## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Docur	Crash Date 02/11/2025 Date Notified 02/11/2025		Primary Crash Document #  Crash Time 05:07 PM  Time Notified 05:09 PM		25-01287         DEP           Date Arrived         Time		Investigating Officer/Deputy DEPUTY A. WILCOX Time Arrived 05:27 PM		
T   ^^//									
							Total Kill	led	
	n Emergency	Hit and Run	Lane Clo	osure	Work Zone	Trailer	or Towed	Reporting Threshold	
	Government Property	Acti	ve School Zone	School <b>NO</b>	Bus Related	Tags			
<b>✓</b> R	Reportable	Crash Ty DT4000	oe (STANDARD CRAS	SH)		Amend	led	Secondary Crash	
Desc	cription =					•	Reconstruction		
	Cemetery Road	Decker		lot to Scale			Photos By A. WILCOX  Additional Inf PHOTOS		
ON 02 ON CI 1 ENT	2/11/2025, I WAS DISF EMETERY ROAD. WH FERS THE DITCH, CAI	PATCHED TO CEME HILE NEGOTIATING USING DISABLING	TERY ROAD AND DEC A LEFT-HAND CURVE	CKER ROAD , UNIT 1 LOS DWING REMO	ST CONTROL DUE TO T OVED. THE VEHICLE. U	TON FOR A TRAF	AY BEING SNO	NIT 1 WAS TRAVELING W/B W-COVERED AND ICY. UNIT E DID NOT HAVE	

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	_oc	ation <b>——</b>									
·		RSECTION				Latitude			Longitud	de	
		CEMETERY RD				43.547021228			-90.094059714		
	AT D	ECKER RD				X Coordinate			Y Coordinate		
		HE TOWN OF IRONT	ON			250050.6			482621		
	IN S	AUK COUNTY							70202		
						Structure NO STR	UCTURE				
(	Cras	sh Scene				•					
ī	-	Harmful Event				First Harm	nful Event Lo	cation			
	DIT					ON ROA		ocation			
ŀ		ner of Collision				Light Cond					
			EHICLE IN TRANSPORT			DUSK	JILIOH				
			ENICLE IN TRANSPORT				<b>F</b> ( ( )				
	Road	Surface Condition(s)				Roadway	Factor(s)				
	WE	, SNOW, ICE									
İ	Envir	onment Factor(s)				1					
	NON	IE				NONE					
ŀ	Wea	her Condition(s)				1					
	CLC	UDY									
ŀ	Anim	al Type				Relation T	o Trafficway	/			
							CWAY - ON				
١		n Classification - Location	1				ssification -				
	PUBLIC PROPERTY					NO SPECIAL JURISDICTION					
	Tribal Land					Access Control Special Study NO CONTROL					
ŀ	Withi	n Interchange Area	Junction Location		Intersection						
	NO	Ü	NON-JUNCTION			INTERSECTION					
į	Jnit	Summary									
П		Status		Vehicle Op	Vehicle Operating As Classification Unit Type						
	IN T	RANSIT		D CLASS	i	AUTOMOBILE					
.	Vehic	cle Type				Operating As Endorsements				ments	
5	PAS	SENGER CAR									
ľ	Total	Occs	Train/Bus # Recorded	Total # Cita	ations Issued	0		ilers Total H		azMat Types	
	3			1					0		
ŀ	Insur	ance?	Direction Of Travel	Dro	CrashTire			imit Total		Lanes	
	NO		WESTBOUND		Mark			2			
	Most	Harmful Event: Collision	With	Special Fur				Emergency Motor Vehicle			
	DIT			NO SPEC	CIAL FUNC	CTION		NOT APPLICABLE			
j		c Way			Traffic Control				Traffic Control Inoperative/Missing		
		-WAY, NOT DIVIDED	)	NO CONT	rol			NO			
İ	Surfa	се Туре		Road Curva	ature			Road Grade LEVEL			
		CKTOP (BITUMINOU	IS)	CURVE L	EFT						
	Truck	Bus or HazMat									
4		/ehicle									
		License Plate Number		Plate Type	9		St	Country of Iss	suance		
		AEP7122	AUT	* '		WI	JNITED STATES				
	01	Vehicle Identification Nu	Make			Year	Model				
	0	3FA6P0HD4KR10379 Color	97	FORD Body Style	2		2019	FUSION Bus Use			
- 1		GRY - GRAY		Body Style SD - SEDAN				Dus Use			
				Vehicle Damage				-			
	щ	Initial Contact Point		Venicie Da	amage						
		Initial Contact Point  12 - FRONT		Venicie Da	amage					7 8 9 10 11	
					amage . AREAS					6 2 12	
	VEHICLE	12 - FRONT	·E		J						

