000214-7657

WISCONSIN MOTOR VEHICLE CRASH REPORT

Do	cument Number Overrid	е	Primary Crash D	Oocument #	9,			Officer/Deputy L. HORWOOD		
	ash Date /13/2022		Crash Time 07:15 PM		Date Arr 05/13/2		Time Arrived	d		
Dat 05/			Time Notified 07:17 PM		Total Ur			Total Injured Total Killed 00		
05/ Dat 05/	On Emergency	Hit	and Run	✓ Lane Close		Work Zone	 Trailer	or Towed	Reporting Threshold	
	Government Active School Zone				School E NO	Bus Related	Tags			
~	Reportable		Crash Type DT4000 (STA	NDARD CRASH	1)		Amend	ded	Secondary Crash	
	escription ==							Reconstruction	on By	
	g.u								HORWOOD	
	90			nd Lanes of I39/90 atley mile marker		←		Additional Inf PHOTOS	ormation	
			U1	U2			12 (U2			
	U2 U2		U1					-		
			Not to so Drawn b	cale y Trooper Horwoo	od					
	I, a sworn law enfo	rceme	nt officer, agre	e that I have no	ot added	any CJIS data in t	his report.]		
U1 50 WE NK CO	AND U2 WERE BOTH D	RIVING S SH. MUL ⁻ ATELY M OF U2. RONT TO	SOUTHBOUND ON TIPLE VEHICLES IILE MAKER 143 T U1 BEGAN TO BR O REAR COLLISIO	N I-39/90. WEATHE IN THE AREA WEF RAFFIC WAS AT A RAKE UPON SEEIN IN. BOTH VEHICLE	ER CONDIT RE PARKEI A HEAVY V IG MULTIP	IONS CONSISTED OF ON THE SHOULDER OLUME. SPEED OF TI LE BRAKE LIGHTS AH	HEAVY RAIN WITH S AND UNDER HIG RAFFIC WAS U EAD OF HIM. U1 W	SHWAY BRIDGE VAS UNABLE TO		

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WISCONSIN MOTOR VEHICLE CRASH REPORT

Ī	ON 593 OF S	ation IH39 SB FT N SIGGELKOW RD HE TOWN OF BLOOM	AING GROVE				Latitude 43.02815 X Coordina			Y Coord	7344201 inate
		ANE COUNTY	MING GROVE				Structure			476641	4.5
(Cras	sh Scene									
Ī	First	Harmful Event					First Harm	nful Event L	ocation		
	МОТ	OR VEH IN TRANSP	ORT				ON ROA	DWAY			
f	Manr	ner of Collision	Light Cond	dition							
	03 -	FRONT TO REAR					DUSK				
f	Road	Surface Condition(s)					Roadway	Factor(s)			
	WET, WATER (STANDING/MOVING)										
f	Envir	onment Factor(s)									
	WE	ATHER CONDITIONS					ROAD S ETC)	URFACE	CONDITION	(WET, IC	Y, SNOW, SLUSH,
Ī	Weat	her Condition(s)									
	RAII	N									
ŀ	Anim	al Type					Relation T	o Trafficwa	V		
								CWAY - O	•		
ŀ	Crasl	n Classification - Location					Crash Clas	ssification -	Jurisdiction		
	PUB	LIC PROPERTY					NO SPECIAL JURISDICTION				
	Tribal Land						Access Control Special Study FULL CONTROL				Special Study
ļ	\\/i+hi	n Interchange Area	Junction Location			Intersectio		DNIKUL			
	NO	ir interchange Area	NON-JUNCTION				INTERSE	CTION			
ŀ	-	ire Type			Reaso	ns for Closi					
		E CLOSURE					EMENT, FIRE/EMS				
ŀ	Date	Initial Lane/Rd Closed	Time Initial Lane/Rd Close	ed	LAW	ENFORC					
	05/1	3/2022	07:28 PM								
f	Date	All Lanes Open	Time All Lanes Open		Date S	ate Scene Cleared Time Scene Cleared					
	05/1	3/2022	07:33 PM		05/13/2022			07	7:33 AM		
Į	Jnit	Summary =									
Ī	Unit 9	Status		Vehi	cle Ope	rating As C	lassification		Unit Type		
		RANSIT		DC	LASS				AUTOMOI		
		cle Type							Operating A	s Endorser	ments
ļ	(SPC	ORT) UTILITY VEHICL						· · · · · ·			
		Occs	Train/Bus # Recorded		I # Citat	ions Issued		Total Trail	iers	Total Haz	Mat Types
ļ	3 Inquir	ance?	Direction Of Travel	0				0 Speed Lin	nit	0 Total Lane	96
=	YES		SOUTHBOUND			CrashTire Mark		70	iiit	6	53
L		Harmful Event: Collision		Spec	cial Fun			1.0	Emergency	-	cle Use
		OR VEH IN TRANSP		NO	SPEC	IAL FUNC	TION		NOT APPI	LICABLE	
ŀ	Traffi	c Way		Traff	ic Cont	rol			Traffic Cont	rol Inoperat	tive/Missing
	DIVI	DED HWY MEDIAN W	//BARRIER	NO	CONT	ROL			NO		
Ī	Surfa	се Туре		Road	d Curva	ture			Road Grade)	
	CON	ICRETE		STR	RAIGH	Т			LEVEL		
	Truck	Bus or HazMat									
-	_	/ehicle									
		License Plate Number		Pla	te Type			St	Country of Is	suance	
		SHANAM		AU	T - AU	TOMOBIL	.E	MN	UNITED ST	TATES	
	_	Vehicle Identification Nur		Mal				Year	Model		
5	6	5UXWX9C51G0D762	118	BN	IW			2016	Х3		

