24-11394

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash D	ocument #	Agency 24-113	^r Crash Number 394		Officer/Depu		
>	Crash Date	Crash Time		Date A		Time Arrived			
05	10/12/2024 Date Notified	99:99 Time Notified		10/12/		08:03 PM			
6N(10/12/2024	08:03 PM		Total U 02	nits	Total Injured 00	Total Ki 00	lied	
6TL0D6N05V	On Emergency	t and Run	Lane Closu		Work Zone	Trailer	or Towed	Reporting Threshold	
6TI	Government School Zone School Bus Related Tags Property Active School Zone NO Tags								
	✓ Reportable	Crash Type DT4000 (STAN	NDARD CRASH	I)		Amend	ed	Secondary Crash	
l	Description								
	Diagram 10/12/2024 SC24-11394)⊳e	Reconstruct	on By					
	CTH BD, South of	f Pit Road, \$	Sauk Coun	ty WI	\ 5		Photos By DEPUTY E	8. BRUNKEN 9106	
Additional Information							DASH CAMERA VIDEO,		
	✓ I, a sworn law enforceme	ent officer, agree	e that I have no	ot addeo	I any CJIS data in this	report.			
	ON THE ABOVE DATE AND TIME, I ONE AND UNIT TWO OBSERVED A COMING TO A STOP. END OF REP	A DOG ON THE SID	IT TWO WERE TR DE OF THE ROAD (AVELING AND BEG	NORTHBOUND ON CTH BE AN TO STOP. UNIT TWO P), South of F Roceeded T(PIT ROAD. OF O STRIKE UNI	PERATORS OF BOTH UNIT T ONE AS THEY WERE	

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I	00	ation									
Ē		CTHBD NB				Latitude			Longi	tude	
	594 FT S Z					43.508989923			•	-89.778058657	
			200			X Coordin	ate		Y Coo	ordinate	
		HE TOWN OF BARAE AUK COUNTY	300			275438.34375 4821089.5					
						Structure	Туре				
L (Cra	sh Scene									
Ī		Harmful Event				First Harm	nful Event Lo	ocation			
	мо	OR VEH IN TRANSP	ORT			ROADSI	DE				
Ī	Manner of Collision					Light Cond					
		FRONT TO REAR				DARK/U					
		I Surface Condition(s)				Roadway	Factor(s)				
	DR۱	•									
ľ	Envi	onment Factor(s)									
	NOM	IE				NONE					
ľ	Wea	ther Condition(s)									
	CLE	AR									
ľ	Anim	al Type				Relation T	o Trafficwa	/			
							CWAY - OI				
		h Classification - Locatior	1				ssification -				
ł		Land				NO SPECIAL JURISDICTION Access Control Special Study			Special Study		
					NO CONTROL						
Ī		n Interchange Area	Junction Location		Intersectio						
ļ	NO	-	NON-JUNCTION		NOT AN	INTERSE	CTION				
		Summary		Vahiala On	orating As C	localification		Linit Toma			
					Vehicle Operating As Classification			sification Unit Type AUTOMOBILE			
ł				DOLAGO	DELASS			Operating As Endorsements			
5											
ľ	Tota	Occs	Train/Bus # Recorded	Train/Bus # Recorded Total # Citation		Citations Issued		ers	Total HazMat Types		
	2			0		0		0			
		ance?	Direction Of Travel	Pre	Pre CrashTire				Total La	anes	
ŀ	NO	Harmful Event: Collision	NORTHBOUND	Special Function		55		2 Emergency Motor Ve		ahicle I Ise	
ł		OR VEH IN TRANSP		NO SPEC		TION		NOT APPLICABLE			
ŀ		c Way		Traffic Control				Traffic Control Inoperative/Missing		rative/Missing	
		-WAY, NOT DIVIDED)	NO CONT	NO CONTROL			NO			
		се Туре		Road Curva				Road Grade			
		CKTOP (BITUMINOU Bus or HazMat	S)	STRAIGH	Т			LEVEL			
	NO	Bus of Hazimat									
1		/ehicle									
	License Plate Number			Plate Type		St		Country of Issuance			
		Color		AUT - AUTOMOBILE Make FORD Body Style			WI Year	UNITED STATES Model ESCAPE			
	01						2019				
								Bus Use			
		GRY - GRAY			UT - SPORT UTILITY VEHICLE						
	Ľ	Initial Contact Point		Vehicle Da	amage				T	7 8 9 10 11	
	VEHICL	05 - RIGHT REAR CO Extent Of Damage	JKNEK	05 - RIGI	HT RFAP					6	
		MINOR DAMAGE			05 - RIGHT REAR CORNER				54321		
2	۳ ۲	MINOR DAMAGE							I		

