CFBatch-Cover-w10

Type of Report: AUTO ACCIDENT

PayorID: WI00000434 Entity: Ozaukee County

State: WI

DATE OF LOSS: 07/14/21

LOSS STREET: COLDSPRING RD

LOSS CITY : SAUKVILLE

POLICE DEPT.: OZAUKEE CO

REPORT NUM. :

Image Name: WI00000434_3331080155_211215_2183848.tif



6NL0NNZLW4

21-19498

WISCONSIN MOTOR VEHICLE CRASH REPORT

Document Number Override	Primary Crash D	ocument#	Agency	Crash Number .	DEPUTY I	g Officer/Deputy M. ZILKE		
Crash Date 07/14/2021	Crash Time 04:15 PM		Date An		Time Arrived	4		
Date Notified	Time Notified		Total Units		Total Injured	_		
07/14/2021	04:17 PM		02		00	00		
On Emergency	lit and Run	Lane Clos		☐ Work Zone	Trailer	or Towed	Reporting Threshold	
Government Property	Active Sci	nool Zone	NO School E	Bus Related	Tags			
Reportable	Crash Type DT4000 (STAI	NDARD CRAS	Н)		Amend	ded	Secondary Crash	
Description								
Diagram				·		Reconstruction	ı Ву	
N						Photos By ZILKE	 	
						Additional Info	rmation	
				 				
02		02			02	;		
01		01		01				
COLDS	PRINGS RD				<u> </u>			
			,	DRAWING NOT TO	SCALE			
I, a sworn law enforcem								
UNIT 1 WAS EASTBOUND ON CO LINE. BOTH DRIVERS SIDE REAL	DLD SPRINGS RD. U R-VIEW MIRRORS M	NIT 2 WAS WEST ADE CONTACT V	BOUND ON VITH EACH	OCUDSPRINGS RD, BO OTHER CAUSING MINO	OTH UNITS WERE OR DAMAGE.	E TRAVELING CL	LOSE TO THE CENTER	

WISCONSIN MOTOR VEHICLE CRASH REPORT

	Location •				. ===					
	ON COLD SPRINGS	RD			Latitude				Longitude	
	31 FT E OF WOODVIEW LN				43.3968	2352		-87.96	542838	
	IN THE TOWN OF SA	UKVILLE			X Coordin			Y Coordinate		
	IN OZAUKEE COUNT	ГҮ			421817.			48053	35.5	
		Structure NO STR	Type UCTURE	·						
	Crash Scene									
	First Harmful Event				First Harn	ful Event L	ocation			
	MOTOR VEH IN TRA	NSPORT			ON ROA	DWAY				
	Manner of Collision				Light Con	dition				
	06 - SIDESWIPE/OPP				DAYLIG					
	Road Surface Condition(s	s)			Roadway	Factor(s)				
	Environment Factor(s)									
					l					
	NONE				NONE					
	Weather Condition(s)		-	-	ĺ					
	CLOUDY, RAIN									
	Animal Type				1	o Trafficwa	-			
	Crash Classification - Loc	cation					Jurisdiction			
	PUBLIC PROPERTY				NO SPECIAL JURISDICTION					
	Tribal Land	-1		Access Control NO CONTROL				Special Study		
	Within Interchange Area	Junction Location NON-JUNCTION	-	Intersection NOT AN	n Type INTERSE	CTION	•			
	Unit Summary									
	Unit Status		Vehicle Op	erating As C	lassification		Unit Type			
	IN TRANSIT		D CLASS		TRUCK					
2	Vehicle Type				Operating As Endorsements				ments	
	UTILITY TRUCK/PICK	Train/Bus # Recorded	1 = 1 = 1 = 60			1	<u> </u>	T 94 4 1 1 1 1	0-1 -1	
	Total Occs	I rain/bus # Recorded	0	itions Issued		Total Trail	ers	O O	Mat Types	
	Insurance?	Direction Of Travel	Pre CrashTi		re Speed Lie				es	
╘	YES	EASTBOUND		Mark	55		2			
NN	Most Harmful Event: Colli		Special Fur		CTION		Emergency Motor Vehicle Use NOT APPLICABLE Traffic Control Inoperative/Missing NO Road Grade			
	MOTOR VEH IN TRAI	NSPORT								
	TWO-WAY. NOT DIVI	nen	Traffic Cont						tive/ivissing	
	Surface Type		Road Curva							
	BLACKTOP (BITUMII	NOUS)	STRAIGH			LEVEL		•		
	Truck Bus or HazMat		l							
	NO _									
	20 May 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1									
	License Plate Numb	Plate Type	Plate Type		St		Country of Issuance			
	, IVILZ/20		GHT TRUC	K	WI	UNITED STATES				
7	Vehicle Identificatio	I	Make CHEVROLET		Year 2009	Model SLV				
_	Color	Body Style			2009					
	WHI - WHITE	PK - PIC				Bus Use				
	Initial Contact Point		Vehicle Da							
UNIT	길 10 - LEFT SIDE I	FRONT							7 8 9 10 11	
Ś	Extent Of Damage MINOR DAMAGE	-	10 - LEF	10 - LEFT SIDE FRONT					5 4 3 2 1	
_	MINOR DAMAGE									