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Color		Body Style		Bus Use					
		BLK - BLACK		UT - SPORT UTILITY	VEHICLE						
	Щ	Initial Contact Point	\	Vehicle Damage			7 8 9 10 11				
UNIT	ੂ	06 - REAR		OC DEAD			6 2 12				
ס	VEHICL	Extent Of Damage MINOR DAMAGE	'	06 - REAR			5 4 3 2 1				
	>	Towed Due To Damage	\	Vehicle Removed By							
		NOT TOWED		OPERATOR							
		What Driver Was Doing	١	Vehicle Factors							
		GOING STRAIGHT		NOT APPLICABLE							
		Driver Prior Action Other	ľ	NOT APPLICABLE							
		Driver Actions									
	щ	NO CONTRIBUTING ACTION	N								
╘	VEHICL										
UNIT	표										
	>										
		Owner Name		Owner Address							
		RAJESH SHANAM		11254 PROVIDEN	CE LN						
01	5	(203) 993-9647		EDEN PRAIRIE, M	IN 55344 4917,	US					
	;	Sequence Of Events									
	5	MOTOR VEH IN TRANSPORT									
	05	Event									
	03	Event									
		Event									
	04										
╘	ı	Policy Holder									
UNIT		Insurance Company PROGRESSIVE-CLASSIC-IN	IS-CO	Individual RAJESH SHANAM							
		Individual		NACE OF OTANAM							
		Driver		Citations Issued	Sex						
	بِ	RAJESH SHANAM (203) 993-9647		0	MALE						
	DOA	(203) 993-9047		Date of Birth	Race	TIVE HAWAIIAN O	R OTHER PACIFIC ISLA				
늘	₽	Address		04/25/1991	ASIAN ON NA	TIVE HAVVAIIAIN O	NOTITEN LACITIC ISEA				
N	INDIN	11254 PROVIDENCE LN		Driver License Number Q287177083617							
	Z	EDEN PRAIRIE, MN 55344	4917, US	STATE: MINNESOTA COUNTRY: UNITED STATES							
	Sat	On Duty Cr	ash	Safety Equipment							
		Row	Seat Position	SHOULDER & LAP	RFI T						
		01 - FRONT ROW	07 - LEFT	ON OCEDER & EAR	JLL!						
		Helmet Use	<u> </u>	Helmet Compliance							
		Eye Protection		Tint Compliance							
01	00	Injury Seve	•	Airbag							
ا	0		ARENT INJURY	NON DEPLOYED		Tropped/Fut-tack					
		l '	ection Path OT EJECTED/NOT APPL	LICABLE		Trapped/Extricated NOT TRAPPED					
		Medical Transport		EMS Agency Identifier		EMS Run #					
		NOT TRANSPORTED									