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		Towed Due To Damage		V	ehicle Removed By						
		NOT TOWED		C	OPERATOR						
		What Driver Was Doing		V	Vehicle Factors						
		SLOW/STOPPING									
		Driver Prior Action Other		ľ	NOT APPLICABLE						
		Driver Actions									
	ш	NO CONTRIBUTING ACTION	I								
E	CL										
UNIT	VEHICLE										
	<pre>K</pre>										
					-						
		Owner Name BRITTNEY GUZMAN CRUZ (608) 617-8765			Owner Address 1540 W PINE ST #	401					
5	01				BARABOO, WI 53						
	_										
		Sequence Of Events									
		Event									
	01	MOTOR VEH IN TRANSPOR	Т								
	02	Event									
	0	- .									
	03	Event									
	_	Event									
	04										
		ndividual									
		Driver			Citations Issued Sex						
	Ļ	RAMON GUZMAN CRUZ (608) 432-4819 Address 1540 W PINE ST # 401 BARABOO, WI 53913 , US			0 MALE						
	INDIVIDUAL				Date of Birth	Race HISPANIC					
UNT NT					Driver License Number						
5	D										
	Z				STATE: WISCONSIN COUNTRY: UNITED STATES						
	Saf	On Duty Cra fety Equipment	ash		Safety Equipment						
	Gai				SHOULDER & LAP BELT						
		Row 01 - FRONT ROW	FRONT ROW 07 - LEFT		SHOULDER & LAP BELT						
		Helmet Use	•••		Helmet Compliance						
		Eye Protection			Tint Compliance						
		Injury Sever	-it.		Airbox						
2	001	Injury NO APPA	-		Airbag NON DEPLOYED						
			ection Pa		NON BEI LOTEB		Trapped/Extricated				
				CTED/NOT APPL	ICABLE		NOT TRAPPED				
	Medical Transport				EMS Agency Identifier		EMS Run #				
		NOT TRANSPORTED									
		Hospital			Date of Death		Time of Death				
		Distracted B		2							
		Distracted By NOT APPI	LICABL	E (NOT DISTRAC	CTED)						
		Distracted By Action									
		NOT DISTRACTED									
		Striking Unit	t #	Location							

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

		Prior Action								
UNIT	Action									
		Action Other						To/From School		
		Suspec	ed Alcohol L	lse	Suspected Drug Use					
	L	Drug & Alcohol NO			NO					
		Alcohol Test Given Alcohol Test Ty					Alcohol Test Results			
		Drug Test Given TEST NOT GIVEN	Drug Test Type			Drug Test Result	S			
01	001	Drug Type								
		Individual Condition								
		APPEARED NORMAL								
	l	ndividual				Lo.				
	Ļ	Passenger BRITTNEY GUZMAN CRUZ (608) 617-8765 Address 1540 W PINE ST # 401 BARABOO, WI 53913 , US			Citations Issued 0	Sex FEMALE				
⊢	DUA				Date of Birth	Race WHITE				
UNIT	INDIVIDUAL				Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
	Saf	On Duty fety Equipment	Crash		Safety Equipment					
		Row 01 - FRONT ROW	Seat Po 09 - R I		SHOULDER & LAP BELT					
		Helmet Use			Helmet Compliance					
		Eye Protection			Tint Compliance					
01	002	Injury S Injury NO AP	everity PARENT I		Airbag NON DEPLOYED					
		Ejected	Ejection Pa	th			Trapped/Extricated			
		NOT EJECTED Medical Transport	NULEJE	CTED/NOT APPL	EMS Agency Identifie	r	NOT TRAPPED EMS Run #			
	NOT TRANSPORTED Hospital				Date of Death		Time of Death			
		Distracted By Source								
		Distracted By								
		Distracted By Action								
		Non Motorist	Unit #	Location						
		Prior Action								

