE									
E	VEHICLE										
UNIT	Ĭ										
	Ē										
	>										
		Owner Name		Owner Address							
		MARY HENDERSON		E13895 DAN MAR	СТ						
2	6	(608) 393-2258		MERRIMAC, WI 53							
	•	, , ,			,						
		Sequence Of Events	6								
	2										
	0	MOTOR VEH IN TRANSP	PORT								
	~	Event									
	02										
		Event									
	03										
		Event									
	04	Lyon									
E		Policy Holder									
UNIT		Insurance Company		Individual							
		PROGRESSIVE-MUTUA	L-INS-CO-(ATTN:-AUTO-L	J MARY HENDERSO	N						
		Individual									
		Driver		Citations Issued	Sex						
		MARY HENDERSON		1	FEMALE						
	DUAL	(608) 393-2258		Date of Birth	Race						
Ι.	D			Date of Dirti	WHITE						
ļ	¥	Address		Driver License Number							
N.	6	E13895 DAN MAR CT		Driver License Number							
	INDIVI	MERRIMAC, WI 53561 ,	US	STATE: WISCONSIN COUNTRY: UNITED STATES							
		, ,									
			t. Orach								
	Sat	fety Equipment	ty Crash	Safety Equipment							
	Jai										
		Row	Seat Position	SHOULDER & LAP	BELT						
		01 - FRONT ROW	07 - LEFT								
		Helmet Use		Helmet Compliance							
		Eye Protection		Tint Compliance							
-	Ξ	Injury S	Severity	Airbag							
2	001	Injury NO AI	PPARENT INJURY	NON DEPLOYED							
		Ejected	Ejection Path	I		Trapped/Extricated					
		NOT EJECTED	NOT EJECTED/NOT AP	PLICABLE		NOT TRAPPED					
		Medical Transport		EMS Agency Identifier		EMS Run #					
		NOT TRANSPORTED									
I											
Wisco	nsin M	Motor Vehicle Crash	This rep	oort does not include any CJ	IS data.	Crash Da	te 06/30/2024				

24-06955

WISCONSIN MOTOR VEHICLE CRASH REPORT

												()	
		Hospital					Date of Death			Time of Dea	th		
	ļ	Distracted By	Distracted E	By Source /N	e								
		Distracted By Action											
	ļ	Non Motorist	Striking Uni	t #	Location								
		Prior Action			1								
		Action											
	JAL												
UNIT	INDIVIDUAL												
	INDI												
		Action Other										To/From School	
	L	Suspected Alcohol U Drug & Alcohol NO			Jse		Suspected Drug Use					L	
		Alcohol Test Given			Alcohol Test Type		e		Alcohol Test Results		t Results		
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Result		Test Results					
6	001	Drug Type											
	•	Individual Condition											
		CONFUSED OR DISORIENTED (NON LUCID)											
	,	Violations											
	01	UTC Number BJ678989	Issue To? 001		tute Number 6.57(2)		Description FAILURE TO KEEP \	/EHIC		R CONTRO	L		
	Unit	t Summary	•										_
		Status				Ve	hicle Operating As Classi	fication	1	Unit Type			
	ΙΝ Τ	TRANSIT				D CLASS			AUTOMO	BILE			
		Vehicle Type				-				Operating As Endorsements			
02	PASSENGER CAR												
	Tota 2	I Occs	Train/	Bus # Re	corded	Total # Citations Issued 0			Total Traile	ers	Total HazM 0	lat Types	
		rance?		ion Of Tr			Pre CrashTire		Speed Lim	it	Total Lane	S	
UNIT	YES Most	Harmful Event: Collision		THBOU	ND		Decial Function		45	Emergency		le Use	
	-		SPORT				O SPECIAL FUNCTIO	N				(A A ' · ·	
	тwo	ic Way D-WAY, NOT DIVIDE	ED				affic Control O CONTROL			Traffic Control Inoperative/Missing NO			
		ace Type NCRETE	се Туре				Road Curvature STRAIGHT			Road Grade			
		k Bus or HazMat				-				l			
	-	Vehicle											
		License Plate Number	r			Тр	late Type		St	Country of Is	suance		
		92015	I				UT - AUTOMOBILE			UNITED S			
	02												_