CRASH REPORT

WISCONSIN MOTOR VEHICLE OZAUKEE COUNTY SHERIFFS DEPART 1201 SOUTH SPRING STREET PORT WASHINGTON, WI 53074 (262) 284-7172

1		Towed Due To Damage		Vahiala Damasınd Di						
1	'			Vehicle Removed By						
l		NOT TOWED		OWNER						
		What Driver Was Doing		Vehicle Factors						
		GOING STRAIGHT Driver Prior Action Other								
ļ				NOT APPLICABLE						
		Driver Actions		·			 			
		NO CONTRIBUTING ACTIO	N							
١.	VEHICLE	NO CONTRIBOTING ACTION								
UNIT	<u>Ö</u>									
15	王									
-	14									
L										
ŀ	June 3	Owner Name		Owner Address						
	1	A PLUS LANDSCAPING SE	RVICES LLC	3422 COUNTRY	AIRE DR					
10	2	(414) 234-8411		CEDARBURG,						
-) ·	(, 25			,					
]										
	1 :	Sequence Of Events	E 7		1 July 1 As 4		# 1 # 1			
	F 4 .	Event				* * * * * * * * * * * * * * * * * * * *				
	2	MOTOR VEH IN TRANSPOR	RT							
1			 	·		<u> </u>				
	02	Event								
	0									
1	~	Event								
1	03									
l		Const								
1	9	Event								
	1.	<u> </u>								
—		Policy Holder								
UNIT		Insurance Company		Organization/Compa		- 2 5° - 2 2° HBC	***************************************			
		MAC GILLIS AGENCY INC		A PLUS LANDSCAPING SERVICES LLC						
l		/ Individual								
	1.	Driver ISAAC MICHAEL SCHRAGE		Citations Issued	Sex		-			
	4.			0 MALE						
	A	(262) 707-1640	Date of Birth Race							
١.			08/06/1998 WHITE							
UNIT	INDIVIDUAL	Address		Driver License Number						
5	5	2490 S RIVER RD		S6204139828600						
	Z	WEST BEND, WI 53095 , US	3	STATE: WISCONSIN COUNTRY: UNITED STATES						
	ΙΤ.	11201 22112, 111 00000 , 00								
	1, 2									
		On Duty Crash		Safety Equipment						
1	Sai	fety Equipment								
		Row Seat Position 01 - FRONT ROW 07 - LEFT Helmet Use		SHOULDER & LA	AP BELT					
	37									
				Helmet Compliance						
		neimet Ose		remet compliance						
	9.4									
}	1	Eye Protection		Tint Compliance						
i										
10	5	Injury Severity NO APPARENT INJURY		Airbag						
0	ō	Injury NO APPA	ARENT INJURY	NON DEPLOYED						
		Ejected Ej	jection Path			Trapped/Extricated				
		NOT EJECTED NOT EJECTED/NOT APPL		PLICABLE		NOT TRAPPED				
		Medical Transport		EMS Agency Identif	ier	EMS Run #				
	ŗ	NOT TRANSPORTED								
		Hospital		Doto of Death		Time of Dooth				
		Hospital		Date of Death		Time of Death				
Distracted By Source										
	}	Distracted Distracted	By Source							
		Distracted By NOT APP	By Source PLICABLE (NOT DISTR.	ACTED)						
		Distracted By NOT APF	By Source PLICABLE (NOT DISTR	ACTED)						
	3	Distracted By NOT APP	By Source PLICABLE (NOT DISTR	ACTED)						

