WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Government Property Crash Type	Document Number Override	Primary Crash Document #	Agency Crash Number 24-11570		g Officer/Deputy B. BRUNKEN			
10/17/2024 10:28 PM 01 00 00 Reporting Threshold Government Property Active School Zone NO Crash Type DT4000 (STANDARD CRASH) Diagram Reconstruction By Photos By DEPUTY B. BRUNKEN 9106 HY 33 Additional Information PHOTOS	10/17/2024	_						
Government Property Active School Zone Reportable Crash Type DT4000 (STANDARD CRASH) Posscription Diagram Reconstruction By Photos By DEPUTY B. BRUNKEN 9106 Additional Information PHOTOS						ed		
Reportable DT4000 (STANDARD CRASH) Reconstruction By Reconstruction By Photos By DEPUTY B. BRUNKEN 9106 Additional information PHOTOS	On Emergency	Hit and Run	sure Work Zone	▼ Trailer o	or Towed	Reporting Threshold		
Reportable DT4000 (STANDARD CRASH) Pescription Diagram Reconstruction By Photos By DEPUTY B. BRUNKEN 9106 Additional Information PHOTOS		Active School Zone		Tags				
Photos By DEPUTY B. BRUNKEN 9106 HY 33 HY 33 HY 33 Additional Information PHOTOS	✓ Reportable	Crash Type DT4000 (STANDARD CRAS	SH)	Amende	d	Secondary Crash		
10/17/24 HY 33 / CTH U SC24-11570 HY 33 Additional Information PHOTOS	•							
	HY 33 / CTH U	HY 33	1		DEPUTÝ B.			

1 of 6

Crash Date 10/17/2024 Crash Time 99:99

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Crash Date 10/17/2024

Crash Time 99:99

Loc	ation 												
-	STH33 EB						Latitude			Longitude			
89 F							43.503288448				-89.633	8097925	
	CTHU EB HE TOWN OF FAIRFII	FLD					X Coordinate				Y Coord		
	AUK COUNTY						287136.5 4820075					<u>'5</u>	
							Structure	Туре					
<u></u>													
	sh Scene						Le:						
	Harmful Event IER NON-COLLISION		First Harmful Event Location ON ROADWAY										
	ner of Collision						Light Condition						
	NO COLLISION W/VE			DARK/UNLIT									
Road	Surface Condition(s)						Roadway Factor(s)						
DRY	,												
Envir	onment Factor(s)												
NON	IE						NONE						
Wea	ther Condition(s)												
CLE	AR												
Anim	al Type						Relation 1	To Traffice	way				
							TRAFFIC						
	h Classification - Location						Crash Classification - Jurisdiction						
_	Land				NO SPECIAL JUI			מפואנ	Special Study				
THE	Land						NO CONTROL					Special Study	
	n Interchange Area		on Location			Intersection							
NO	T	NON-	JUNCTION		_		INTERSE	CTION					
	ure Type E CLOSURE				Reasc	ns for Clos	ure						
	Initial Lane/Rd Closed	l Tir	me Initial Lane/Rd Closed		LAW	ENFORC	EMENT						
	7/2024):42 PM										
	All Lanes Open		me All Lanes Open						cene Clea	red			
	7/2024	11	1:18 PM		10/17/2024 11:18 PM				PM				
	Status			\/- b:-	J- O				- T				
	RANSIT				Vehicle Operating As Class D CLASS			assilication			Unit Type TRUCK		
	cle Type			DOLAGO						Operating As Endorsements			
	LITY TRUCK/PICKUP	TRUCK	Κ										
Total	Occs	Train	n/Bus # Recorded	Total # Citations Issued			Total Trail		railers	lers Total Haz		Mat Types	
3				0			1			0			
Insur	ance?		ction Of Travel	Pre CrashTire			Speed Lin		Limit			es	
	Harmful Event: Collision		STECOND	Speci	ial Fun	Mark ction	55		l En	2 Emergency Motor Vehic		icle Use	
	IER NON-COLLISION				NO SPECIAL FUNCTION						T APPLICABLE		
Traffic Way Traff					c Cont			Traffic Control Inoperative/Missing			tive/Missing		
, ,					CONT				NO				
					Curva				Road Grade				
BLACKTOP (BITUMINOUS) Truck Bus or HazMat						IGHT			Lt	EVEL			
NO	C DUS OF HAZIVIAL												
,	/ehicle												
	License Plate Number				е Туре			St		untry of Is			
	NG6892					HT TRUC	K						
01	Vehicle Identification Nur			Mak				Year	Mo				
0	1FTEW1EP9KFC339	٥/		FOF	ΚU		2019 F150						