24-06955

WISCONSIN MOTOR VEHICLE CRASH REPORT

02		Vehicle Identification Number		Make		Year	Model			
		RH23G2G111261	PLYMOUTH 1972		ROADRUNNER Bus Use					
		Color BLU - BLUE	Body Style 2D - 2DR							
		Initial Contact Point		ZD - ZDR Vehicle Damage						
⊢	Ë	05 - RIGHT REAR CORNE	Venicle Damage				7 8 9 10 11			
UNIT	₽	Extent Of Damage	N		DE REAR, (05 - RIGHT F	EAR CORNER,	6 12		
	VEHICLE	FUNCTIONAL DAMAGE		06 - REAR 5 4 3 2 1						
	>	Towed Due To Damage		Vehicle Removed	Bv					
		NOT TOWED		OPERATOR)					
		What Driver Was Doing		Vehicle Factors						
		SLOW/STOPPING								
		Driver Prior Action Other		UNKNOWN						
		Driver Actions		•						
	щ	NO CONTRIBUTING ACTION								
UNIT	VEHICLE									
5	H									
	2									
		Owner Name KURT SCHLIECKAU		Owner Addre						
02	02	(608) 495-2447		S7010 ORCHARD RD NORTH FREEDOM, WI 53951,US						
	•	· ,								
		Converse Of Events								
	•	Sequence Of Events Event								
	01	MOTOR VEH IN TRANSPO	DRT							
	02	Event								
	03	Event								
	U	F .								
	04	Event								
⊨	l	Policy Holder								
UNIT		Insurance Company	-							
-		AMERICAN-FAMILY-INS-0	.0	KURT SCHLIECKAU						
	l	Individual								
				Citations Issued Sex						
	Ļ	KURT SCHLIECKAU (608) 495-2447		0		MALE				
	INDIVIDUA	(000) 400 2441		Date of Birth		ace 'HITE				
UNIT	Ę	Adduces		Driver Lisense						
5	ā	Address S7010 ORCHARD RD		Driver License Number						
	Z	NORTH FREEDOM, WI 53951 , US		STATE: WISCONSIN COUNTRY: UNITED STATES						
		On Duty	Crash	Safety Equipm	ent					
	Sat	fety Equipment		, , ,						
		Row	Seat Position	LAP BELT C	ONLY					
		01 - FRONT ROW	07 - LEFT							
		Helmet Use	-	Helmet Compli	ance					
		Eye Protection		Tint Compliand	e					
	N	Injury Se	everity	Airbag						
02	002	Injury NO AP	PARENT INJURY		ABLE					
		Ejected	Ejection Path				Trapped/Extricated			
		NOT EJECTED	NOT EJECTED/NOT AP	PLICABLE			NOT TRAPPED	osta 06/20/2024		

24-06955

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Medical Transport			EMS Agency Identifier		EMS Run #					
		NOT TRANSPORTED			Date of Death		Time of Death					
		Hospital			Date of Death		Time of Death					
		Distracted By NOT A	ed By Source PPLICABL	E (NOT DISTRAC	CTED)							
		Distracted By Action NOT DISTRACTED										
		Non Motorist	Unit #	Location								
		Prior Action										
UNIT	INDIVIDUAL	Action										
		Action Other						To/From School				
		Support	ad Alashal I		Supported Drug Lloo							
	L	Drug & Alcohol NO	ed Alcohol U	se	Suspected Drug Use							
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results					
		Drug Test Given Drug Test Ty TEST NOT GIVEN		Drug Test Type		Drug Test Results						
02	002	Drug Type										
	I	ndividual										
		Passenger JANIS SCHLIECKAU			Citations Issued 0	Sex FEMALE						
	UAL	(608) 495-3330			Date of Birth	Race						
ы	DO				WHITE							
UNIT	INDIVID	Address S7010 ORCHARD RD NORTH FREEDOM, WI 53		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES								
		On Duty	Crash		Safety Equipment							
	Sat	ety Equipment										
		Row 01 - FRONT ROW	Seat Po 09 - RI		LAP BELT ONLY							
		Helmet Use		Helmet Compliance								
		Eye Protection			Tint Compliance							
03	003	Injury Severity NO APPARENT INJURY			Airbag NOT APPLICABLE							
		Ejected NOT EJECTED	Ejection Pa	h CTED/NOT APPL	ICABLE		Trapped/Extricated NOT TRAPPED					
		Medical Transport			EMS Agency Identifier		EMS Run #					
	agin A			does not include any C.I	10.1.1	Orach D. J	06/30/2024					



24-06955

WISCONSIN MOTOR VEHICLE CRASH REPORT

I I		Hospital			Date of Death		Time of Death	
					Date of Death		Time of Death	
			Distracted By Source					
		Distracted By	Distracted by Source					
İ.		Distracted By Action						
		Non Motorist	Striking Unit #	Location				
		Prior Action						
İ		Action						
	INDIVIDUAL							
⊢								
UNIT	1							
 	ā							
	Z							
		Action Other						To/From School
		Action Other						
			Suspected Alcohol U	se	Suspected Drug Use			
		Drug & Alcohol	NO		NO			
		Alcohol Test Given		Alcohol Test Type	e		Alcohol Test Results	
		TEST NOT GIVEN						
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	•	
07	003	Drug Type						
 	0							
		Individual Condition						
		APPEARED NORM	MAL					
		ness			A 1 1			
0		ridual RLA MOXLEY			Address S5611 E GLACIER DR	R		Date of Birth
	(609	3) 369-0205			BARABOO, WI 53913			
WITN ESS								
Ν								