#### WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK PRAIRIE POLICE DEPARTMENT 640 13TH ST PRAIRIE DU SAC, WI 53578 (608) 643-2427

	Document Number Override	Primary Crash [	Primary Crash Document #		Crash Number	Investigating Officer/Deputy OFFICER T. MOSLEY			
<b>5</b>	Crash Date <b>06/24/2024</b>	Crash Time 05:20 PM	Gradii Tiillo		rived 2024	Time Arrived 05:22 PM			
11	Date Notified <b>06/24/2024</b>	Time Notified 05:20 PM			nits	Total Injured  02	,		
-05	On Emergency	lit and Run	t and Run 🔽 Lane Closu		Work Zone	Trailer or Towed		Reporting Threshold	
X	Government Property	Active Sc	Active School Zone		Bus Related	Tags			
	<b>✓</b> Reportable	Crash Type DT4000 (STA	NDARD CRASH)			Amended		Secondary Crash	
	D = = = =!4! =		·		·	·		·	

Description



Reconstruction By

Photos By TMOSLEY 61

Additional Information **PHOTOS** 

UNIT 1 WAS TRAVELING EAST ON HWY 12. UNIT 2 WAS TRAVELING NORTH ON MADISON STREET. UNIT 1 FAILED TO STOP AT THE RED LIGHT, COLLIDING WITH UNIT 2.

## WISCONSIN MOTOR VEHICLE CRASH REPORT

ŀ		ation								1	
1		USH12 EB			Latitude 43.271169511			Longitude -89.725669988			
		MADISON ST				X Coordina				Y Coordinate	
		HE VILLAGE OF SAUI AUK COUNTY	K CITY	278809.4375 4794536							
				Structure NO STRU							
(	Cra	sh Scene									
Ī	First	Harmful Event					First Harm	ıful Event Lo	cation		
	MO	TOR VEH IN TRANSPO	ORT				ON ROA	DWAY			
ŀ	Manr	ner of Collision					Light Cond	dition			
	01 -	ANGLE					DAYLIGI	HT			
	Road	Surface Condition(s)					Roadway I	Factor(s)			
	DRY	•									
ŀ	Envir	onment Factor(s)					=				
	NON	IE					NONE				
Ī	Wea	ther Condition(s)									
	CLE	AR									
Ī	Anim	al Type						o Trafficway			
ŀ		h Classification - Location					Crash Classification - Jurisdiction				
ŀ	PUBLIC PROPERTY  Tribal Land						NO SPECIAL JURISDICTION  Access Control  FULL CONTROL  Special Study				
ſ	Within Interchange Area  NO  INTERSECTION					Intersection	on Type IAY INTERSECTION				
ļ								SECTION			
		ure Type			Reasons for Closure						
ŀ		E CLOSURE	Time a latified I ame /Dd Oleand	LAW ENFORCE			FMENT				
		Initial Lane/Rd Closed 4/2024	Time Initial Lane/Rd Closed 05:20 PM								
Ī		All Lanes Open 4/2024	Time All Lanes Open 05:52 PM			Scene Clear 1 <b>/2024</b>	ed		ne Scene Clear 19 PM	red	
į	Jnit	Summary =			1						
Ī		Status		Vehi	cle Ope	erating As C	lassification		Unit Type		
	IN T	RANSIT		D C	LASS				AUTOMOBILE		
ľ	Vehicle Type								Operating As Endorsements		
		SENGER CAR	T : /D //D					<del> </del>	<u> </u>	<del>-</del>	<del></del>
	Total	Occs	Train/Bus # Recorded	Tota	Total # Citations Issued  1		o lotal I raile			otal Hazi	Mat Types
Ī	Insur	ance?	Direction Of Travel <b>EASTBOUND</b>		Pre	CrashTire Mark		Speed Lim		Total Lane	es
ŀ	Most	Most Harmful Event: Collision With			cial Fun		TION	00	Emergency Motor Vehicle Use NOT APPLICABLE		cle Use
ļ	MOTOR VEHTIN TRANSPORT						TION				ivo/Missing
	TWO-WAY, NOT DIVIDED Surface Type				Traffic Control TRAFFIC SIGNAL				Traffic Control Inoperative/Missing  NO		
ı					d Curva				Road Grade		
BLACKTOP (BITUMINOUS)  Truck Bus or HazMat				SIR	STRAIGHT LEVEL						
	NO										
	\	/ehicle						C+ 1	Countrief	III an a -	
		License Plate Number APN1935		Plat <b>AU</b>	te Type <b>T</b>			St <b>WI</b>	Country of Iss		
	7	Vehicle Identification Nur		Mak	ke RD			Year	Model		
5 5 1FADP3F22GL397751				1,0	עאי			2016 FOCUS			