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Hospital				Date of Death			Time of Death			
		Distracted By	Distracted B	By Source LICABL	E (NOT DISTRAC	CTED)						
		Distracted By Action NOT DISTRACTED	D									
		Non Motorist	Striking Uni	t #	Location							
		Prior Action			1							
		Action										
	JAL											
	INDIVIDUAL											
	<u>N</u>											
		Action Other								To/From School		
		Action Other	0	A I I - I I I		I Commented David Union				TO/FIOIII SCHOOL		
	ı	Drug & Alcohol	Suspected .	Alconol U		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 T	Test Results				
5	00	Drug Type										
		Individual Condition										
		APPEARED NORM	MAL									
	I	Individual				Louis de la	Lo					
	با	Passenger SHRAVANI THIPP (469) 969-8833	ANI			Citations Issued 0	FEMA	Sex FEMALE				
=	DIVIDUAL	(400) 000 0000				Date of Birth 08/10/1994		Race ASIAN OR NATIVE HAWAIIAN OR OTHER PACIFIC ISLA				
L N O	INDIV	Address 11254 PROVIDENCE EDEN PRAIRIE, 5		Driver License Number C000084279400 STATE: MINNESOTA COUNTRY: UNITED STATES								
			On Duty Cr									
	Sat	fety Equipment	On Duty Cr	asn		Safety Equipment						
		Row 01 - FRONT ROW		Seat Po		SHOULDER & LAP BELT						
		Helmet Use				Helmet Compliance						
		Eye Protection				Tint Compliance						
5	005	Injury	Injury Seve	rity . RENT II	NJURY	Airbag NON DEPLOYED						
		NOT EJECTED	Ej	ection Pa		ICABLE			Trapped/Extricated NOT TRAPPED			
		Medical Transport NOT TRANSPORT	ΓED			EMS Agency Identifie	r		EMS Run #			
		Hospital				Date of Death			Time of Death			

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WISCONSIN MOTOR VEHICLE CRASH REPORT

								(000) 040-0300		
		Distracted By	Distracted By So	urce						
		Distracted By Action								
		Non Motorist	Striking Unit #	Location						
		Prior Action								
		Action								
	JAL									
LINO	INDIVIDUAL									
_										
		Action Other						To/From School		
		Drug & Alcohol	Suspected Alcoh	ol Use	Suspected Drug Use NO					
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results			
		TEST NOT GIVEN Drug Test Given		Drug Test Type		Drug Test Results	<u> </u>			
		TEST NOT GIVEN		·						
5	005	Drug Type								
		Individual Condition								
		APPEARED NORM	/ IAL							
	ı	Individual								
		Passenger ARIANNA MASUD	1		Citations Issued Sex					
	INDIVIDUAL	(203) 993-9647			Date of Birth Race					
LNO	₽	Address			Driver License Number					
_	N	11254 PROVIDENCE EDEN PRAIRIE, M		. US	Biller Election Number					
		ŕ								
	Sat	fety Equipment	On Duty Crash		Safety Equipment					
		Row		t Position	SHOULDER & LA	P BELT				
		06 -UNKNOWN RO Helmet Use	OW 07	- LEFT	Helmet Compliance					
		Eye Protection								
		Lye i lotection			Tint Compliance					
6	003	Injury	Injury Severity NO APPAREN	IT INJURY	Airbag NON DEPLOYED					
		Ejected	Ejection	n Path	1		Trapped/Extricated			
		NOT EJECTED Medical Transport	NOT E	JECTED/NOT APPL	LICABLE EMS Agency Identifie	ar.	NOT TRAPPED EMS Run #			
		NOT TRANSPORT	ED		LWO Agency Identille	·1	LIVIO INGILI#			
		Hospital			Date of Death		Time of Death			
		Distracted By	Distracted By So	urce	•		•			

