20-01263

WISCONSIN MOTOR VEHICLE CRASH REPORT

	Document Number Override	Primary Crash [Document #	· ·			ing Officer/Deputy V W. VERTEIN			
46	Crash Date 02/03/2020	Crash Time 01:16 PM				Time Arrived 01:38 PM	Time Arrived 01:38 PM			
6TL0BC3B46	Date Notified 02/03/2020	Time Notified 01:18 PM		Total Ur 02	nits	Total Injured	Total Kille 00	ed		
-0B(On Emergency	and Run	Lane Closu	ure 🗌 Work Zone		Trailer	or Towed	Reporting Threshold 		
6TL	Government Property		hool Zone	School I NO	Bus Related	Tags				
	✓ Reportable	Crash Type DT4000 (STA	NDARD CRASH	I)			ed	Secondary Crash		
	Description						Reconstruction	n By		
	Not Sca I I I STH 113						Photos By Additional Info NONE			
	✓ I, a sworn law enforcement	nt officer. agre	ee that I have no	ot added	any CJIS data in ti	his report.				
	ON THE DESCRIBED DATE, TIME, A OVERTAKE UNIT 1 ON THE LEFT, U EASTERNMOST DITCH LINE COMIT	AND LOCATION, U JNIT 1 MADE A L	UNITS 1 AND 2 WE EFT TURN STRIKIN	RE TRAVE IG UNIT 2	ELING SOUTHBOUND.	AS THE OPERATO	R OF UNIT 2 W SLID SIDEWAY	AS ATTEMPTING TO /S INTO THE		

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L	.oc	ation 🛛 🚽									
	-	STH113 SB				Latitude			Longitud		
		MIS				43.39983	5872		-89.675	16036	
		CTHDL SB HE TOWN OF MERRIN	MAC			X Coordinate Y Coordinate					
		AUK COUNTY				283366.7			480869	3.5	
						Structure	Гуре				
C	Cra	sh Scene									
Ī	First	Harmful Event				First Harm	nful Event L	ocation			
	-	FOR VEH IN TRANSPO	ORT			ON ROA					
		ner of Collision				Light Cond					
L	-	ANGLE				DAYLIG Roadway					
	DRY	I Surface Condition(s)				Roadway	Factor(S)				
-	Envii	onment Factor(s)									
	NON					NONE					
	-										
		ther Condition(s)									
	CLE	AR									
	Anim	al Type					Relation To Trafficway TRAFFICWAY - ON ROAD				
-	Cras	h Classification - Location						Jurisdiction			
		LIC PROPERTY						SDICTION			
F	Triba	l Land				Access Control Special Study					
						NO CONTROL					
		5	Junction Location		Intersection		OTION				
L	NO		NON-JUNCTION		NOTAN	INTERSE	CTION				
		Summary						1			
		Status		B CLASS	erating As C	lassification		Unit Type TRUCK			
		RANSIT cle Type		B CLASS			Operating As Endorsements				
		AIGHT TRUCK (INSE	RT TRUCK)					operating			
		Occs	Train/Bus # Recorded	Total # Cita	tions Issued	0		lers	Total Haz	zMat Types	
	1			0				0			
ľ	Insur	ance?	Direction Of Travel	Pre	CrashTire					es	
L	YES		SOUTHBOUND		Mark			2			
		Harmful Event: Collision V		Special Fun NO SPEC					Emergency Motor Vehicle Use NOT APPLICABLE		
		COR VEH IN TRANSPO	DRI	Traffic Cont				Traffic Control Inoperative/Missing NO Road Grade			
		D-WAY, NOT DIVIDED		NO CONT							
		ace Type		Road Curva							
		CKTOP (BITUMINOUS	S)	STRAIGH				LEVEL			
F	Truc	K Bus or HazMat	-					I			
			BINATION > 10,000LBS G	WR/GCWR							
		/ehicle					01				
		License Plate Number RB27419		Plate Type	EAVY TRU		St WI	Country of Is			
I		Vehicle Identification Num	nher	Make	AVIINU	UCK	Year	Model	ATES		
1	01	1M2AC07C47M01337		MACK			2007	NO DATA	FO		
1	_	Color	Body Style				Bus Use	-			
		GRN - GREEN	GG - GARBAGE OR REFUSE								
		Initial Contact Point	Vehicle Damage								
	щ										
	EHICLE		RNER		T FRONT						