# WISCONSIN MOTOR VEHICLE CRASH REPORT

		Color		Body Style		Bus Use					
		GRY - GRAY	SD - SEDAN								
	ш	Initial Contact Point		Vehicle Damage	<u> </u>						
_	7	12 - FRONT		7 8 9 1							
UNIT	$\cong$			42 EDONT			6 8 12				
<b>5</b>	VEHICL	Extent Of Damage		12 - FRONT			5 4 3 2 1				
	>	DISABLING DAMAGE		Vehicle Dans LD							
		Towed Due To Damage TOWED DUE TO DISABLING	DAMAGE	Vehicle Removed By							
			DAWAGE	CRAIGS TOWING							
		What Driver Was Doing GOING STRAIGHT		Vehicle Factors							
				NOT APPLICABLE							
		Driver Prior Action Other		NOT ALL LIGABLE							
		Driver Actions									
		DISREGARDED RED LIGHT									
	VEHICLE										
UNIT	<u>≌</u>	<b>₽</b>									
5	픕										
	>										
				10							
		Owner Name GARY RICHARD BRADLEY			Owner Address						
10	5	(608) 370-2198		10159 COUNTY ROAD Y MAZOMANIE, WI 53560 , US							
0	0	(600) 610 2100									
	;	Sequence Of Events									
	_	Event	<b>-</b>								
	MOTOR VEH IN TRANSPORT										
	05	Event									
	0										
	က	Event	ent								
	03										
	₩	Event									
	8										
_		Policy Holder									
UNIT	•	Insurance Company		INDIVIDUAL							
5		STATE-FARM-CLASSIC-INS	-co	GARY BRADLEY							
		Individual									
		DRIVER		Citations leaved	LCav						
		GARY RICHARD BRADLEY		Citations Issued Sex MALE							
	₽	(608) 370-2198			Race						
	DUAI			Date of Birth	WHITE						
늘	=	A.1.									
N O	INDIN	Address 10159 COUNTY ROAD Y		er							
	Z	MAZOMANIE, WI 53560 , US	3	STATE: WISCONSIN COUNTRY: UNITED STATES							
		On Duty Ci	rach								
	Sat	fety Equipment	asii	SHOULDER & LAP BELT							
			lo . p .::								
		Row 01 - FRONT ROW	Seat Position	SHOULDER & LAF	DELI						
			07 - LEFT								
		Helmet Use		Helmet Compliance							
		Fue Dratection		T: 10 "							
		Eye Protection		Tint Compliance							
	Injury Soverty			Airbag							
01	Injury Severity SUSPECTED MINOR INJURY			Airbag							
	_	1 1 000: 20		DEPLOYED-FROM		Trapped/Extricated					
			jection Path OT EJECTED/NOT APF	DI ICARI E		* *					
		Medical Transport	OT EJECTED/NOT APP		<u> </u>	NOT TRAPPED					
		•		EMS Agency Identifie	I	EMS Run #					
		NOT TRANSPORTED									

## WISCONSIN MOTOR VEHICLE CRASH REPORT

		Hospital					Date of Death			Time of Dea	ith	
		Distracted By	Distracte	ed By Sour	ce							
		Distracted By Action UNKNOWN										
		Non Motorist	Striking	Unit #	Location							
		Prior Action										
		Action										
	JAL											
LNO	INDIVIDUAL											
ر	INDI											
		Action Other										To/From School
	L	Orug & Alcohol	Suspect NO	ed Alcohol	Use		Suspected Drug Use					
		Alcohol Test Given		Alcohol Test Type			Alcohol Test R			t Results		
		TEST NOT GIVEN  Drug Test Given	ren [		Drug Test Typ	Drug Test Type		Drug Test Results				
		TEŠT NOT GIVEN										
2	001	Drug Type										
		Individual Condition										
		APPEARED NORM	IAL									
	,	Violations										
	01	UTC Number BI345505	Issue T		tatute Number 46.04(1)		Description FAIL/OBEY TRAFFIC	OFFI	CER SIGN	AL/ORDER		
		Summary •	001		( )		-					
		Status =				Ve	hicle Operating As Classi	fication		Unit Type		
						D	D CLASS			AUTOMOBILE Operating As Endorsements		
05	Vehicle Type   (SPORT) UTILITY VEHICLE									Operating A	s Liidoiseiii	ens
	Tota 2	Occs	Tra	ain/Bus # F	Recorded	Tc	tal # Citations Issued		Total Traile	ers	Total HazN  0	flat Types
	Insur	ance?		ection Of			Pre CrashTire Mark		Speed Lim	it	Total Lane	s
LNO	Most	Harmful Event: Collision	on With	жтньо	OND		pecial Function  O SPECIAL FUNCTION	N	25	Emergency NOT APPL	Motor Vehic	le Use
	Traff	MOTOR VEH IN TRANSPORT Traffic Way					affic Control			Traffic Contr		ve/Missing
		D-WAY, NOT DIVIDE ace Type	ED				RAFFIC SIGNAL pad Curvature			NO Road Grade		
		CKTOP (BITUMINC	OUS)				TRAIGHT			LEVEL		
	Truc <b>NO</b>	k Bus or HazMat										
		Vehicle										
		License Plate Number	r				late Type			Country of Iss		
		ABR1535				Α	UT		WI	UNITED ST	AIES	