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Non Motorist Str	iking Unit #	Location				
		Prior Action						
		Action						
	INDIVIDUAL							
UNIT	ם							
5	\leq							
	N							
		Action Other						T /5 0 1 1
		To/From School						
	ļ.	Su	spected Alcohol U	Jse	Suspected Drug Use			
	L	Drug & Alcohol No)		NO			
		Alcohol Test Given		Alcohol Test Type)		Alcohol Tes	t Results
		TEST NOT GIVEN						
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Resul	ts	
1	003	Drug Type		<u> </u>				
01	0							
		Individual Condition						
		ADDEADED MODMAN	•					
		APPEARED NORMAI	L					
	ا Unit	t Summary ===						
		t Summary Status			ehicle Operating As Clas	sification	Unit Type	
	Unit	Status RANSIT			ehicle Operating As Clas	sification	TRUCK	
	Unit IN T	Status RANSIT cle Type	TRUCK			sification	TRUCK	s Endorsements
02	Unit : IN T Vehice UTIL	Status RANSIT cle Type LITY TRUCK/PICKUP		D	CLASS		TRUCK Operating A	
	Unit : IN T Vehice UTIL	Status RANSIT cle Type	TRUCK Train/Bus # Re	D	otal # Citations Issued	sification Total Tra	TRUCK Operating A	s Endorsements Total HazMat Types 0
	Unit : IN T Vehic UTII Total 2	Status RANSIT cle Type LITY TRUCK/PICKUP		ecorded To	otal # Citations Issued	Total Tra	TRUCK Operating A	Total HazMat Types
02	Unit : IN T Vehic UTIL Total 2 Insur YES	Status RANSIT cle Type LITY TRUCK/PICKUP I Occs rance?	Train/Bus # Re Direction Of Tr	ecorded To 0 ravel	otal # Citations Issued Pre CrashTire Mark	Total Tra	TRUCK Operating A illers	Total HazMat Types 0 Total Lanes 6
02	Unit : IN T Vehice UTII Total 2 Insur YES	Status RANSIT cle Type LITY TRUCK/PICKUP I Occs rance? S t Harmful Event: Collision V	Train/Bus # Re Direction Of Tr SOUTHBOU	ecorded To 0 ravel IND S	otal # Citations Issued Pre CrashTire Mark pecial Function	Total Tra 1 Speed Li 70	TRUCK Operating A illers mit Emergency	Total HazMat Types 0 Total Lanes 6 Motor Vehicle Use
	Unit : IN T Vehic UTII Total 2 Insur YES Most	Status RANSIT cle Type LITY TRUCK/PICKUP I Occs rance? It Harmful Event: Collision V TOR VEH IN TRANSPO	Train/Bus # Re Direction Of Tr SOUTHBOU	ecorded To 0 ravel IND S	otal # Citations Issued Pre CrashTire Mark pecial Function IO SPECIAL FUNCTION	Total Tra 1 Speed Li 70	TRUCK Operating A illers mit Emergency NOT APPI	Total HazMat Types 0 Total Lanes 6 Motor Vehicle Use LICABLE
02	Unit IN T Vehic UTIL Total 2 Insur YES Most MOT	Status RANSIT cle Type LITY TRUCK/PICKUP I Occs rance? St Harmful Event: Collision V TOR VEH IN TRANSPO	Train/Bus # Re Direction Of Tr SOUTHBOU With DRT	ecorded To 0 cavel IND S	otal # Citations Issued Pre CrashTire Mark pecial Function IO SPECIAL FUNCTION raffic Control	Total Tra 1 Speed Li 70	TRUCK Operating A illers mit Emergency NOT APPI	Total HazMat Types 0 Total Lanes 6 Motor Vehicle Use
02	Unit IN T Vehic UTIL Total 2 Insur YES Most MOTOR Traffi	Status RANSIT cle Type LITY TRUCK/PICKUP I Occs rance? It Harmful Event: Collision V TOR VEH IN TRANSPO	Train/Bus # Re Direction Of Tr SOUTHBOU With DRT	ecorded Transport of the Control of	otal # Citations Issued Pre CrashTire Mark pecial Function IO SPECIAL FUNCTION	Total Tra 1 Speed Li 70	TRUCK Operating A iilers mit Emergency NOT APPI Traffic Contr	Total HazMat Types 0 Total Lanes 6 Motor Vehicle Use LICABLE rol Inoperative/Missing
02	Unit : IN T Vehic UTII Total 2 Insur YES Most MOT Traffi DIVI Surfa	Status TRANSIT Cle Type LITY TRUCK/PICKUP TOCCS Trance? THARMFUL Event: Collision V TOR VEH IN TRANSPO TOC Way LIDED HWY W/TRAFFIC LIDED TYPE NCRETE	Train/Bus # Re Direction Of Tr SOUTHBOU With DRT	ecorded T. 0 ravel IND S. N. T. N. R.	otal # Citations Issued Pre CrashTire Mark pecial Function IO SPECIAL FUNCTION raffic Control IO CONTROL	Total Tra 1 Speed Li 70	TRUCK Operating A iilers mit Emergency NOT APPI Traffic Conti	Total HazMat Types 0 Total Lanes 6 Motor Vehicle Use LICABLE rol Inoperative/Missing
02	Unit IN T Vehic UTIL Total 2 Insur YES Most MOT Trafff DIVI Surfa CON Truck	Status RANSIT cle Type LITY TRUCK/PICKUP Occs rance? Harmful Event: Collision V TOR VEH IN TRANSPO ic Way IDED HWY W/TRAFFIC ace Type	Train/Bus # Re Direction Of Tr SOUTHBOU With DRT	ecorded T. 0 ravel IND S. N. T. N. R.	otal # Citations Issued Pre CrashTire Mark pecial Function IO SPECIAL FUNCTION raffic Control IO CONTROL oad Curvature	Total Tra 1 Speed Li 70	TRUCK Operating A illers mit Emergency NOT APPI Traffic Conti NO Road Grade	Total HazMat Types 0 Total Lanes 6 Motor Vehicle Use LICABLE rol Inoperative/Missing
02	Unit : IN T Vehic UTIII Total 2 Insur YES Most MO Traff DIVI Surface NO	Status TRANSIT Cle Type LITY TRUCK/PICKUP TOCCS Trance? THARMFUL Event: Collision V TOR VEH IN TRANSPO TOC Way LIDED HWY W/TRAFFIC LIDED TYPE NCRETE	Train/Bus # Re Direction Of Tr SOUTHBOU With DRT	ecorded T. 0 ravel IND S. N. T. N. R.	otal # Citations Issued Pre CrashTire Mark pecial Function IO SPECIAL FUNCTION raffic Control IO CONTROL oad Curvature	Total Tra 1 Speed Li 70	TRUCK Operating A illers mit Emergency NOT APPI Traffic Conti NO Road Grade	Total HazMat Types 0 Total Lanes 6 Motor Vehicle Use LICABLE rol Inoperative/Missing
