6TL0F1BQ8R

24-13828

WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN **1300 LANGE COURT BARABOO, WI 53913**

Document Number Override	Daine Carack D #					
One-b Dete	Primary Crash Document #	Agency (24-1382	Crash Number 28	Investigating Offi DEPUTY D. K		
Crash Date 12/19/2024	Crash Time 12:07 PM	Date Arri 12/19/2		Time Arrived 12:25 PM		
Date Notified 12/19/2024	Time Notified 12:07 PM	Total Uni 01	its	Total Injured 00	Total Kille	ed
On Emergency Hi	t and Run Lane Clo	sure	Work Zone	Trailer or	Towed	Reporting Threshold
Government Property	Active School Zone	School B NO	us Related	Tags		
✓ Reportable	Crash Type DT4000 (STANDARD CRAS	SH)		Amended		Secondary Crash
Description	.1					
	– III) ern D				otos By	

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Location

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Time 12:07 PM

859	ON MIRROR LAKE RD 859 FT W OF FERN DELL RD IN THE TOWN OF DELLONA IN SAUK COUNTY				43.55782				7273549	
IN 7					X Coordina 270836.7	ordinate Y Coordinat 836.71875 4826675.5				
IN S					Structure Type					
						JCTURE				
Cra	sh Scene									
_	t Harmful Event				First Harm	ıful Event l	ocation			
DIT	СН				ON ROA					
Man	nner of Collision				Light Cond	dition				
00 -	NO COLLISION W/V	EHICLE IN TRANSPORT			DAYLIGI	НT				
Roa	d Surface Condition(s)				Roadway	Factor(s)				
SNO	OW									
Env	ironment Factor(s)									
NO	NE				NONE					
Wea	ather Condition(s)				1					
SNO	ow									
Anir	nal Type				Relation T		•			
Crr	sh Classification - Location	<u> </u>					N ROAD - Jurisdiction			
	sn Classification - Location BLIC PROPERTY	n					- Jurisdiction RISDICTION			
_	al Land				Access Co		VISDICTION		Special Study	
	Tilbal Laliu				NO CONTROL			Special Stady		
	Within Interchange Area Junction Location				ction Type					
NO		NON-JUNCTION		NOT AN	INTERSE	CTION				
	t Summary \blacksquare									
1	Status		-	erating As C	Classification		Unit Type			
	TRANSIT D CLASS				AUTOMOBILE Operating As Endorsements					
	icle Type						Operating /	As Endorse	ments	
_	ORT) UTILITY VEHIC	Train/Bus # Recorded	Total # Cita	tione leeue	4	Total Trailers		Total HazMat Types		
1	11 0003	Train/Bac // Nocerada	Total # Citations Issued 0		0			0		
Insu	rance?	Direction Of Travel	Pre	CrashTire	•	Speed Limit		Total Lanes		
YES	S	WESTBOUND		Mark		35		2		
Mos	t Harmful Event: Collision	With		Special Function NO SPECIAL FUNCTION Traffic Control		Emergency Motor Vehicle Use NOT APPLICABLE				
	fic Way		Traffic Cont			Traffic Control Inoperati		ative/Missing		
	O-WAY, NOT DIVIDE)	NO CONT				NO		Ü	
	ace Type			Road Curvature CURVE LEFT		Re		Road Grade		
BL	ACKTOP (BITUMINOL	JS)	CURVE L				LEVEL			
	ck Bus or HazMat									
NO										
	Vehicle License Plate Number		Plate Type		ı	St	Country of Is	SSUANCA		
	ANP8148		AUT		WI	UNITED STATES				
	Vehicle Identification Nu	Make			Year	Model				
6	5N1AZ2MS1KN1434	NISS			2019	MURANO				
	Color		Body Style			Bus Use				
	GRY - GRAY		UT - SPORT UTILITY VEHICLE							
Щ	Initial Contact Point	Vehicle Da	mage					7 8 9 10 11		
<u></u>	01 - RIGHT FRONT					GHT SIDE	_{DE}	6 12	2	
VEHICL	Extent Of Damage DISABLING DAMAGE					4 - RIGHT SI 12 - FRONT	DE	5 4 3 2 1		
>	DISABLING DAMAG) <u> </u>	1127 111, 0	REAR, 05 - RIGHT REAR CORNER, 12						
onoin	Motor Vehicle Crash	TH	nis report does not	include an	CIIS data			Crash Date	te 12/19/2024	

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		Towed Due To Damage		Vehicle Removed By				
		TOWED DUE TO DISABL	ING DAMAGE	PLATTS WRECKER				
		What Driver Was Doing		Vehicle Factors				
		NEGOTIATING CURVE						
		Driver Prior Action Other		NOT APPLICABLE	NOT APPLICABLE			
		Driver Actions						
	쁘	SPEED TOO FAST/COND)					
LNO	<u> </u>							
5	VEHICLE							
	>							
		Owner Name KARI SIMPSON		Owner Address S2181 BUSSE LN	N			
5	01	(920) 851-9862		BARABOO, WI 5				
_		(,		,	,			
	3	Sequence Of Events						
	01	Event DITCH						
	2	Event						
	02	TREE						
	03	Event						
		Event						
	04							
_	ì	Policy Holder						
LIND		Insurance Company		INDIVIDUAL				
–		ALLSTATE-INS-CO		KARI SIMPSON				
	i	Individual						
		DRIVER		Citations Issued	Sex			
		KARI SIMPSON		0 FEMALE				
	A	(920) 851-9862		Date of Birth	Race			
⊨	INDIVIDUAL			WHITE				
	≥	Address		Driver License Number				
_		S2181 BUSSE LN BARABOO, WI 53913,U	ıe	STATE: WISCONSIN COUNTRY: UNITED STATES				
	_	DAINADOO, WI 33913 , O		OTATE: WIGOONS	000	III EB GIAILG		
	Saf	On Duty fety Equipment	y Crash	Safety Equipment				
			Lo de W	CHOILI DED 8 1 VE	DELT			
		Row Seat Position 01 - FRONT ROW 07 - LEFT		SHOULDER & LAP BELT				
		Helmet Use	07 - LL1 1	Helmet Compliance				
		Ticiliet 03c		Tomat compilation				
		Eye Protection		Tint Compliance				
		•						
_	Ξ'	Injury S	everity	Airbag				
2	90	Injury _{NO AP}	PPARENT INJURY	NON DEPLOYED				
		Ejected	Ejection Path	•		Trapped/Extricated		
		NOT EJECTED	NOT EJECTED/NOT AP	PLICABLE		NOT TRAPPED		
		Medical Transport		EMS Agency Identifier		EMS Run #		
		NOT TRANSPORTED						
				Date of Death Time of Death				
		Hospital		Date of Death		Time of Death		
			ted By Source	Date of Death		Time of Beauti		
			ied By Source IPPLICABLE (NOT DISTR			Time of Deadi		
		Distract	ied By Source NPPLICABLE (NOT DISTR			Time of Deadi		

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		Non Motorist	Striking Unit #	Location				
		Prior Action						
LIND	INDIVIDUAL	Action						
		Action Other						To/From School
	L	Orug & 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		
2	001	Drug Type		•				
		Individual Condition						
		APPEARED NORM	//AL					