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		Towed Due To Damage		Vehicle Removed By				
		TOWED BUT NOT DUE TO I	DISABLING DAMAG	SHIELDS TOWING				
		What Driver Was Doing		Vehicle Factors				
		NEGOTIATING CURVE		NOT APPLICABLE				
		Driver Prior Action Other		NOT APPLICABLE				
		Driver Actions						
	ш	SPEED TOO FAST/COND, F	AILURE TO CONTROL					
╘	CL							
L NO	VEHICLE							
_	VE							
		Owner Name  HANNAH NIMOCKS		Owner Address 151 COUNTY HW	ΥV			
6	01	(608) 604-3635		CAZENOVIA, WI 5				
		Sequence Of Events						
	01	Event DITCH						
	02	Event						
	03	Event						
	_	Frant						
	04	Event						
		ndividual						
		DRIVER		Citations Issued Sex				
	_	HANNAH NIMOCKS		1	FEMALE			
	INDIVIDUAL	(608) 604-3635		Date of Birth	Race			
	JD.	A 1.1		Driver License Number	WHITE			
5		Address 151 COUNTY HWY V						
	Z	CAZENOVIA, WI 53924 , US	;	STATE: WISCONSIN COUNTRY: UNITED STATES				
	Saf	On Duty Cr	rash	Safety Equipment				
		Row	Seat Position	SHOULDER & LAP BELT				
		01 - FRONT ROW	07 - LEFT					
		Helmet Use		Helmet Compliance				
		Eye Protection		Tint Compliance				
_	Ξ,	Injury Seve	rity	Airbag				
2	90		RENT INJURY	DEPLOYED-COMB	INATION			
			ection Path			Trapped/Extricated		
		NOT EJECTED No Medical Transport	OT EJECTED/NOT APF	EMS Agency Identifier		NOT TRAPPED EMS Run #		
		NOT TRANSPORTED		LIVIS Agency Identille		LWG Kull#		
		Hospital		Date of Death		Time of Death		
		Distracted By NOT APP	By Source LICABLE (NOT DISTRA	ACTED)				
		NOT DISTRACTED						
		Non Motorist Striking Un	it # Location					

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ı										
		Prior Action								
Action Action To/From Sc										
		Suspected Alcohol Use  Drug & Alcohol NO			Suspected Drug Use					
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results			
		TEST NOT GIVEN								
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	3			
10	001	Drug Type								
		Individual Condition								
		APPEARED NORMAL								
	i	Individual								
		PASSENGER RYAN NIMOCKS (608) 391-4404  Address 151 COUNTY HWY V APT 2 CAZENOVIA, WI 53924 , US			Citations Issued  0	Sex MALE				
_	INDIVIDUAL				Date of Birth	Race WHITE				
L N N	M				Driver License Number	ver License Number				
_	IN				STATE: WISCONSIN COUNTRY: UNITED STATES					
	Saf	On Duty <b>fety Equipment</b>	Crash		Safety Equipment					
		Row 01 - FRONT ROW	Seat Position  09 - RIGHT		SHOULDER & LAP	BELT				
		Helmet Use			Helmet Compliance					
		Eye Protection  Injury Severity  Injury NO APPARENT INJURY			Tint Compliance					
2	002				Airbag					
	0	Ejected NO AP	PARENT I		DEPLOYED-COMB	INATION	Trapped/Extricated			
		NOT EJECTED		CTED/NOT APPL	LICABLE		NOT TRAPPED			
		Medical Transport			EMS Agency Identifier	EMS Agency Identifier EMS Run #				
	NOT TRANSPORTED Hospital				Date of Death		Time of Death			
			od Dy O							
		Distracted By	ed By Sourc	e 						
		Distracted By Action								
		Non Motorist Striking	Unit#	Location						
		Prior Action		1						

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	_										
		Action									
	_										
۷	INDIVIDUAL										
LNO	/ID										
<b>-</b>											
	=										
		Action Other			To/From School						
	ا	Suspe	cted Alcohol	Use	Suspected Drug Use	•					
	L	Orug & Alcohol No		T	NO						
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	•		Alcohol Test Results				
		Drug Test Given		Drug Test Type		Drug Test Results	S				
		TEŠT NOT GIVEN									
2	002	Drug Type									
		Individual Condition									
		APPEARED NORMAL									
	i	Individual									
		PASSENGER LAYLA WELLS (608) 604-3635			Citations Issued	Sex					
	AL				Date of Birth	FEMALE Race					
╘	INDIVIDUAL					WHITE					
		Address 151 COUNTY HWY V			Driver License Numb	per					
	Z	CAZENOVIA, WI 53924 , US									
		On Du	tı Craab		Safety Equipment						
	Saf	ety Equipment	ty Crash		Salety Equipment						
		Row Seat Position			CHILD RESTRAIN	NT SYSTEM - FOR	WARD FACING				
		02 - SECOND ROW Helmet Use	07 - L	EFT	Helmet Compliance						
		Helmet Use			Troiniet Compilation						
		Eye Protection			Tint Compliance						
_	္ဗ	   Injury :	Severity		Airbag						
2	003	Injury NO A	PPARENT	INJURY	DEPLOYED-COMBINATION						
		Ejected NOT EJECTED	Ejection Pa	ath ECTED/NOT APPL	ICABI E		Trapped/Extricated NOT TRAPPED				
		Medical Transport	1101 202	- CILDMOTATE	EMS Agency Identifie	er	EMS Run #				
		NOT TRANSPORTED			D ( (D ()		Time of Death				
		Hospital			Date of Death						
		Distracted By Distract	ted By Source	ce	l		l				
		Distracted By Action									
		Non Motorist	g Unit#	Location							
		Prior Action									

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TINO	INDIVIDUAL	Action						
		Action Other	Suspected Alco	ihol Use	Suspected Drug Use			To/From School
•		Drug & Alcohol Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	NO		Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		
2	003	Drug Type						
		Individual Condition  APPEARED NORM	<b>IAL</b>					
l	,	Violations						
	01	UTC Number BC936750	Issue To? 001	Statute Number 344.62(1)	Description OPERATE MOTOR V	/EHICLE W/O IN	SURANCE	