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		Towed Due To Damag	ge			nicle Removed By					
		NOT TOWED			OF	PERATOR					
		What Driver Was Doir	ng		Vel	hicle Factors					
		LEFT TURN				NOT APPLICABLE					
		Driver Prior Action Oth	her		NC						
		Driver Actions									
	ш	NO CONTRIBUTIN	IG ACTIO	N							
⊢	ULI										
UNIT	Ħ										
	VEHICLE										
	-										
		Owner Name				Owner Address					
01	01	ADVANCED DISPO WASTE MIDWEST		RVICES SOLID		300 RAEMISCH RD WAUNAKEE, WI 53597	115				
0	0	(608) 807-3206				WAONARCE, WI 55557	,00				
		Sequence Of Ev	vents								
	01	LEFT TURN									
	02	Event MOTOR VEH IN TH	RANSPOR	RT							
	03	Event									
		Event									
	04										
F	I	Policy Holder									
UNIT		Insurance Company				Organization/Company					
		ARCH-INSURANC	E-CO			ADVANCED DISPOSAL S	ERVICES SOLID	WASTE MIDWEST LLC			
		Individual									
		Driver ROBERT DAVID RODRIGUEZ (715) 540-6110				Citations Issued	Sex				
	٩L					Date of Birth	MALE Race	·			
F	INDIVIDUAL						HISPA	NIC			
UNIT	N	Address			[Driver License Number					
		3328 FOREST RUI MADISON, WI 537				STATE: WISCONSIN COUNTRY: UNITED STATES					
	-		04,00								
			On Duty C	rash		Safety Equipment					
	Saf	fety Equipment	on Duty o		Ì						
	1	Row		Seat Position		SHOULDER & LAP BELT					
		01 - FRONT ROW		07 - LEFT		Helmet Compliance					
		Helmet Use)		ł						
		Eye Protection				Tint Compliance					
						·					
01	001	1 1	Injury Seve	erity ARENT INJURY		Airbag NON DEPLOYED					
	1	Ejected		jection Path			Trappe	d/Extricated			
		NOT EJECTED	N	OT EJECTED/NO	T APPLIC	CABLE	NOT T	RAPPED			
		Medical Transport			I	EMS Agency Identifier	EMS R	un #			
		NOT TRANSPORT	ED								
		Hospital			[Date of Death	Time of	f Death			
		Distracted By	Distracted	By Source	I		1				
		Distracted By Action UNKNOWN									
		L									

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		Non Motorist	riking U	nit #	Location							
	ĺ	Prior Action										
		Action										
	_											
Ь	UAI											
UNIT	NDIVIDUAL											
	IND											
		Action Other										To/From School
		Su	uspected	d Alcohol Us	Se	Suspe	cted Drug Use					
	L	Drug & Alcohol N	o			NO	0					
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Typ	e				Alcohol Test	Results	
		Drug Test Given			Drug Test Type			Drug Test I	Results			
	~	TEST NOT GIVEN Drug Type										
01	001	2.39.990										
		Individual Condition										
		APPEARED NORMA	L									
		Corrier										
		Carrier		•	. .		Source					
			icle O	wner Sam	e as Carrier		VEHICLE-SID	E				
01	01	Name ADVANCED DIS			ICES SOLI	Address OLID 300 RAEMISCH RD WAUNAKEE, WI 53597, US						
		WASTE MIDWEST LLC USDOT# 887804					WAUNAKEE,	WI 53597	, 05			
	S	GVWR Vehicle Configuration				5			Cargo	Body Type		
UNIT	BUS	MORE THAN 26,000 US DOT #	LB	SINGLE Carrier Typ					RBAGE/REFUSE			
Б	СК	887804							-	TAPPLICABLE		
	RUCK		Permit	Number						icle Required Escort Vehicle Present		
	-	Measured Height		Measur	ed Length				•	Measured Weight		
	llni	t Summary										
		Status				Vehicle Op	perating As Class	ification		Unit Type		
		RANSIT cle Type				DCLASS	6			AUTOMOE Operating As		pents
02										Operating A	Endorsen	
•	Total 2	Occs	Trair	n/Bus # Rec		Total # Cit 0	ations Issued	Tot: 0	al Traile	rs	Total HazN 0	/lat Types
		ance?	Dire	ction Of Tra			CrashTire		ed Limi	t	Total Lane	s
UNIT	YES	Harmful Event: Collision		JTHBOUN			Mark	55		Emergency	2 Motor Vehic	
Б	MO	TOR VEH IN TRANSPO				Special Function Emergency Motor NO SPECIAL FUNCTION NOT APPLICA				ICABLE		
		ic Way D-WAY, NOT DIVIDED				Traffic Cor				Traffic Control Inoperative/Missing		
	Surfa	асе Туре				Road Curv	rature			Road Grade		
	BLACKTOP (BITUMINOUS)					STRAIGHT				LEVEL		

