WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash Document # Crash Time		Agency Crash Number 24-12472		Investigating Officer/Deputy DEPUTY J. MACASKILL			
0	Crash Date			Date A		Time Arrived			
ğ	11/08/2024	03:15 PM		11/08/		03:36 PM			
5	Date Notified 11/08/2024	Time Notified 03:18 PM		Total Units 03		Total Injured 01	Total Kille	ed	
3						+		Reporting	
8	On Emergency Hit	and Run			Work Zone	Trailer o	Threshold		
6TL0BJ1GQ0	Government Property		hool Zone	School NO	School Bus Related NO		Tags		
	Crash Type DT4000 (STANDARD CRASH)					Amende	d	Secondary Crash	
	Description								
	Diagram		(0) (0) (0) (0) (0) (0) (0) (0) (0) (0)			- - - -	Photos By Additional Info	rmation HAVIOR AND	

ON 11/8/24 AT APPROXIMATELY 1515, UNIT 2 WAS STOPPED ON STH 58 SOUTH OF SECTION 11 RD DELIVERING MAIL AS A RURAL MAIL CARRIER. UNIT 1 WAS DRIVING SOUTHBOUND ON STH 58 NEAR SECTION 11 RD. OPERATOR OF UNIT 2 STATED THAT THEY OBSERVED UNIT 1 DRIVING SOUTH ON STH 58 AND OBSERVED THEY DID NOT ATTEMPT TO SLOW DOWN AT ALL. UNIT 2 ATTEMPTED TO PULL INTO THE NEARBY DRIVEWAY BUT WAS STRUCK BY UNIT 1. UNIT 1 THEN FLIPPED ONTO ITS ROOF AND CROSSED THE CENTER LINE OF THE ROADWAY. UNIT 3 WAS DRIVING NORTHBOUND ON STH 58 SOUTH OF SECTION 11 RWHEN THIS HAPPENED AND STRUCK UNIT 1 AS IT CROSSED INTO THE NORTHBOUND LANES. OPERATOR OF UNIT 1 STATED THEY "BLACKED OUT" AND DID NOT REMEMBER ANYTHING THAT HAPPENED UNTIL THEY CAME TO INSIDE THE UPSIDE DOWN VEHICLE OF UNIT 1. OPERATOR OF UNIT 1 MADE STATEMENTS THAT THEY HAVE BEEN "BLACKING OUT" MULTIPLE TIMES OVER THE PAST WEEK.

Not Drawn to Scale

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Crash Date 11/08/2024

Crash Time 03:15 PM

LOC	ation										
_	STH58 SB					Latitude			Longitud	le	
	FT S			43.613305735			5735		602339		
	SECTION 11 RD					X Coordina	ate		Y Coord	inate	
	HE TOWN OF LA VAL AUK COUNTY	.LC				248263.7	65625		483365	4.5	
"•	AUR COUNT					Structure 7	Гуре		1		
						NO STRI	JCTURE				
Cras	sh Scene										
First	Harmful Event					First Harm	ful Event	Location			
мот	TOR VEH IN TRANSPO	ORT				ON ROA	DWAY				
Manr	ner of Collision	-				Light Cond	dition				
03 -	FRONT TO REAR					DAYLIGH					
Road Surface Condition(s)						Roadway I	Factor(s)				
DRY	•						. ,				
Envir	ronment Factor(s)										
NON	NONE				NONE						
Wea	ther Condition(s)										
CLE	AR										
Anim	al Type					Relation T	o Trafficw	ay			
								ON ROAD			
	h Classification - Location					Crash Classification - Jurisdiction					
PUBLIC PROPERTY							NO SPECIAL JURISDICTION				
Tribal Land						Access Co				Special Study	
I I					Intersection		071011				
						INTERSE	CTION				
	ure Type			Reaso	ons for Closi	ıre					
	L CLOSURE								_		
	Initial Lane/Rd Closed	Time Initial Lane/Rd Clos	ed	LAW	ENFORC	EMENT, T	OW TRU	ICK, FIRE/EM	S		
_	8/2024	03:15 PM			17: 0						
	All Lanes Open	Time All Lanes Open					ime Scene Cleared 4:28 PM				
	8/2024	04:28 PM		11/08	3/2024		U	4:28 PIVI			
	Summary =		1 \/- -:	-1- 0	A - O	:£:+:					
_	Status			•	erating As C	assification		Unit Type			
	RANSIT cle Type		DС	D CLASS					AUTOMOBILE Operating As Endorsements		
	SENGER CAR							Operating As	Endorser	nents	
	Occs	Train/Bus # Recorded	I Toto	I # Cito	tiona laguad		Total Tra	pilore	Total Haz	Mat Types	
10tai	Occs	Train/Dus # Necorded	1 1 1	ı # Cıla	tions Issued		0	aliers	0	wat Types	
	ance?	Direction Of Travel	- '				Speed L	imit	Total Lan	<u></u>	
YES		SOUTHBOUND		Pre	CrashTire Mark		55	iiiii C	2		
	Harmful Event: Collision		Spec	cial Fun			00	Emergency I		icle Use	
	TOR VEH IN TRANSP				IAL FUNC	TION		NOT APPL			
	ic Way		Traff	ic Cont	rol			Traffic Contr	ol Inoperat	tive/Missing	
				CONT				NO	•	J	
·				d Curva	iture			Road Grade			
BLA	CKTOP (BITUMINOU	S)	CUF	RVE R	IGHT			DOWNHIL	L		
Trucl	k Bus or HazMat	•									
NO											
'	Vehicle										
	License Plate Number		Pla	te Type			St	Country of Iss	uance		
	AHE7428		AU	Т			WI	UNITED ST	ATES		
	Vehicle Identification Nur	mber	Mal				Year	Model			
6	4T1BF1FK5DU69007	0	то	ΥT			2013	CAMRY			

