## 6TL0BC3B94

24-12725

# WISCONSIN MOTOR VEHICLE CRASH REPORT

Document Number Override	Primary Crash D	Document #	Ageney	Creek Number	Investigat	ing Off	icer/Deputy			
Document Number Overnde	Primary Crash L	Jocument #	Agency 24-127	Crash Number 25		nvestigating Officer/Deputy DEPUTY W. VERTEIN				
Crash Date	Crash Time		Date Ar							
11/15/2024	01:30 PM		11/15/2		01:47 PM					
Date Notified	Time Notified		Total Ur	nits	Total Inju	red	Total Kille	d		
11/15/2024	01:33 PM		01		00		00			
On Emergency	it and Run	Lane Closu	sure Work Zone		Trailer or		Towed	Reporting Threshold		
Government Property				School Bus Related Ta			ags			
Reportable	Crash Type DT4000 (STANDARD CRASH)				Amended			Secondary Crash		
Description										
Diagram						Re	construction	ву		
- Ex										
						Ph	otos By			
Not to scale										
							ditional Infor	mation		
			_			NC	ONE			
CTHA										
01										
	01									
	******************									
✓ I, a sworn law enforceme ON THE DESCRIBED DATE, TIME,										

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6

UNIT

5

UNIT

## WISCONSIN MOTOR VEHICLE CRASH REPORT

Loc	ation 🛛 🗖									
ON CTHA SB								Longitu		
290 FT W					43.58979228			-89.74	-89.744266349	
OF CTHT SB IN THE VILLAGE OF LAKE DELTON					X Coordinate Y Co			Y Coor	dinate	
IN SAUK COUNTY					278466.375 4829973					
					Structure					
					NO STR	UCTURE	:			
Cra	sh Scene 🛛 🗖									
First	Harmful Event				First Harn	nful Event	Location			
FIR	E/EXPLOSION				ON ROA	DWAY				
Man	ner of Collision				Light Con	dition				
00 -	NO COLLISION W/VE	HICLE IN TRANSPORT			DAYLIG	нт				
Road	d Surface Condition(s)				Roadway	Factor(s)				
DR۱	(									
Envi	ronment Factor(s)				-					
NO	NE				NONE					
Wea	ther Condition(s)				-					
CLE	AR									
Anim	nal Type				Relation 1	To Trafficw	ay			
							ON ROAD			
	h Classification - Location BLIC PROPERTY				Crash Classification - Jurisdiction NO SPECIAL JURISDICTION					
_	al Land				Access Control Special Study					
					NO CON	ITROL				
With NO	in Interchange Area	Junction Location NON-JUNCTION		Intersection	tion Type N INTERSECTION					
		NON-JUNCTION		NOTAN	INTERSE					
	t Summary		N/abiala On		N : <b>f</b> : + :	-				
_			Vehicle Ope	-	lassincation	1	Unit Type TRUCK			
	RANSIT		D CLASS				Operating A	e Endored	amente	
		TRUCK					operating /		Smonto	
Tota	Occs	Train/Bus # Recorded	Total # Cita	itions Issued	ł	Total Tra	ailers	Total Ha	zMat Types	
1			0			0		0		
	rance?	Direction Of Travel	Pre	Pre CrashTire					Total Lanes	
YES	<b>i</b>	SOUTHBOUND		Mark 55			2			
	Harmful Event: Collision	With	Special Fur	nction	Emergency Motor Vehicle Use CTION NOT APPLICABLE					
	E/EXPLOSION						-			
	ic Way		Traffic Cont					rol Inopera	ative/Missing	
	D-WAY, NOT DIVIDED		NO CONT		NO Road Grade					
	Surface Type Road Curvature BLACKTOP (BITUMINOUS) STRAIGHT					DOWNHILL				
	k Bus or HazMat	0,	ontaion				Domini			
NO										
,	Vehicle									
	License Plate Number		Plate Type	;		St	Country of Is	suance		
	40958M		MLG			WI	UNITED S	TATES		
~	Vehicle Identification Number     Make       IGTGK24K1RE563395     GMC					Year	Model			
0					1994		SIERRA			
Color Body Style BLU - BLUE PK - PICKUP							Bus Use			
ш	Initial Contact Point		Vehicle Da					<u> </u>		
5	00 - NON-COLLISION	N		0		R (12 - PI	IGHT SIDE		7 8 9 10 11	
				ONT CORNER, 02 - RIGHT SIDE GHT SIDE MIDDLE, 09 - LEFT SIDE						
Ξ	Extent Of Damage						- LEFT FROI		54321	

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# WISCONSIN MOTOR VEHICLE CRASH REPORT

		Towed Due To Damage TOWED DUE TO DISABLI			hicle Removed By ATTS WRECKER					
		What Driver Was Doing			hicle Factors					
		GOING STRAIGHT		10						
		Driver Prior Action Other		го	HER					
		Driver Actions								
	щ	123								
UNIT	ICL									
S	VEHICLE									
	>									
		Owner Name			Owner Address	AD 22				
6	01	RONALD SOMA (608) 356-5659			E13591 STATE RO BARABOO, WI 539					
	-	. ,								
	ļ	Sequence Of Events								
	01	Event FIRE/EXPLOSION								
	02	Event								
	03	Event								
		Event								
	04									
F	l	Policy Holder								
UNIT		Insurance Company STATE-FARM-CLASSIC-INS-CO			INDIVIDUAL RONALD SOMA					
			13-00	L'	KONALD JONIA					
	1	Individual DRIVER DAVID MUTCHLER (608) 566-4586			Citations Issued	Sex				
	_				0 MALE					
	NDIVIDUAL				Date of Birth	Race WHITE				
UNIT		Address	Driver License Number							
	NDI	246 OAK ST	6 OAK ST			STATE: WISCONSIN COUNTRY: UNITED STATES				
	=	LYNDON STATION, WI 539	44 , US		STATE. WISCONSIN	COUNTRY. UN	HED STALES			
	Sat	On Duty	Crash	:	Safety Equipment					
	Jai	fety Equipment		SHOULDER & LAP BELT						
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	[	SHOULDER & LAF	OULDER & LAP DELI				
		Helmet Use		Helmet Compliance						
		Eye Protection			Tint Compliance					
	-	Injury Severity			Airbag					
0	001	Injury NO APP	Injury NO APPARENT INJURY			NON DEPLOYED				
		Ejected Ejection Path					Trapped/Extricated			
		NOT EJECTED NOT EJECTED/NOT APP Medical Transport			CABLE EMS Agency Identifier		NOT TRAPPED EMS Run #			
		NOT TRANSPORTED								
		Hospital		1	Date of Death		Time of Death			
		Distracted By NOT AP		DACT			1			
		Distracted By Action								
		NOT DISTRACTED								

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# WISCONSIN MOTOR VEHICLE CRASH REPORT

		Non Motorist	Striking Unit #	Location				
		Prior Action						
UNIT	INDIVIDUAL	Action						
		Action Other						To/From School
	L	Drug & Alcohol	Suspected Alcohol U NO	lse	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						
			MAL					