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24-11570

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		Color BGE - BEIGE		Body Style PK - PICKUP Bus Use								
	ш	Initial Contact Point				Vehicle Dam						
╘	CL	06 - REAR						7 8 9 10 11				
UNIT	VEHICLE	Extent Of Damage			06 - REAR				6 <u>8</u> 12 5 4 3 2 1			
	K	MINOR DAMAGE			,							
		Towed Due To Damage NOT TOWED				Vehicle Removed By OPERATOR						
		What Driver Was Doing				Vehicle Factors						
		NEGOTIATING CUR	VΕ									
		Driver Prior Action Other	•		,	COUPLING DEVICE/TRAILER HITCH/SAFETY CHAINS						
		Driver Actions										
	ш	NO CONTRIBUTING	ACTION									
╘	VEHICLE											
UNIT	표											
	7											
		Owner Name				Owner A	Address					
_	1	MATTHEW BOYER					RAPER ST					
01	608) 963-8688					BARABOO, WI 53913 , US						
		2/-										
		Sequence Of Eve	nts									
	01	OTHER NON-COLLIS	SION									
	02	Event										
	03	Event										
		Event										
	04											
╘	I	Policy Holder										
UNIT		Insurance Company ERIE-INS-CO				Individual MATTHE	W BOYER					
		Trailer/Towed										
01		Trailer Plate #	Plate Type		Make	State			Country of Issuance			
		11-2 T		Name	QUAL	Address			Address			
E	ER/	Unit Type EQUIPMENT		Name	е				Address			
N S	Vehicle Identification Number								, ,			
	ı	Individual										
		Driver MATTHEW BOYER				Citations I	ssued	Sex MAIF				
	AL	(608) 963-8688				Date of Bi	rth	MALE Race				
╘	NDIVIDUAL					WHITE						
UNIT	$\overline{\mathbf{N}}$	Address 1310 DRAPER ST AF	OT 4			Driver License Number						
	Ĭ	BARABOO, WI 5391			STATE: WISCONSIN COUNTRY: UNITED STATES							
		[O	n Duty Crash			O-f-h-F-						
	Sat	fety Equipment	Duty Clasi	•		Safety Eq	uipiiielil					
	Row Seat Position						DER & LAP	BELT				
		01 - FRONT ROW	0	7 - LE	FT	Holmat Ca	mpliance					
		Helmet Use				Helmet Compliance						