02	Unit : IN T Vehic UTIII Total 2 Insur YES Most MO Traff DIVI Surface NO	Status RANSIT cle Type LITY TRUCK/PICKUP I Occs rance? St Harmful Event: Collision V TOR VEH IN TRANSPO ic Way IDED HWY W/TRAFFIC ace Type NCRETE k Bus or HazMat Vehicle License Plate Number	Train/Bus # Re Direction Of Tr SOUTHBOU With DRT	ecorded Ti	Pre CrashTire Mark pecial Function IO SPECIAL FUNCTION IO CONTROL oad Curvature TRAIGHT	Total Tra 1 Speed Li 70 ON	TRUCK Operating A illers mit Emergency NOT APPI Traffic Conti NO Road Grade LEVEL Country of Is	Total HazMat Types 0 Total Lanes 6 Motor Vehicle Use LICABLE rol Inoperative/Missing
02	Unit : IN T Vehic UTIII Total 2 Insur YES Most MO Traff DIVI Surface NO	Status RANSIT cle Type LITY TRUCK/PICKUP I Occs rance? St Harmful Event: Collision V TOR VEH IN TRANSPO ic Way IDED HWY W/TRAFFIC ace Type NCRETE k Bus or HazMat Vehicle License Plate Number XE28114	Train/Bus # Re Direction Of Tr SOUTHBOU Nith DRT C BARRIER	ecorded Time of the control of the c	Pre CrashTire Mark pecial Function IO SPECIAL FUNCTION IO CONTROL Oad Curvature TRAIGHT Plate Type LTK - LIGHT TRUCK	Total Tra 1 Speed Li 70 ON	TRUCK Operating A illers mit Emergency NOT APPI Traffic Conti NO Road Grade LEVEL Country of Is UNITED S1	Total HazMat Types 0 Total Lanes 6 Motor Vehicle Use LICABLE rol Inoperative/Missing
UNIT 02	Unit : IN T Vehic UTIII Total 2 Insur YES MOST Trafff DIVI Surfa CON NO	Status RANSIT cle Type LITY TRUCK/PICKUP I Occs rance? St Harmful Event: Collision V TOR VEH IN TRANSPO ic Way IDED HWY W/TRAFFIC ace Type NCRETE k Bus or HazMat Vehicle License Plate Number XE28114 Vehicle Identification Num	Train/Bus # Re Direction Of Tr SOUTHBOU Nith DRT C BARRIER	ecorded Time of the control of the c	Pre CrashTire Mark pecial Function IO SPECIAL FUNCTION IO CONTROL Oad Curvature TRAIGHT Plate Type LTK - LIGHT TRUCK Make	Total Tra 1 Speed Li 70 ON St WI Year	TRUCK Operating A illers mit Emergency NOT APPI Traffic Conti NO Road Grade LEVEL Country of Is UNITED ST Model	Total HazMat Types 0 Total Lanes 6 Motor Vehicle Use LICABLE rol Inoperative/Missing
02	Unit : IN T Vehic UTIII Total 2 Insur YES Most MO Traff DIVI Surface NO	Status RANSIT cle Type LITY TRUCK/PICKUP I Occs rance? St Harmful Event: Collision V TOR VEH IN TRANSPO ic Way IDED HWY W/TRAFFIC ace Type NCRETE k Bus or HazMat Vehicle License Plate Number XE28114 Vehicle Identification Num 1GT120E82FF549332	Train/Bus # Re Direction Of Tr SOUTHBOU Nith DRT C BARRIER	ecorded To 0 vavel IND S N N R S	Pre CrashTire Mark Pre CrashTire Mark P	Total Tra 1 Speed Li 70 ON St WI Year	TRUCK Operating A illers mit Emergency NOT APPI Traffic Conti NO Road Grade LEVEL Country of Is UNITED ST Model SIERRA	Total HazMat Types 0 Total Lanes 6 Motor Vehicle Use LICABLE rol Inoperative/Missing
UNIT 02	Unit : IN T Vehic UTIII Total 2 Insur YES MOST Trafff DIVI Surfa CON NO	Status RANSIT cle Type LITY TRUCK/PICKUP I Occs rance? St Harmful Event: Collision V TOR VEH IN TRANSPO ic Way IDED HWY W/TRAFFIC ace Type NCRETE k Bus or HazMat Vehicle License Plate Number XE28114 Vehicle Identification Num	Train/Bus # Re Direction Of Tr SOUTHBOU Nith DRT C BARRIER	ecorded To 0 vavel IND S N N R S S	Pre CrashTire Mark pecial Function IO SPECIAL FUNCTION IO CONTROL Oad Curvature TRAIGHT Plate Type LTK - LIGHT TRUCK Make	Total Tra 1 Speed Li 70 ON St WI Year	TRUCK Operating A illers mit Emergency NOT APPI Traffic Conti NO Road Grade LEVEL Country of Is UNITED ST Model	Total HazMat Types 0 Total Lanes 6 Motor Vehicle Use LICABLE rol Inoperative/Missing
02 UNIT 02	Unit IN T Vehic UTII Total 2 Insur YES MOT Trafff DIVI Surfac CON Truck NO	Status RANSIT Cle Type LITY TRUCK/PICKUP I Occs rance? St Harmful Event: Collision V TOR VEH IN TRANSPO TOR VEH IN TRA	Train/Bus # Re Direction Of Tr SOUTHBOU Nith DRT C BARRIER	ecorded Tropological Tropologic	Pre CrashTire Mark pecial Function IO SPECIAL FUNCTION IO CONTROL OCAL CURVATURE TRAIGHT Plate Type LTK - LIGHT TRUCK Make GENERAL MOTORS Body Style	Total Tra 1 Speed Li 70 ON St WI Year	TRUCK Operating A illers mit Emergency NOT APPI Traffic Conti NO Road Grade LEVEL Country of Is UNITED ST Model SIERRA	Total HazMat Types 0 Total Lanes 6 Motor Vehicle Use LICABLE rol Inoperative/Missing suance FATES
02 UNIT 02	Unit IN T Vehic UTIII Total 2 Insur YES MOST Trafff DIVI Surfactor NO	Status RANSIT Cle Type LITY TRUCK/PICKUP I Occs rance? St Harmful Event: Collision V TOR VEH IN TRANSPO TOR WALL TOR	Train/Bus # Re Direction Of Tr SOUTHBOU Nith DRT C BARRIER	ecorded Tromagnetic Control of the c	Pre CrashTire Mark pecial Function IO SPECIAL FUNCTION IO CONTROL Oad Curvature ITRAIGHT Plate Type LTK - LIGHT TRUCK Wake GENERAL MOTORS Body Style PK - PICKUP Vehicle Damage	Total Tra 1 Speed Li 70 ON St WI Year	TRUCK Operating A illers mit Emergency NOT APPI Traffic Conti NO Road Grade LEVEL Country of Is UNITED ST Model SIERRA	Total HazMat Types 0 Total Lanes 6 Motor Vehicle Use LICABLE rol Inoperative/Missing suance FATES
UNIT 02	Unit : IN T Vehic UTIII Total 2 Insur YES Most MOT Trafff DIVI Surfa CON Truck NO	Status RANSIT Cle Type LITY TRUCK/PICKUP I Occs rance? St Harmful Event: Collision V TOR VEH IN TRANSPO TOR VEH IN TRA	Train/Bus # Re Direction Of Tr SOUTHBOU Nith DRT C BARRIER	ecorded Tromagnetic Control of the c	Pre CrashTire Mark pecial Function IO SPECIAL FUNCTION TO CONTROL	Total Tra 1 Speed Li 70 ON St WI Year	TRUCK Operating A illers mit Emergency NOT APPI Traffic Conti NO Road Grade LEVEL Country of Is UNITED ST Model SIERRA	Total HazMat Types 0 Total Lanes 6 Motor Vehicle Use LICABLE rol Inoperative/Missing suance FATES

