6TL08F2KXG

20-01901

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash Document #		Agency Crash Number 20-01901		Investigating Officer/Deputy DEPUTY T. SUTHERLAND		
2	Crash Date 02/19/2020	Crash Time 02:30 PM			rived 2020	Time Arrived 02:45 PM		
	Date Notified 02/19/2020				Total Units 01		d Total Kill 00	led
00	On Emergency	Hit and Run	Lane Closu	ure	Work Zone		or Towed	Reporting Threshold
	Government Property	Active Sch	hool Zone	School NO	Bus Related	Tags		
	Reportable	Crash Type DT4000 (STAI	NDARD CRASH	H)		Amen	ded	Secondary Crash
	Description						Reconstructio	
	— Not To Scale				Г Т Т Т Т Т Т Т Т Т Т Т Т Т	3	Photos By	ormation
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	Loc	ation									
Ī		EAST ST/ STH33 EB			L	Latitude			Longitud	le	
							43.640046792		-90.20732828		
	OF STRAWBRIDGE RD IN THE TOWN OF WOODLAND IN SAUK COUNTY						X Coordinate 241299.203125		Y Coordinate		
									483689	4.5	
							Structure Type				
					1	NO STRU	ICTURE				
(Cra	sh Scene									
Ī	First	Harmful Event			F	First Harmf	ul Event Lo	ocation			
	DIT	СН			C	ON ROADWAY					
	Manner of Collision						Light Condition				
	00 - NO COLLISION W/VEHICLE IN TRANSPORT					DAYLIGH	IT				
	Road	d Surface Condition(s)			F	Roadway Factor(s)					
	DR۱	Y									
	Envi	ronment Factor(s)									
	NO					NONE					
	-										
		ther Condition(s)									
	CLE	EAR									
	Anim	nal Type			F	Relation To	Trafficway	/			
					ר	TRAFFIC	WAY - O	N ROAD			
Ī	Cras	sh Classification - Location		C	Crash Classification - Jurisdiction						
	-	BLIC PROPERTY						ISDICTION		•	
	Triba	al Land			Access Control				Special Study		
	14/241					NO CONTROL					
						ction Type					
	NO										
L						NIERSEC					
 		t Summary		Vahiala On	_			Link Trues			
	Unit	Status		-	erating As Clas			Unit Type			
	Unit	Status RANSIT		Vehicle Ope	erating As Clas			TRUCK	s Endorser	nents	
	Unit IN T Vehi	Status RANSIT icle Type	TRUCK	-	erating As Clas				s Endorser	nents	
	Unit IN T Vehi UTI	Status RANSIT	TRUCK Train/Bus # Recorded	D CLASS	erating As Clas		Total Trail	TRUCK Operating A		ments Mat Types	
	Unit IN T Vehi UTI	Status TRANSIT icle Type LITY TRUCK/PICKUP		D CLASS	erating As Clas	ssification		TRUCK Operating A			
	Unit IN T Vehi UTII Tota 1 Insu	Status TRANSIT icle Type LITY TRUCK/PICKUP 1 I Occs rance?		D CLASS	erating As Clas	ssification	Total Trail	TRUCK Operating A ers	Total Haz	Mat Types	
10	Unit IN T Vehi UTII Tota 1 Insur YES	Status RANSIT icle Type LITY TRUCK/PICKUP I Occs rance? S	Train/Bus # Recorded Direction Of Travel EASTBOUND	D CLASS	tions Issued CrashTire Mark	ssification	Total Trail 0	TRUCK Operating A ers	Total Haz 0 Total Land 2	Mat Types es	
LD	Unit IN T Vehi UTII Tota 1 Insur YES Most	Status RANSIT icle Type LITY TRUCK/PICKUP I Occs rance? S t Harmful Event: Collision N	Train/Bus # Recorded Direction Of Travel EASTBOUND	D CLASS	tions Issued CrashTire Mark	ssification	Total Trail 0 Speed Lin	TRUCK Operating A ers hit Emergency	Total Haz 0 Total Land 2 Motor Vehi	Mat Types es	
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		Towed Due To Damage			hicle Removed By				
		TOWED DUE TO DISAB	LING DAMAGE						
		What Driver Was Doing NEGOTIATING CURVE		Ve	hicle Factors				
		Driver Prior Action Other		- co	OUPLING DEVICE/TRAILER HITCH/S	SAFETY CHAINS			
		Driver Filor Action Other							
		Driver Actions							
	щ	NO CONTRIBUTING AC	TION						
Ē	5								
UNIT	VEHICLE								
	2								
		Ourses Name			Owner Address				
		Owner Name WILLIAM R GASSER			S9010 DENZER RD				
2	6	(608) 544-2093			PRAIRIE DU SAC, WI 53578, US				
	ļ	Sequence Of Events	5						
	5	Event DITCH							
	-	Event							
	02	Lvent							
	03	Event							
	0	-							
	04	Event							
⊢	I	Policy Holder							
UNIT		Insurance Company			Individual				
2		AMERICAN-FAMILY-INS-CO			WILLIAM GASSER				
	I	Individual							
		Driver WILLIAM R GASSER			Citations Issued	Sex			
	٩L	(608) 544-2093			0 Date of Birth	MALE Race			
⊢	INDIVIDUAI					WHITE			
UNIT	Σ	Address		Driver License Number					
	Z	S9010 DENZER RD PRAIRIE DU SAC, WI 53578 , US			STATE: WISCONSIN COUNTRY: UNITED STATES				
	-								
		On Du	ity Crash		Safety Equipment				
	Sat	fety Equipment							
		Row	Seat Position	:	SHOULDER & LAP BELT				
		01 - FRONT ROW	07 - LEFT						
		Helmet Use		Helmet Compliance					
		Eye Protection		Tint Compliance					
2	001	1 · · · · · · · · · · · · · · · · ·							
-	0	Ejected	PPARENT INJURY		NON DEPLOYED	Trapped/Extricated			
			NOT EJECTED/NOT A	PPLI	CABLE	NOT TRAPPED			
		Medical Transport			EMS Agency Identifier	EMS Run #			
		NOT TRANSPORTED							
		Hospital			Date of Death	Time of Death			
		Distra	cted By Source			1			
		Distracted By NOT	APPLICABLE (NOT DIST	RAC	TED)				
		Distracted By Action NOT DISTRACTED							

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		Non Motorist	Striking Unit #	Location				
		Prior Action						
UNIT	INDIVIDUAL	Action						
		Action Other						To/From School
	L	Drug & Alcohol	Suspected Alcohol L NO	Jse	Suspected Drug Use			
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	•		Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		
5	001	Drug Type						
		Individual Condition						
		APPEARED NORM	IAL					
01	001	Individual Condition	I AL					