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		k Bus or HazMat								
	NO									
		Vehicle			1.0+	Country of Issuance				
		License Plate Number ADZ5305		Plate Type AUT - AUTOMOBILE						
		Vehicle Identification Number		Make	Year	UNITED STATES Model				
03	02	3VW3L7AJ7EM262006		VOLKSWAGEN	2014	JETTA TDI				
		Color		Body Style		Bus Use				
		SIL - SILVER (ALUMINUM)		4D - 4DR						
Ι.	Щ	Initial Contact Point		Vehicle Damage						
	E E	04 - RIGHT SIDE REAR								
	VEHICLE	Extent Of Damage DISABLING DAMAGE		04 - RIGHT SIDE REAR,	05 - КІВНТ					
	>	Towed Due To Damage		Vehicle Removed By						
		TOWED DUE TO DISABLIN	G DAMAGE	CRAIGS TOWING						
		What Driver Was Doing		Vehicle Factors						
		OVERTAKE LEFT								
		Driver Prior Action Other		NOT APPLICABLE						
		Driver Actions								
	ш	NO CONTRIBUTING ACTION								
F	VEHICLE									
UNIT	Ĭ									
-	2									
		Owner Name JOSEPH L PRIVETT JR		Owner Address 135C GRAND CANYON DR # 201						
8	02	(608) 415-8719		BARABOO, WI 53913 , US						
		Sequence Of Events								
		Event	~-							
	6	MOTOR VEH IN TRANSPOR	RI							
	02	Event RUN OFF ROADWAY LEFT								
	03	Event DITCH								
		Event								
	04	Lvent								
⊢		Policy Holder								
N.		Insurance Company		Individual						
		PROGRESSIVE-ADVANCE	D-INSURANCE-CO	JOSEPH PRIVETT						
		Individual								
		Driver JOSEPH L PRIVETT JR		Citations Issued		Sex				
	AL	(608) 415-8719		0 Date of Birth		MALE Race				
╘	D			Date of Dirtit		WHITE				
UNIT	INDIVIDUAL	Address		Driver License Number						
	P	135C GRAND CANYON DR BARABOO, WI 53913, US	# 201	STATE: WISCONSIN	STATE: WISCONSIN COUNTRY: UNITED STATES					
	=	BARADOO, WI 53915 , 05		STATE. WISCONSING						
		On Duty C	rach	Cofety Faultament						
	Sa	fety Equipment	10511	Safety Equipment						
		Row	Seat Position	SHOULDER & LAP BE	ELT					
		01 - FRONT ROW	07 - LEFT							
		01 - FRONT ROW Helmet Use	07 - LEF I	Helmet Compliance						

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		Eye Protection		Tint Compliance						
02	002	Injury S Injury NO AP	everity PARENT INJURY	Airbag NON DEPLOYED						
	•	Ejected	Ejection Path	Trapped/Extricated						
		NOT EJECTED	NOT EJECTED/NOT APP	LICABLE		NOT TRAPPED				
		Medical Transport		EMS Agency Identifier		EMS Run #				
		NOT TRANSPORTED								
		Hospital		Date of Death		Time of Death				
		Distracted By	ed By Source							
		Distracted By Action								
		Non Motorist	Unit # Location							
		Prior Action								
		Action								
	٩ſ									
UNIT	INDIVIDUAL									
5	2									
	Z									
		Action Other					To/From School			
		Suspect	ted Alcohol Use	Suspected Drug Use						
	-	Drug & Alcohol NO		NO						
		Alcohol Test Given	Alcohol Test Type	e		Alcohol Test Results				
		TEST NOT GIVEN	Drug Tagé Tura							
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results	5				
02	002	Drug Type								
		Individual Condition								
		APPEARED NORMAL								
		Individual								
		Passenger		Citations Issued		Sex				
	Ļ	HANNAH MARIE R RILE) (608) 432-6444	(0		FEMALE				
	INDIVIDUAL	(000) 432-0444		Date of Birth		Race WHITE				
L,	ē					WHILE				
UNIT	E	Address 135C GRAND CANYON D	R APT 201	Driver License Number	r					
	Z	BARABOO, WI 53913 , U		STATE: WISCONSIN COUNTRY: UNITED STATES						
		On Duty	/ Crash	Safety Equipment						
	Sa	fety Equipment								
		Row	Seat Position	SHOULDER & LAP	BELT					
		01 - FRONT ROW Helmet Use	09 - RIGHT	Lielmot Compliance						
				Helmet Compliance						
		Eye Protection		Tint Compliance						

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8	003		Injury Sev			Airbag			
0	ŏ			DEPLOYED-CURTAIN					
		Ejected	E	Ejection Path	1			Trapped/Extricated	
		NOT EJECTED	1	NOT EJEC	TED/NOT APPL	ICABLE		NOT TRAPPED	
1		Medical Transport				EMS Agency Identifier		EMS Run #	
		NOT TRANSPORT	ED						
1		Hospital				Date of Death		Time of Death	
		Distracted By	Distracted	By Source					
Î.		Distracted By Action							
		Non Motorist	Striking U	nit #	Location				
		Prior Action		·					
i		Action							
	AL								
⊢	INDIVIDUAL								
UNIT									
	D								
	Z								
		Action Other							To/From School
		Action Other							
			Suspected	d Alcohol Us	e	Suspected Drug Use			
	L	Drug & Alcohol	NO			NO			
		Alcohol Test Given			Alcohol Test Type			Alcohol Test Results	
		TEST NOT GIVEN							
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Results		
		TEST NOT GIVEN							
62	003	Drug Type							
	õ								
		Individual Condition							
		APPEARED NOR	MAL						