WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Oocument Number Overric	de	Primary Crash	n Document#	Agency 24-097	Crash Number 98		vestigating EPUTY W					
	Crash Date 09/02/2024			Crash Time 02:08 PM		Date Arrived 09/02/2024			Time Arrived 02:26 PM				
	Date Notified		Time Notified		Total Ur	nits	To	otal Injured		Total Kille	ed		
(09/02/2024		02:11 PM		02		02			00			
	On Emergency	Hit	and Run	✓ Lane Clo		Work Zone		Trailer	or To	owed	Reporti Thresho		
	Government Property		Active S	School Zone	School NO	Bus Related	Та	ags					
	✓ Reportable		Crash Type DT4000 (ST	ANDARD CRAS	SH)			Amend	ed		Second Cras		
	escription =												
	Diagram	Not to s	scale							onstruction os By /ERTEIN			
_	USH 12 			01	() 01 552555	02		02	Addi PHO	tional Info	rmation		
_	01 \(\)	01	<u></u>										
Γ	I, a sworn law enfo	orceme	nt officer, ag	ree that I have	not added	any CJIS data in th	is rep	ort.					
L													

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Crash Date 09/02/2024

Crash Time 02:08 PM

	ation ——			_							
_	USH12 EB					Latitude			Longitude		
	0.44 MI N						43.299478647			10093	
	USH12 EB HE TOWN OF PRAIRI	E DIL CAC				X Coordinate			Y Coord	inate	
	AUK COUNTY	E DU SAC				276200.25 4797769.5					
""	AUROUNTI					Structure	Туре				
						NO STR	UCTURE				
Cra	sh Scene										
	Harmful Event					First Harn	nful Event	Location			
	TOR VEH IN TRANSP	ORT				ON ROA		Location			
	ner of Collision					Light Con					
02 -	FRONT TO FRONT					DAYLIG					
	d Surface Condition(s)					Roadway					
DRY	` ,						. 4515.(5)				
	ronment Factor(s)										
NON						BACKU	P DUE TO	O REGULAR (CONGES	TION	
	ther Condition(s)										
CLE	. ,										
	nal Type					Relation 1	To Trafficu	av			
	, , , -					Relation To Trafficway TRAFFICWAY - ON ROAD					
Cras	h Classification - Location					Crash Classification - Jurisdiction					
1	BLIC PROPERTY					NO SPECIAL JURISDICTION					
Triba	al Land					Access C				Special Study	
\\/i+b	in Interchange Area	Junction Location			Intersectio	NO CON	ITROL				
NO	in interchange Area	NON-JUNCTION				n rype INTERSE	CTION				
Clos	ure Type			Reaso	ns for Closu	ıre					
LAN	IE CLOSURE										
Date	Initial Lane/Rd Closed	Time Initial Lane/Rd Closed	d	LAW	ENFORCI	CEMENT, FIRE/EMS					
	2/2024	02:13 PM									
	All Lanes Open	Time All Lanes Open		-			ime Scene Clea	red			
	2/2024	02:55 PM		09/02	1/2024			2:55 PM			
	t Summary =		1.7.1.					T			
_	Status				erating As Cl	assification	1	Unit Type			
	RANSIT		D CL	ASS				AUTOMOE			
	cle Type SSENGER CAR							Operating As	s Endorser	nents	
		Train/Bus # Recorded	Total	# Citat	tiona laguad		Total Tra	ailere	Total Haz	Mat Types	
1	l Occs	Train/Dus # Necorded	3	# Cital	tions Issued		0	aliers	0	wat Types	
	rance?	Direction Of Travel	Ť	_	<u> </u>		Speed L	imit	Total Lan	99	
	KNOWN	EASTBOUND			CrashTire Mark		55		2		
	Harmful Event: Collision		Speci	ial Fun			1	Emergency		cle Use	
	TOR VEH IN TRANSP		NO S	SPEC	IAL FUNC	TION		NOT APPL	NOT APPLICABLE		
Traff	ic Way		Traffi	c Conti	rol			Traffic Contr	ol Inopera	tive/Missing	
TWC	D-WAY, NOT DIVIDED	(NO 0	CONT	ROL			NO			
·					d Curvature			Road Grade			
BLA	BLACKTOP (BITUMINOUS) STRAIGH					GHT LEVEL					
	k Bus or HazMat							•			
NO											
•	Vehicle										
	License Plate Number			е Туре			St	,	Country of Issuance		
	AWV9901				TOMOBIL	.E	WI	UNITED ST	ATES		
_	Vehicle Identification Nur		Mak				Year	Model			
0	2B3KA43G27H83822	22	DOI	DGE		2007 CHARGER					