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Color	Е	Body Style		Bus Use			
		WHI - WHITE	S	SD - SEDAN					
	ш	Initial Contact Point	V	/ehicle Damage					
⊨I	딩	01 - RIGHT FRONT CORNER					7 8 9 10 11		
L N	Ĭ	Extent Of Damage		15 - ALL AREAS			6 3 12		
7	VEHICL	DISABLING DAMAGE		5 4 3 2 1					
		Towed Due To Damage	V	ehicle Removed By		Į.			
		TOWED DUE TO DISABLING	DAMAGE	SHIELDS TOWING					
		What Driver Was Doing	V	Vehicle Factors					
		NEGOTIATING CURVE							
		Driver Prior Action Other	7	NOT APPLICABLE					
		Dairean Antinum							
		Driver Actions 103,107,118,122							
_	E.	100,107,110,122							
L N	VEHICL								
⊃	百								
	>								
		Owner Name		Owner Address					
_	_	JENNIFER CURTIS		W6163 HORKAN					
2	01	(608) 542-0736		NEW LISBON, WI 53950 , US					
	•	Sequence Of Events							
	01	Event MOTOR VEH IN TRANSPOR	T						
	0		l						
	02	Event CROSS CENTERLINE							
	03	Event OVERTURN/ROLLOVER							
		Event							
	04	MOTOR VEH IN TRANSPORT	Γ						
		Policy Holder							
L N	Ī	Insurance Company		INDIVIDUAL					
⊃		GEICO-CASUALTY-CO		ELIZA CURTIS					
		Individual							
		DRIVER		Citations Issued	Sex				
	_	ELIZA VILLEN CURTIS		1	FEMALE				
	DUAL	(608) 542-0736		Date of Birth	Race				
╘┃	ם				WHITE				
	INDIN	Address		Driver License Number					
_	Ĭ	W6163 HORKAN RD NEW LISBON, WI 53950, US	3	STATE: WISCONSIN COUNTRY: UNITED STATES					
		, , , , , , , , , , , , , , , , , , , ,							
		On Duty Cra	ash	Safety Equipment					
	Saf	ety Equipment		Calety Equipment					
		Row	Seat Position	SHOULDER & LA	P BELT				
		01 - FRONT ROW	07 - LEFT						
		Helmet Use		Helmet Compliance					
		Eye Protection		Tint Compliance					
		Initiat Course	ih	Airbog					
2	90	Injury Sever	ED MINOR INJURY	Airbag DEPLOYED-SIDE					
			ection Path	DEFECTED-SIDE		Trapped/Extricated			
			OT EJECTED/NOT APPL	ICABLE		NOT TRAPPED			
		Medical Transport		EMS Agency Identifie	r	EMS Run #			
		EMS GROUND		6001024		20241108048			