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Towed Due To Damag	е			/ehicle Rem	-				
		What Driver Was Doing	9			/ehicle Fact					
		GOING STRAIGHT				NOT APPL	ICADI E				
		Driver Prior Action Other	er			NOT APPL	ICABLE				
		Driver Actions UNKNOWN			<u> </u>						
_	VEHICLE	UNKNOWN									
LNO	H										
	VE										
		Owner Name				Owner A	Address				
7	2	PRESTON ROBER	T TEU	BERT		9615 N TRESCHER RD					
05	02	(608) 921-9290				MILIO	N, WI 53563	, 05			
		Sequence Of Ev	onte								
		Event		ODT							
	01	MOTOR VEH IN TR	ANSP	ORI							
	02	Event	event event								
	03	Event									
		Event									
	04										
╘	ı	Policy Holder									
LIND		Insurance Company ACUITY,-A-MUTUA	L-INS	URANC	E-CO	Individual PRESTO	N TEUBER1	Г			
	-	Trailer/Towed									
05		Trailer Plate #		е Туре	Make		State			ry of Issuance	
	1	FR20199 Unit Type	IRI	- TRAI	BESA dividual				Addre	ED STATES ss	
LINO D	LER	UTILITY TRAILER			RESTON ROBERT 08) 921-9290	TEUBERT 9615 N TRESCHER RD MILTON, WI 53563, US					
5	TRAILER/	Vehicle Identification N 4L5ST2926MF0564		(00,021.0200						
		ndividual									
		Driver PRESTON ROBER	T TELL	DEDT		Citations I	ssued	Sex			
	AL	(608) 921-9290	I IEU	DEKI		O Date of Bi	rth	MALE Race			
╘	INDIVIDU					04/19/20		WHITE			
FIND	\overline{N}	Address 9615 N TRESCHER	RD.			Driver License Number T1636760213904					
	Ξ	MILTON, WI 53563				STATE: WISCONSIN COUNTRY: UNITED STATES					
	Sat	ety Equipment	On Duty	/ Crash		Safety Eq	uipment				
		Row	Position	SHOULE	DER & LAP E	BELT					
		01 - FRONT ROW		07 -	LEFT						
		Helmet Use				Helmet Co	ompliance				
		Eye Protection				Tint Comp	oliance				
05	004		njury S	everity		Airbag					
0	8		NO AP		T INJURY	NON DE	PLOYED			Trannad/Cytriantad	
		NOT EJECTED		NOT E	Path JECTED/NOT APPI	LICABLE				Trapped/Extricated NOT TRAPPED	