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Non Motorist	ding Unit#	Location						
		Prior Action		· · · · · · · · · · · · · · · · · · ·		•				
	===	Action								
TINO	INDIVIDUAL									
		Action Other						To/From School		
					Ta					
		Drug & Alcohol No	pected Alcohol 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 Test	Results			
2	001	Drug Type								
	1 20	Individual Condition			 -,					
		APPEARED NORMAL								
	<u></u>									
-		t Summary Status			abiala O-antina A- Classi			in the		
		RANSIT			ehicle Operating As Classi CLASS	lication		Unit Type TRUCK		
_	l.	cle Type		, -	12.02.00			Operating As Endorsements		
05		ITY TRUCK/PICKUP TRUCK								
	Tota 1	I Occs	Train/Bus # Re	corded To	otal # Citations Issued	Tot	tal Traile	ers	Total Hazi	Mat Types
		rance?	Direction Of Tra	r	Pre CrashTire		eed Lim	it	Total Lane	es
LIND	YES	t Harmful Event: Collision W	WESTBOUN		Mark 55 Special Function			Emergency I	2 Motor Vehi	cle Use
7		TOR VEH IN TRANSPO			NO SPECIAL FUNCTION			NOT APPL		
		fic Way		I .	Traffic Control NO CONTROL			Traffic Control Inoperative/Missing		
1		O-WAY, NOT DIVIDED ace Type	 					NO Road Grade		
		ACKTOP (BITUMINOUS)		Road Curvature STRAIGHT			LEVEL		
i		uck Bus or HazMat								
	NO					TO THE STATE OF TH		7 Day		
		Vehicle				St	- 1		4.5	
		License Plate Number 12701HD			Plate Type HAR - HARLEY DAVIDS			Country of Issuance UNITED STATES		
_		Vehicle Identification Number			Make Make			Model		
05	02	1FTFW1EG1GFB5185	9		FORD 2016			F150		
		Color GRN - GREEN			' '			Bus Use		
	ш	Initial Contact Point		Į.	PK - PICKUP /ehicle Damage					On program, management and program of
⊨		10 - LEFT SIDE FRON	т		J					7, 8, 9, 10, 11 6
UNIT	VEHICL	Extent Of Damage MINOR DAMAGE			10 - LEFT SIDE FRON	т				5 4 3 2 1
		Towed Due To Damage NOT TOWED			Vehicle Removed By OWNER					

6NL0NNZLW4

21-19498

WISCONSIN MOTOR VEHICLE CRASH REPORT

1	-	What Driver Was Doing		Vehicle Factors						
		GOING STRAIGHT								
		Driver Prior Action Other		TOT APPLICABLE						
	* . ! *c									
		Driver Actions								
ł	ш	NO CONTRIBUTING ACTION								
⊢	VEHICLE									
NNI	₽									
>	山山									
	>									
				·						
		Owner Name JOSHUA LOYAL PAAPE		Owner Address	ODC DD					
02	05	(262) 224-2145		3044 NORTHWOODS RD PORT WASHINGTON, WI 53074 , US						
٦	0	(202) 224-2140		FORT WASHING	51OI4, WI 55074	, 03				
		Sequence Of Events	equence Of Events							
		Event			**************************************	20	140 - 1 - 1 - 1 - 1			
	2	MOTOR VEH IN TRANSPOR	रा							
		Event								
1	02									
		Event								
	03									
		Event								
	9	Event								
i		ATTENDED TO SECURE OF AN ALTERNATION OF THE SECURE OF THE	20 5 20 12 20 20 20 20 20 20 20 20 20 20 20 20 20	in the control of the	(3-08 m n n)	2 V				
<u> </u>	F. "	Policy Holder								
UNIT		Insurance Company		Individual			*			
⊃	5.0	OWNERS-INS-CO		JOSHUA PAAPE						
		Individual								
		Driver	4.4	Citations Issued	Sex					
		JOSHUA LOYAL PAAPE (262) 224-2145		0 MALE						
	A			Date of Birth	Race					
١.	Ξ				WHITE					
L N	INDIVIDUA	Address		06/10/1998						
5	E	Address 3044 NORTHWOODS RD PORT WASHINGTON, WI 53074 , US		Driver License Number P1004329821009 STATE: WISCONSIN COUNTRY: UNITED STATES						
1	Z									
1	*	,	,							
	7 KP									
1	Sai	on Duty C fety Equipment	rasn	Safety Equipment						
1		®ig the state of								
Ì		Row	Seat Position	SHOULDER & LA	PBELT					
l	,	01 - FRONT ROW	07 - LEFT							
	10 to	Helmet Use		Helmet Compliance						
		Eye Protection		Tint Compliance						
02	002	Injury Seve	erity	Airbag						
٦	Ō	Injury NO APP	ARENT INJURY	NON DEPLOYED						
	4 3	Ejected Ejection Path				Trapped/Extricated				
	, ,		OT EJECTED/NOT APP	PLICABLE		NOT TRAPPED				
	٠,	Medical Transport		EMS Agency Identifie	г	EMS Run #				
		NOT TRANSPORTED								
	* '	Hospital		Date of Death		Time of Death				
				Ĭ						
Distracted By Source										
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)									
		Distracted By Action	· · · · · · · · · · · · · · · · · · ·							
	3	NOT DISTRACTED								
		Non Motorist	it # Location							
		STACH MOTORISE								

WISCONSIN MOTOR VEHICLE CRASH REPORT

OZAUKEE COUNTY SHERIFFS DEPART 1201 SOUTH SPRING STREET PORT WASHINGTON, WI 53074 (262) 284-7172

Crash Date 07/14/2021

Crash Time 04:15 PM

	E	·					(===, == : : : =
		Prior Action					
		Action					
TINO	INDIVIDUAL						
	N	Action Other	· · · · · · · · · · · · · · · · · · ·	·		, "	To/From School
	L	Drug & Alcohol NO	Alcohol Use	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		
02	005	Drug Type					
		Individual Condition					
		APPEARED NORMAL					