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

		Hospital				D	ate of Death			Time of Dea	th		
		MILE BLUFF MED	CTR										
			Distracted By	Source									
		Distracted By Action UNKNOWN											
		Non Motorist	Striking Unit #		Location								
		Prior Action											
		Action											
_	OUAL												
LNO	INDIVIDUAL												
	=												
		Action Other										To/From School	
	L	Orug & Alcohol	Suspected Alc NO	ohol Us	е		uspected Drug Use I O				-		
		Alcohol Test Given TEST NOT GIVEN	ST NOT GIVEN		Alcohol Test Typ	е				Alcohol Test Results			
		Drug Test Given TEST NOT GIVEN			Drug Test Type			Drug 7	Test Results				
6	001	Drug Type											
		Individual Condition											
		CONFUSED OR D	ISORIENTED	(NON	LUCID)								
	ļ	/iolations											
	Ì	UTC Number	Issue To?	Statu	te Number	D	escription						
	0	BD755157	001	346.	89(1)		NATTENTIVE DRIVI	NG					
	Unit	Summary •	I										
		Status			,	Vehic	cle Operating As Classif	fication		Unit Type			
		RANSIT			1	D CL	_ASS			AUTOMOE			
02	PAS	cle Type SENGER CAR								Operating As Endorsements			
	1	Occs	Train/Bu			Total 0	# Citations Issued		Total Traile		Total HazM 0		
□	YES		Direction SOUTH		D		Pre CrashTire Mark		Speed Lim 55		Total Lanes		
UNIT	MOT	Harmful Event: Collision				NO S	ial Function SPECIAL FUNCTIO	N		NOT APPL	ICABLE		
	Traffic Way TWO-WAY, NOT DIVIDED			ı	NO (c Control CONTROL			Traffic Control Inoperative/Missing NO				
	BLA	ace Type CKTOP (BITUMINO	OUS)			Road Curvature CURVE RIGHT				Road Grade DOWNHILL			
	Truck NO	k Bus or HazMat											
	1	/ehicle											
		License Plate Number 265XFT				Plate	е Туре Г			Country of Iss UNITED ST			
													_

Form DT4000

Wisconsin Motor Vehicle Crash

Crash Date 11/08/2024 This report does not include any CJIS data. 4 of 8 Crash Time 03:15 PM

WISCONSIN MOTOR VEHICLE CRASH REPORT

8		Vehicle Identification Number		Ma	ке	Year	Model			
02		1J4GZ39189L717947		JE	EP	2009	WRANGLER U			
		Color		Boo	Body Style Bus Use					
		SIL - SILVER (ALUMINUM	M)	LL	- CARRYALL					
	щ	Initial Contact Point		Vehicle Damage 7 8 9 10 11						
≒	ᅙ	07 - LEFT REAR CORNE	R	6 12						
LNO	VEHICL	Extent Of Damage			- LEFT REAR COR	NER		5 4 3 2 1		
	5	MINOR DAMAGE						3 4 3 2 1		
		Towed Due To Damage			nicle Removed By					
		NOT TOWED		OPERATOR						
		What Driver Was Doing		Vel	nicle Factors					
		SLOW/STOPPING		NOT APPLICABLE						
		Driver Prior Action Other								
		Driver Actions								
		Driver Actions 123								
_	VEHICLE	120								
LNO	≌									
5	픕									
	>									
		Owner Name			Owner Address					
		STEVIE SCHULTZ			Owner Address 521 3RD ST					
02	02	(608) 393-2438			REEDSBURG, WI	53959 , US				
		On more of Francis								
	,	Sequence Of Events Event								
	6	MOTOR VEH IN TRANSP	ORT							
	02	Event								
	03	Event								
		Event								
	0	Event								
—	I	Policy Holder								
LIND		Insurance Company		(GOVERNMENT					
_		SELF-INSURED		US POSTAL SERVICE						
	ı	Individual								
		DRIVER			Citations Issued	Sex				
	_	STEVIE SCHULTZ		()	FEMALE				
	¥	(608) 393-2438		ſ	Date of Birth	Race				
⊨	₫					WHITE				
	INDIVIDUA	Address			Oriver License Number					
_	呈	521 3RD ST REEDSBURG, WI 53959	116	STATE: WISCONSIN COUNTRY: UNITED STATES						
	_	KEEDSBUKG, WI 53959	, 03	STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sat	On Dut fety Equipment	y Crash	8	Safety Equipment					
	Sai	ety Equipment								
		Row	Seat Position	١	SHOULDER & LAP E	BELT				
		01 - FRONT ROW	09 - RIGHT							
		Helmet Use			Helmet Compliance					
		Eye Protection		7	int Compliance					
٠.	2	Injury S	Severity	1	Airbag					
05	002		PPARENT INJURY		NON DEPLOYED					
		Ejected	Ejection Path				Trapped/Extricated			
		NOT EJECTED	PPLIC	ABLE		NOT TRAPPED				