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Crash Date 09/02/2024

Crash Time 02:08 PM

		Color	E	Body Style		Bus Use					
		RED - RED	SD - SEDAN								
	щ	Initial Contact Point	Vehicle Damage								
ㅂ	딩	11 - LEFT FRONT CORNER		7 8 9 10 11							
LIND	Ĭ	Extent Of Damage	10 - LEFT SIDE FRO	NT, 11 - LEFT FRO	ONT CORNER,	6 2 12					
ر ر	VEHICL	DISABLING DAMAGE	12 - FRONT			5 4 3 2 1					
		Towed Due To Damage	Vehicle Removed By								
		TOWED DUE TO DISABLING		EVERETTS TOWING							
		What Driver Was Doing	\	Vehicle Factors							
		LEAVING TRAVEL LANE									
		Driver Prior Action Other	1	NOT APPLICABLE							
		Driver Actions	L.								
	щ	FOLLOWING TOO CLOSE, F	FAILED TO KEEP IN DES	SIGNATED LANE							
╘	VEHICLE										
LIND	표										
	VE.										
		Owner Name		Owner Address							
_	_	MIGUEL VASQUEZ PEREZ		106 N MCGARY ST NORWALK, WI 54648 , US							
2	01	(608) 343-2388	HOLLIANI, III OTOTO , OO								
	\$	Sequence Of Events									
	01	Event CROSS CENTERLINE									
	0	ORUSS CENTERLINE									
	02	Event MOTOR VEH IN TRANSPORT									
	0										
	03	Event									
		Event									
	04	LVent									
		ndividual									
		Driver		Citations Issued	Sex						
	_	MIGUEL VASQUEZ PEREZ		3 MALE							
	A	(608) 343-2388		Date of Birth	Race						
_	JC		06/03/1998	HISPANIC							
	INDIVIDUAL	Address		Driver License Number							
\supset	⊒	106 N MCGARY ST		Safety Equipment							
	Z	NORWALK, WI 54648 , US									
	_ !	On Duty Cr	ash								
	Saf	ety Equipment									
		Row	Seat Position	SHOULDER & LAP BELT							
		01 - FRONT ROW	07 - LEFT								
		Helmet Use		Helmet Compliance							
		Eye Protection		Tint Compliance							
2	001	Injury Seve	=	Airbag							
	0	, 000.BE	E INJURY	DEPLOYED-FRONT							
			ection Path	Trapped/Extricated							
			OT EJECTED/NOT APPL			NOT TRAPPED					
		Medical Transport		EMS Agency Identifier	-	EMS Run #					
		EMS GROUND		6000555		Time of Death					
		Hospital SAUK PRAIRIE HOSP		Date of Death		Time of Death					
		OMUN FINAIRIE HUSP									

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

		_										
		Distracted By	Distracted By	Source								
		Distracted By Action UNKNOWN										
		Non Motorist	Striking Unit #	Location								
		Prior Action		l .								
İ		Action										
	ب											
l _⊏	INDIVIDUAL											
L N	₹											
	_											
		Action Other									To/From School	
			Suspected Alc	cohol Use		Suspected Drug Use	!					
	ı	Drug & Alcohol	NO	-		NO						
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test	Туре				Alcohol Tes	t Results			
		Drug Test Given		Drug Test Ty	Drug Test Type		Drug Test Resu					
		TEST NOT GIVEN										
2	00	Drug Type										
		Individual Condition										
			441									
		APPEARED NORM	/IAL									
	,	Violations										
	0	UTC Number BE612239	Issue To? 001	Statute Number 343.05(3)(a)		Description OPERATE W/O V	ALID LIC	ENSE (1S	T VIOLATIO	ON)		
	05	UTC Number BE612240	Issue To?	Statute Number 346.05(1)		Description OPERATING LEF	T OF CE	NTER				
	03	UTC Number BE612241	Issue To?	Statute Number 344.62(1)		Description OPERATE MOTO	R VEHIC	LE W/O IN	SURANCE			
l		t Summary •	100.									
		Status -			Ve	hicle Operating As Cl	assification	1	Unit Type			
		RANSIT				CLASS			TRUCK			
05		cle Type			Operating As En					As Endorsen	nents	
٦		LITY TRUCK/PICKU		s # Recorded	Ιτο	tal # Citations Issued		Total Traile	re	Total Haz	Mat Types	
	1 1 1	i Occs	Train, Bu	3 # Necorded	0	tai # Citations issued		0	,10	0	viat Types	
		rance?		Of Travel	1_	Pre CrashTire		Speed Lim	it	Total Lane	es	
LNO	YES	i t Harmful Event: Collisio	WESTE	BOUND	Sn	Mark ecial Function		55	2		ام ا ادم	
5		TOR VEH IN TRANS				O SPECIAL FUNC	ΓΙΟΝ		Emergency Motor Vehicle Use NOT APPLICABLE			
	Traffic Way					affic Control				trol Inoperati	ve/Missing	
		D-WAY, NOT DIVIDI ace Type	ED			NO CONTROL			NO Road Grade			
		ACKTOP (BITUMINO	OUS)						LEVEL			
	Truc	k Bus or HazMat	-						I			
	NO											
l		Vehicle										