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Medical Transport		EMS Agency Identifie	r	EMS Run #				
		NOT TRANSPORTED								
		Hospital		Date of Death		Time of Death				
	·	Distracted By Distracted I	By Source							
		Distracted By Action UNKNOWN								
		Non Motorist Striking Uni	it # Location							
		Prior Action								
LINO	INDIVIDUAL	Action								
		Action Other					To/From School			
	L	Drug & Alcohol NO	Alcohol Use	Suspected Drug Use						
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Ty	/pe		Alcohol Test Results				
		Drug Test Given TEST NOT GIVEN	Drug Test Type	9	Drug Test Results	3				
05	004	Drug Type								
		Individual Condition APPEARED NORMAL								
		Individual								
		Passenger HALLIE JEAN HAASE		Citations Issued 0	Sex FEMALE					
_	DUAI	(608) 751-9130		Date of Birth 08/23/2003	Race WHITE					
	Address 5043 E CHARDONNAY DR MILTON, WI 53563 , US			Driver License Number H2003300380305 STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sat	On Duty Cr fety Equipment	ash	Safety Equipment	Safety Equipment					
		Row 01 - FRONT ROW	Seat Position 09 - RIGHT	SHOULDER & LA	P BELT					
		Helmet Use	1	Helmet Compliance	Helmet Compliance					
		Eye Protection		Tint Compliance						
05	002	Injury Seve	rity ARENT INJURY	Airbag NON DEPLOYED						
		Ejected Ej	ection Path OT EJECTED/NOT AP	PLICABLE		Trapped/Extricated NOT TRAPPED				
		Medical Transport		EMS Agency Identifie	r	EMS Run #				
		NOT TRANSPORTED								