WISCONSIN MOTOR VEHICLE CRASH REPORT

	Medical Transport				EMS Agency Identifier			EMS Run #		
		NOT TRANSPORTED								
		Hospital			Date of Death			Time of Dea	th	
		Distracted By NO	racted By Source T APPLICABL	E (NOT DISTRA	ACTED)		l			
		Distracted By Action NOT DISTRACTED								
		Non Motorist	ing Unit#	Location						
		Prior Action								
LINI	INDIVIDUAL	Action								
		Action Other								To/From School
	L	Orug & Alcohol NO	pected Alcohol U	se	Suspected Drug Use NO					
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Typ	pe			Alcohol Test	t Results	
		Drug Test Given TEST NOT GIVEN Drug Test Typ		Drug Test Type		Drug Test	Results			
05	002	Drug Type								
		Individual Condition APPEARED NORMAL								
	l Init	t Summary								
	Unit	Status ——			Vehicle Operating As Classi	fication		Unit Type		
	IN T	RANSIT			D CLASS			TRUCK		
3		cle Type						Operating A	s Endorsem	ents
0		LITY TRUCK/PICKUP TI	RUCK Train/Bus # Red	pordod	T-4-1 # O'4-4'	I Tot	otal Traile	ro I	Total HazM	lot Typos
	10tai	Occs	Traili/Dus # Net		Total # Citations Issued	0	nai ITalici	15	0	iat Types
		ance?	Direction Of Tra		Pre CrashTire	Sp	eed Limit	t	Total Lanes	S
UNIT	YES		NORTHBOU		Mark	55			2	I- II
5 D	MO	Harmful Event: Collision Wi ΓΟR VEH IN TRANSPOR			Special Function NO SPECIAL FUNCTIO	N		NOT APPL	ICABLE	
		ic Way			Traffic Control NO CONTROL			Traffic Contr	ol Inoperativ	ve/Missing
	TWO-WAY, NOT DIVIDED Surface Type				Road Curvature			Road Grade	·	
		CKTOP (BITUMINOUS)			CURVE LEFT			Road Grade UPHILL		
	Trucl	k Bus or HazMat		•						
		Vehicle								
		License Plate Number			Plate Type	St		Country of Iss		
		IZZIE1			LTK	WI		UNITED ST	ATES	
03	03	Vehicle Identification Numb 1FTEW1E48KFA61909			Make FORD	Yea 201		Model F150		

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Color		Body Style			Bus Use					
		BLK - BLACK		PK - PICKUP			243 030					
					<u> </u>			1				
_	"	Initial Contact Point		Vehicle Damag				7 8 9 10 11				
UNIT	\overline{c}	11 - LEFT FRONT CORNER		01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE								
5	VEHICLE	Extent Of Damage		FRONT, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT								
	5	DISABLING DAMAGE		CORNER, 12 - 1 ROW								
		Towed Due To Damage		Vehicle Removed By								
		TOWED DUE TO DISABLING		SHIELDS TO								
		What Driver Was Doing		Vehicle Factors								
		NEGOTIATING CURVE										
		Driver Prior Action Other		NOT APPLIC	ABLE							
		Driver Actions										
	щ	<u>ц</u> ¹²³										
╘	VEHICLE											
UNIT	포											
_	3											
		Owner Name		Owner Add	lress							
_	~	TANDY GARVIN			OLPH RE							
03	03	(608) 852-7246		EAU CLAIRE, WI 54701 , US								
	,	Sequence Of Events										
	,	Event										
	2	MOTOR VEH IN TRANSPOR	Т									
		Event										
	02	Event										
	03	Event										
	9	Event										
╘	Į.	Policy Holder										
UNIT		Insurance Company		INDIVIDUAL								
ر		PROGRESSIVE-UNIVERSAL	-INSURANCE-COMP	TANDY GARVIN								
	1	Individual										
		DRIVER		Citations Issued Sex								
	- 1	TANDY GARVIN		0		MALE						
	₹	(608) 852-7246				Race						
_	DUAI											
NO	₹	Address		Driver License Number								
n	INDIN	2705 RUDOLPH RD		DITYGI LICETISE MUTINET								
	Z	EAU CLAIRE, WI 54701 , US	;	STATE: WISCONSIN COUNTRY: UNITED STATES								
		On Duty Cr	ash	Safety Equip	ment							
	Sat	fety Equipment	3011	Calety Equip	illelit							
			0 10 %	NONE LISE	D VEHIC	CLE OCCUPANT	-					
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	NONE USE	D - VERIC	LE OCCUPANT						
			U/ - LEFT	11-1	-11							
		Helmet Use		Helmet Comp	oliance							
		F Destantion		T: 10 !!								
		Eye Protection		Tint Complia	nce							
			rity	Airb a ~								
03	003	Injury Seve	=	Airbag	OVED							
					OYED.		Toons and					
		'	ection Path				Trapped/Extricated					
			OT EJECTED/NOT APP				NOT TRAPPED					
		Medical Transport		EMS Agency	Identifier		EMS Run #					
		NOT TRANSPORTED										

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 11/08/2024

Crash Time 03:15 PM

		Hospital			Date of Death		Time of Death	
		Distracted By	Distracted By Source NOT APPLICABL	∍ .E (NOT DISTRAC	STED)			
		Distracted By Action NOT DISTRACTED						
		Non Motorist	Striking Unit#	Location				
		Prior Action						
		Action						
	NAL							
LNO	INDIVIDUAL							
_								
		Action Other						To/From School
	ı	Drug & Alcohol	Suspected Alcohol U	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		
03	003	Drug Type						
		Individual Condition						
		APPEARED NORM	//AL					