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		Action									
	IAL										
UNIT	INDIVIDUAL										
	NDI										
	-										
		Action Other								To/From School	
		Drug & Alcohol NO	lse	Suspected Drug Use							
	-	Alcohol Test Given		Alcohol Test Ty				Alcohol Te	st Results		
		TEST NOT GIVEN		Drug Test Type				ulta			
		Drug Test Given TEST NOT GIVEN		Didg rest type		L	Jug Test Res	uits			
0	002	Drug Type									
		Individual Condition	Individual Condition								
		APPEARED NORMAL									
	Unit	t Summary									
	Unit Status				Vehicle Operating As Classification			Unit Type			
	IN TRANSIT				D CLASS			Operating	Ao Endoro	amanta	
02	Vehicle Type UTILITY TRUCK/PICKUP TRUCK						Operating		sements		
	Total 1	I Occs Train/Bus # Recorded			Total # Citations Issued 0		Total T 0	railers	Total HazMat Types 0		
	Insurance? Direction Of Travel			Pre CrashTire Speed Li		Limit	Total La	anes			
UNIT		YES NORTHBOUND Most Harmful Event: Collision With			Special Function			Emergency			
			RT		NO SPECIAL FUNCTION Traffic Control				NOT APPLICABLE Traffic Control Inoperative/Missing		
	Traffic Way TWO-WAY, NOT DIVIDED				NO CONTROL			NO			
		ace Type			Road Curvature			_	Road Grade		
		CKTOP (BITUMINOUS) k Bus or HazMat)		STRAIGHT LEVEL						
	NO										
		Vehicle									
		License Plate Number 826365			Plate Type LTK - LIGHT	TRUCK	St WI	Country of I UNITED S			
02	02	Vehicle Identification Numb 1FTEW1EP5GKF02548			Make FORD		Year 2016	Model F150	Model		
		Color BLU - BLUE			Body Style PK - PICKUI	D		Bus Use			
	щ	Initial Contact Point			Vehicle Damag						
UNIT	IICL	12 - FRONT			42 EDONT					7 8 9 10 11 6	
כ	VEHICLE	Extent Of Damage MINOR DAMAGE			12 - FRONT					54321	
		Towed Due To Damage NOT TOWED			Vehicle Remov						
		What Driver Was Doing SLOW/STOPPING									
					1						

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Г			Vehicle Factors									
		Driver Prior Action Other		NOT APPLICABLE								
		Driver Actions										
	щ	FOLLOWING TOO CLOSE, (OPERATED MOTOR VE	HICLE IN INATTENTIV	'E, CARELESS (DR ERRATIC MANNER						
	VEHICLE											
5	H											
	>											
		Owner Name		Owner Address								
		KATHERINE KALBUS		1520 W PINE ST								
02	02	(608) 287-8580		BARABOO, WI 53913 , US								
	;	Sequence Of Events										
	2	Event	-									
	0	MOTOR VEH IN TRANSPOR	.1									
	02	Event										
	0											
	03	Event										
		Event										
	04	Lion										
۱.		Policy Holder										
UNIT		Insurance Company		Individual								
5		PROGRESSIVE-MUTUAL-IN	KATHERINE KALBUS									
		Individual										
		Driver	Citations Issued Sex									
	_			0	FEMALE							
	INDIVIDUAL	(608) 287-8580	Date of Birth	Race								
E	ē		WHITE									
UNIT	N	Address 1520 W PINE ST	Driver License Number									
	Z	BARABOO, WI 53913, US	STATE: WISCONSIN COUNTRY: UNITED STATES Safety Equipment									
ł		On Duty Cr										
	Sat	fety Equipment										
		Row	Seat Position	SHOULDER & LAP	BELT							
		01 - FRONT ROW	07 - LEFT									
		Helmet Use		Helmet Compliance								
		Eye Protection		Tint Compliance								
02	003	Injury Seve	rity	Airbag								
0	8	Injury NO APPA	RENT INJURY	NON DEPLOYED								
			ection Path			Trapped/Extricated						
			OT EJECTED/NOT APP									
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #						
		Hospital		Date of Death		Time of Death						
		Distracted Distracted		1								
	Distracted By OTHER DISTRACTION (ANIMAL, FOOD, GROOMING)											
		Distracted By Action OTHER ACTION (LOOKING	AWAY FROM TASK FT	C)								
		Striking Un		~,								
		Non Motorist										
I												

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		Prior Action						
		Action						
UNIT	INDIVIDUAL							
	4	Action Other						To/From School
	L	Drug & Alcohol	Suspected Alcohol Us NO	se	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	5	
02	003	Drug Type						
		Individual Condition						
			MAL					