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

		Eye Protection			Tint Compliance								
7	001	I	Injury Severity NO APPARENT I	NJURY	Airbag NON DEPLOYED								
		Ejected NOT EJECTED	Ejection Pa		ICABLE	Trapped/Extricated NOT TRAPPED							
		Medical Transport	1.101.202		EMS Agency Identifier		EMS Run #						
		NOT TRANSPORT	ED										
		Hospital			Date of Death		Time of Death						
		Distracted By	Distracted By Source NOT APPLICABL	e .E (NOT DISTRAC	CTED)								
		Distracted By Action NOT DISTRACTED)										
	•	Non Motorist	Striking Unit #	Location									
		Prior Action											
		Action											
	4												
⊨	INDIVIDUAL												
LIND	\geq												
_	N												
	_												
		Action Other						To/From School					
		Action Other						10/1 form ocnoor					
	,	Drug & Alcohol	Suspected Alcohol U	Jse	Suspected Drug Use			<u>I</u>					
		Alcohol Test Given Alcohol Test T					Alcohol Test Results						
		TEST NOT GIVEN		7 Hoorier Took Type			Alcohol Test Nesults						
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Type Drug Test Results								
5	001	Drug Type		1		•							
	0												
		Individual Condition											
		APPEARED NORMAL											
	ı	L Individual											
		Passenger			Citations Issued	Sex							
	AL	SIDNEE E BOYER			0 Date of Birth	FEMALE Race							
_	INDIVIDUAL				Date of Birtin	WHITE							
LIND	Σ	Address	ADT 4		Driver License Number								
	Ĭ	1310 DRAPER ST A BARABOO, WI 539											
		•											
	Saf	ety Equipment	On Duty Crash		Safety Equipment								
		Row				SHOULDER & LAP BELT							
		01 - FRONT ROW	09 - RI	IGHT									
		Helmet Use			Helmet Compliance								
		Eye Protection			Tint Compliance								
Nisco	onsin N	Aotor Vehicle Crash		This report	t does not include any Co	JIS data.	Crash Date	10/17/2024					

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2	002		Injury Seve			Airbag							
٠	0	, ,	NO ALLA			NON DEPLOYED		T 1/5 / 1					
		Ejected		ection Pat		ICABLE		Trapped/Extricated					
		NOT EJECTED Medical Transport	N	OT EJEC	CTED/NOT APPL	EMS Agency Identifier		NOT TRAPPED EMS Run #					
		NOT TRANSPORT	ED			LING Agency Identiller		LIVIS IXUII #					
		Hospital				Date of Death		Time of Death					
		Distracted By	Distracted E	By Source	;								
		-											
		Distracted By Action											
		Non Motorist	Striking Uni	it#	Location								
		Prior Action											
		Action											
	7												
_	INDIVIDUAL												
	JD.												
–													
	Z												
		Action Other							To/From School				
		Drug & Alcohol	Suspected .	Alcohol U	se	Suspected Drug Use							
		Drug & Alcohol NO			[NO							
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type		Alcohol Test Results						
		Drug Test Given			Drug Test Type								
		TEST NOT GIVEN			3 71	Drug Test Results							
7	002	Drug Type			l								
0	0												
		Individual Condition											
		ADDEADED NODA	// A I										
APPEARED NORMAL													
	Ì	Individual											
		Passenger	_			Citations Issued	Sex						
	Ļ	ZACKARY BOYER	₹			0	MALE						
	INDIVIDUAL					Date of Birth	Race WHITE						
	ΝE	Address				Driver License Number							
–	<u>-</u>	1310 DRAPER ST											
	=	BARABOO, WI 539	913 , US										
			0.01.0										
	Sat	fety Equipment	On Duty Cr	asn		Safety Equipment							
		Row		Seat Po	sition	SHOULDER & LAP BELT							
		02 - SECOND ROW 09 - RIGHT											
		Helmet Use				Helmet Compliance							
	For Dark et in												
		Eye Protection				Tint Compliance							
_	33		Injury Seve	rity		Airbag							
2	Injury Severity NO APPARENT INJURY				NJURY	NON DEPLOYED							

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Crash Time 99:99

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		Ejected	Ejection Pa				Trapped/Extricated		
		NOT EJECTED	NOT EJE	CTED/NOT APPL			NOT TRAPPED		
		Medical Transport			EMS Agency Identifier		EMS Run #		
		NOT TRANSPORT	ED						
		Hospital			Date of Death		Time of Death		
		District A D	Distracted By Source	e					
		Distracted By							
		Distracted By Action							
		Non Motorist	Striking Unit #	Location					
		Prior Action		•					
		Action							
	_								
_	INDIVIDUAL								
UNIT	ם								
5	Ξ								
	=								
		Action Other						To/From School	
	L	Drug & Alcohol	Suspected Alcohol U NO	Jse	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			
10	003	Drug Type							
		Individual Condition							
		APPEARED NORM	IΔI						
		AFFEARED NORN	IIAL						