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		License Plate Number			Туре	St	Country of Issuance					
		NC4191			- LIGHT TRUCK	WI	UNITED STATES					
05	02	Vehicle Identification Numbe		Make		Year	Model					
0	0	3GNVKFE03AG241275			VROLET	2010	AVALANCHE					
		Color			Style		Bus Use					
		BLK - BLACK			SPORT UTILITY V	EHICLE						
_	LE	Initial Contact Point	D. 150	Vehic	cle Damage			7 8 9 10 11				
LNO	<u>C</u>	01 - RIGHT FRONT COR	RNER	01 -	RIGHT FRONT CO	RNER. 02 - R	IGHT SIDE	6				
5	VEHICL	Extent Of Damage			ONT, 11 - LEFT FRO			5 4 3 2 1				
	>	DISABLING DAMAGE										
		Towed Due To Damage			Vehicle Removed By							
		TOWED DUE TO DISAB	BLING DAMAGE		RETTS TOWING							
		What Driver Was Doing		Vehic	cle Factors							
		GOING STRAIGHT			ADDLICADIE							
		Driver Prior Action Other		INOI	APPLICABLE							
		Driver Actions NO CONTRIBUTING AC	CTION									
	LE	NO CONTRIBUTING AC	STION									
LNO	<u>C</u>											
5	VEHICL											
	>											
		Owner Name DEAN WALSH			Owner Address 7494 VERNA CT SAUK CITY, WI 53583, US							
05	02	(608) 644-6444										
0	0	(500) 511 5111				,						
		Sequence Of Events	:S									
	01	Event MOTOR VEH IN TRANS	SPORT									
		Event										
	02											
	03	Event										
	04	Event										
		Deliev Helder										
LNO		Policy Holder Insurance Company		Line	45. 3.4 1							
5		ALLSTATE-INS-CO			Individual DEAN WALSH							
					DEAN WALON							
		Individual		1								
		Driver DEAN WALSH			tations Issued	ons Issued Sex						
	۸L	(608) 644-6444		0	(C)	MALE						
_	INDIVIDUAL	,		Da	ate of Birth	Race WHITE						
L N		Address		De								
5		7494 VERNA CT		DII	Driver License Number							
	Z	SAUK CITY, WI 53583 ,	, US	SI	STATE: WISCONSIN COUNTRY: UNITED STATES							
		On Du	Outy Crash	Sa	Safety Equipment							
	Sat	fety Equipment	,		moty Equipmont							
		Row	Seat Position	SH	HOULDER & LAP E	BELT						
		01 - FRONT ROW	07 - LEFT									
		Helmet Use	l	He	Helmet Compliance							
		Eye Protection		Tir	Tint Compliance							
					Aidean							
07	005		/ Severity		Airbag							
_	0	SUSI	PECTED MINOR INJURY	N	ON DEPLOYED							

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		Ejected	Ejection Pa	ath			Trapped/Extricated		
		NOT EJECTED	NOT EJE	CTED/NOT APPL	ICABLE		NOT TRAPPED		
		Medical Transport	•		EMS Agency Identifier		EMS Run #		
		EMS GROUND			6000555				
		Hospital			Date of Death		Time of Death		
		SAUK PRAIRIE HO							
		Distracted By	NOT APPLICABL	e LE (NOT DISTRAC	CTED)				
		Distracted By Action NOT DISTRACTED)						
	,	Non Motorist	Striking Unit #	Location					
		Prior Action							
		Action							
	INDIVIDUAL								
⊨	\mathbf{C}								
LNO	7								
\supset									
	Z								
		Action Other						To/From School	
	ı	Drug & Alcohol	Suspected Alcohol U	Jse	Suspected Drug Use NO				
	_	Alcohol Test Given		TAL	_		AL LIT (D. 1)		
		TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results		
		Drug Test Given		Drug Test Type		Drug Test Results			
		TEST NOT GIVEN		Brug Test Type		Drug Test Nesults			
05	002	Drug Type							
_	0								
		Individual Condition							
		ADDEADED NODA	4.4.1						
		APPEARED NORM	IIAL						