KRL0M90C4T 000214-7657

WISCONSIN MOTOR VEHICLE CRASH REPORT

WI STATE PATROL SWR/DEF 911 W NORTH ST DE FOREST, WI 53532 1971 (608) 846-8500

Crash Date 05/13/2022

Crash Time 07:15 PM

	Hospital			Date of Death		Time of Death	
,	Distracted By	Distracted By Source	9	l			
	Distracted By Action						
	Non Motorist	Striking Unit #	Location				
	Prior Action						
	Action						
UAL							
INID							
N N							
	Action Other						To/From School
L	Drug & Alcohol	Suspected Alcohol U	lse	Suspected Drug Use NO			
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	l		Alcohol Test Results	
	Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		
900	Drug Type				1		
	Individual Condition						
	APPEARED NORM	MAL					
	005 INDIVIDUAL	Distracted By Distracted By Action Non Motorist Prior Action Action Action Action Action Other Drug & Alcohol Alcohol Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Type Individual Condition	Distracted By Source Non Motorist Prior Action Action Action Other Drug & Alcohol Alcohol Test Given TEST NOT GIVEN Drug Type Drug Type	Distracted By Action Non Motorist Prior Action Action Action Action Other Drug & Alcohol Alcohol Test Given TEST NOT GIVEN Drug Type Individual Condition Distracted By Source Alcohol Drug ### Location Action Alcohol Use NO Drug Test Type Test Not Given Test Type Individual Condition	Distracted By Action Non Motorist Prior Action Action Action Action Suspected Alcohol Use NO	Distracted By Distracted By Source Distracted By Action Non Motorist Prior Action Action Action Action Suspected Alcohol Use No Alcohol Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Type Individual Condition	Distracted By Action Non Motorist Prior Action Action Action Other Drug & Alcohol Test Given TEST NOT GIVEN Drug Type Individual Condition Distracted By Source Striking Unit # Location Location Suspected Alcohol Use No Suspected Drug Use No Alcohol Test Type Drug Test Given TEST NOT GIVEN Drug Type Individual Condition