# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Overri	de Primary Crash	Document #	Agency 24-099	Crash Number 59	Investigating <b>DEPUTY J.</b>	Officer/Deputy HUNTER	•
Crash Date 09/06/2024	Crash Time 01:25 PM		Date Ar 09/06/		Time Arrived 01:35 PM		
Date Notified 09/06/2024	Time Notified 01:29 PM		Total U 01	nits	Total Injured <b>00</b>	Total Kill	ed
On Emergency	Hit and Run	Lane Clo	sure	Work Zone	Trailer	or Towed	Reporting Threshold
Government Property	Active S	chool Zone	School NO	Bus Related	Tags		
<b>✓</b> Reportable	Crash Type DT4000 (ST	ANDARD CRAS	SH)		Amend	ed	Secondary Crash
escription <b>=</b>	•						<b>'</b>
Diagram					not to scale	Photos By DEPUTY HI	
	HY 33,	West of Evergreen	ı Rd.			Additional Info	ormation
I, a sworn law enformation  I was traveling in the right, entered  TO THE RIGHT, ENTERED	EASTBOUND ON HY 33. (	OPERATOR HEAR	D A LOUD N	IOISE AT THE REAR OF	THE VEHICLE AN		

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

1 of 5

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Lo	cation							
	I STH33 EB			Latitude			Longitud	de
0.6	0.60 MI E				43.530285822		-89.880	
OF	COUNTY LAND FIL	L LN		X Coordin			Y Coord	
	IN THE TOWN OF EXCELSIOR				267270.0625		482373	
IN	SAUK COUNTY			Structure			10207	
						:		
	1 0 =			INO OTK	UCTURE	-		
_	ash Scene							
	st Harmful Event				mful Event I	Location		
	ГСН			ON ROA				
	nner of Collision			Light Con				
00	- NO COLLISION W	VEHICLE IN TRANSPORT		DAYLIG				
Ro	ad Surface Condition(s)			Roadway	Factor(s)			
W	T							
Env	vironment Factor(s)							
	ONE			NONE				
We	ather Condition(s)							
CL	OUDY, RAIN							
Ani	mal Type			Relation 1	To Trafficwa	av		
						ON ROAD		
Cra	sh Classification - Locat	tion				on - Jurisdiction		
	BLIC PROPERTY					RISDICTION		
Trib	oal Land			Access C	ontrol			
Within Interchange Area Junction Location				NO CONTROL				
			Intersection Type		Туре			
				N INTERSECTION				
Un	it Summary	•	•					
	t Status		Vehicle Operating As	s Classification	n	Unit Type		
IN	TRANSIT		D CLASS		AUTOMOBILE			
	nicle Type					Operating As Endorsements		ments
	SSENGER CAR							
Tot	al Occs	Train/Bus # Recorded	Total # Citations Issu	ued	d Total Trail		ailers Total HazMat Types	
2			0		0		0	••
Ins	urance?	Direction Of Travel					Total Lan	es
YE	S	EASTBOUND	Mark	116	55		2	
Мо	st Harmful Event: Collision	on With	Special Function				Emergency Motor Vehicle Use	
	гсн		NO SPECIAL FU	NO SPECIAL FUNCTION			NOT APPLICABLE	
Tra	ffic Way		Traffic Control				Traffic Control Inoperative/Missing NO Road Grade LEVEL	
ΤW	O-WAY, NOT DIVID	ED	NO CONTROL					
Sui	face Type		Road Curvature					
BL	ACKTOP (BITUMING	OUS)	STRAIGHT					
Tru	ck Bus or HazMat		1					
NC	)							
	Vehicle							
	License Plate Numbe	r	Plate Type	Plate Type S		Country of Issuance		
	AXE7089		AUT - AUTOMOBILE		WI	UNITED STATES		
	Vehicle Identification	Number	Make		Year	Model		
2	1G11E5SA5DF311	1086	CHEVROLET	CHEVROLET 2		MALIBU		
	Color		Body Style	Body Style		Bus Use		
	BLK - BLACK		SD - SEDAN					
ш	Initial Contact Point		Vehicle Damage					7 0 0 10 11
								7 8 9 10 11
	00 - NON-COLLIS	ION						3
	00 - NON-COLLISI Extent Of Damage	ION	04 - RIGHT SIDE	E REAR, 11	- LEFT F	RONT CORN	ER	6 FB 12
VEHICLI			04 - RIGHT SIDE	E REAR, 11	- LEFT F	RONT CORNI	ER	6 For The second 12 For The se
	Extent Of Damage		04 - RIGHT SIDE	E REAR, 11	- LEFT FI	RONT CORNE	ER	