# WISCONSIN MOTOR VEHICLE CRASH REPORT

02		Vehicle Identification Number 2T2KGCEZ8SC060562		Mal-		Year <b>2025</b>	Model NX			
		Color			ly Style	2023	Bus Use			
		TAN - TAN			UT - SPORT UTILITY VEHICLE					
_	LE	Initial Contact Point  10 - LEFT SIDE FRONT			Vehicle Damage 7 8 9 10 11					
UNIT	VEHICL	Extent Of Damage		10	- LEFT SIDE FRONT			6 FB 12		
_	VE	DISABLING DAMAGE						5 4 3 2 1		
		Towed Due To Damage TOWED DUE TO DISABLIN	IC DAMAGE		nicle Removed By  AIGS TOWING					
		What Driver Was Doing	TO DAMAGE		nicle Factors					
		GOING STRAIGHT			T 4001 10 401 5					
		Driver Prior Action Other		NOT APPLICABLE						
		Driver Actions								
_	VEHICLE	NO CONTRIBUTING ACTION	ON							
UNIT	HIC									
_	VE									
		Owner Name			Owner Address					
	~	MICHELLE A WIEDENFELD			W14255 MILLER CT					
02	02	(608) 963-8850			PRAIRIE DU SAC, WI 53578 , US					
		Common Of Frants								
		Sequence Of Events  Event								
	01	MOTOR VEH IN TRANSPORT								
	02	Event								
	03	Event								
	04	Event								
UNIT		Policy Holder Insurance Company INDIVIDUAL								
5		STATE-FARM-MUTUAL-AUTOMOBILE-INS-CO			NDIVIDUAL NICHELLE WIEDENF	ELD				
		ndividual								
		DRIVER	n			Sex				
	AL	MICHELLE A WIEDENFEL (608) 963-8850	J	0 FEMALE  Date of Birth Race						
<b>—</b>	INDIVIDUA				WHITE					
LINO	Σ	Address W14255 MILLER CT			er					
	N	PRAIRIE DU SAC, WI 5357	8 , US	STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sat	On Duty fety Equipment	Crash	Safety Equipment						
		Row	Seat Position	<b>−</b>   s	SHOULDER & LAP B	ELT				
		01 - FRONT ROW	07 - LEFT							
		Helmet Use		F	lelmet Compliance					
		Eye Protection		Tint Compliance						
2	2	Injury Se	verity	A	irbag					
02	005	Injury NO APPARENT INJURY			DEPLOYED-COMBINATION					
		•	Ejection Path  NOT EJECTED/NOT AP	Trapped/Extricated  PLICABLE  NOT TRAPPED						

## WISCONSIN MOTOR VEHICLE CRASH REPORT

		Medical Transport		EMS Agency Identifier		EMS Run #						
		NOT TRANSPORTED										
		Hospital		Date of Death		Time of Death						
		Distracted By NOT APP	By Source LICABLE (NOT DISTRAC	CTED)								
		Distracted By Action NOT DISTRACTED										
		Non Motorist Striking Uni	it# Location									
		Prior Action	•									
		Action										
INDIVIDUAL												
		Action Other					To/From School					
	Ľ	Orug & Alcohol NO	Alcohol Use	Suspected Drug Use NO								
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Results							
		Drug Test Given TEST NOT GIVEN		Drug Test Results								
02	002	Drug Type										
		Individual Condition  APPEARED NORMAL										
		Individual										
		PASSENGER		Citations Issued	Sex							
	Ļ	SOFIA V LOPEZ	0	FEMALE	MALE							
<b>–</b>	DUAL			Date of Birth	Race <b>WHITE</b>							
Ż	Σ	Address		Driver License Number								
_	INDIN	703 JEFFERSON ST SAUK CITY, WI 53583 , US										
	Saf	On Duty Cr	ash	Safety Equipment								
		Row 01 - FRONT ROW	Seat Position  09 - RIGHT	SHOULDER & LAP	BELT							
		Helmet Use	Helmet Compliance									
		Eye Protection		Tint Compliance								
05	003	Injury Sever	rity FED MINOR INJURY	Airbag  DEPLOYED-COMB	INATION							
		Ejected Ej	ection Path OT EJECTED/NOT APPL			Trapped/Extricated NOT TRAPPED						
		Medical Transport  EMS GROUND		EMS Agency Identifier EMS Run #								

# WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK PRAIRIE POLICE DEPARTMENT 640 13TH ST PRAIRIE DU SAC, WI 53578 (608) 643-2427

Crash Date 06/24/2024

Crash Time 05:20 PM

		Hospital			Date of Death		Time of Death	
		SAUK PRAIRIE HO						
		Distracted By	Distracted By Source					
		Distracted By Action						
		Non Motorist	Striking Unit #	Location				
		Prior Action						
		Action						
	Ļ							
⊨	INDIVIDUAL							
UNIT	M							
	IND							
		Action Other						To/From School
	L	Orug & Alcohol	Suspected Alcohol U NO	lse	Suspected Drug Use <b>NO</b>			
		Alcohol Test Given		Alcohol Test Type	<u> </u>		Alcohol Test Results	
		TEST NOT GIVEN		D T4 T		· · · · · · · · · · · · · · · · ·		
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		
02	003	Drug Type						
	)							
		Individual Condition						
		APPEARED NORM	1AL					