Wisconsin Motor Vehicle Crash Form DT4000

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2 of 5

Crash Time 01:25 PM

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		Towed Due To Damage TOWED DUE TO DISABL	ING DAMAGE	Vehicle Removed By STEVES AUTO SERV	/ICE			
		What Driver Was Doing		Vehicle Factors				
		GOING STRAIGHT		DOWER TRAIN OFF	FRING			
		Driver Prior Action Other		POWER TRAIN, STE	ERING			
		Driver Actions		<u> </u>				
l.	삨	NO CONTRIBUTING ACT	ION					
FIN O	₽							
>	VEHICLE							
		Owner Name ASHLEY SIBENALI	FR	Owner Address 110 COUNTY HW	YV			
2	2	(608) 495-9276		CAZENOVIA, WI				
	;	Sequence Of Events						
	5	OTHER NON-COLLISION						
	05	Event DITCH						
	03	Event						
		Event						
	9							
╘	- 1	Policy Holder						
HNO		Insurance Company PROGRESSIVE-ADVANC	Individual ASHLEY SIBENALLER					
		Individual						
		Driver		Citations Issued	Sex			
	_	ASHLEY SIBENALLER (608) 495-9276		0 FEMALE				
	NDIVIDUAL			Date of Birth	Race			
TNO TNO	₽	Address		Driver License Number				
╸	₫	110 COUNTY HWY V CAZENOVIA, WI 53924,						
	=	CAZENOVIA, WI 53924 ,	03					
		On Duty	Crash	Safety Equipment				
	Sat	ety Equipment						
		Row FRONT POW	Seat Position	SHOULDER & LAP BELT				
		01 - FRONT ROW Helmet Use	07 - LEFT	Helmet Compliance				
		Eye Protection		Tint Compliance				
5	5	Injury Severity		Airbag				
0	8		PARENT INJURY  Ejection Path	NON DEPLOYED				
		Ejected NOT EJECTED	NOT EJECTED/NOT AP	PPLICABLE		Trapped/Extricated NOT TRAPPED		
		Medical Transport		EMS Agency Identifier		EMS Run #		
		NOT TRANSPORTED		Data of Daath		Time of Death		
		Hospital		Date of Death		Time of Death		
		Distracted By UNKNO	ed By Source DWN					
		Distracted By Action UNKNOWN						

Wisconsin Motor Vehicle Crash Form DT4000

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								` ,			
		Non Motorist	triking Unit #	Location							
		Prior Action									
UNIT	INDIVIDUAL	Action									
		Action Other						To/From School			
	L	Orug & Alcohol N	uspected Alcohol  O		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					
2	001	Drug Type				•					
		Individual Condition									
		APPEARED NORMAL									
	- 1	ndividual									
	_	Passenger SAWYER LOBSING	GER		Citations Issued  0	Sex MALE					
_	DO	(608) 495-9276			Date of Birth	Race WHITE					
TINO	INDIVIDUAL	Address 110 COUNTY HWY V CAZENOVIA, WI 539	)24 , US		Driver License Number						
	Sat	ety Equipment	n Duty Crash		Safety Equipment						
	Row Seat Position 02 - SECOND ROW 09 - RIGHT				CHILD RESTRAINT	SYSTEM - REAF	RFACING				
		Helmet Use			Helmet Compliance						
		Eye Protection			Tint Compliance						
2	005		jury Severity  O APPARENT	INJURY	Airbag NON DEPLOYED						
		Ejected Ejection Path NOT EJECTED NOT EJECTED/NOT APE			LICABLE		Trapped/Extricated NOT TRAPPED				
		Medical Transport NOT TRANSPORTE			EMS Agency Identifier		EMS Run #				
		Hospital			Date of Death Time of Death						
		Distracted By	istracted By Source	pe e	1		I				
		Distracted By Action									
		Non Motorist	triking Unit#	Location							

Wisconsin Motor Vehicle Crash Form DT4000

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Crash Date 09/06/2024
Crash Time 01:25 PM

Page 4 of 5

SC24-09959

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I		Prior Action					
		The Action					
l		Action					
		7.66.7					
	_						
	4						
I≡	<u></u>						
LNS	INDIVIDUAL						
	2						
	=						
ł		Action Other					To/From School
		Action Other					TO/T TOTAL SCHOOL
ł		Suspected Alcohol U	lsα	Suspected Drug Use			
	L	Drug & Alcohol	500	NO			
İ		Alcohol Test Given	Alcohol Test Type			Alcohol Test Results	
		TEST NOT GIVEN					
İ		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results		
		TEST NOT GIVEN					
2	002	Drug Type	•		•		
0	8						
ļ							
		Individual Condition					
		APPEARED NORMAL					