

6TL09PBQD8

20-02097

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

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Document Number Override		Primary Crash Document #		Agency Crash Number 20-02097		Investigating Officer/Deputy DEPUTY B. STODDARD	
Crash Date 02/24/2020		Crash Time 02:17 PM		Date Arrived 02/24/2020		Time Arrived 02:29 PM	
Date Notified 02/24/2020		Time Notified 02:19 PM		Total Units 02		Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input checked="" type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone		<input checked="" type="checkbox"/> Trailer or Towed	<input type="checkbox"/> Reporting Threshold	
<input type="checkbox"/> Government Property		<input type="checkbox"/> Active School Zone		School Bus Related NO		Tags	
<input type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

<p>Diagram</p> <p>CTH BD</p> <p>U1</p> <p>U2</p> <p>U1</p> <p>Not to Scale</p>	Reconstruction By
	Photos By
	Additional Information NONE

☒ I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

UNIT 2 WAS NORTHBOUND ON CTH BD. UNIT 1 WAS NORTHBOUND ON CTH BD TRAVELING BEHIND UNIT 2. UNIT 1 WAS PULLING A UTILITY TRAILER. UNIT 2 OPERATOR STATED UNIT 1 WAS TAILGATING. UNIT 1 PASSED UNIT 2 AND WHEN UNIT 1 REENTERED THE NORTHBOUND LANE UNIT 1'S TRAILER STRUCK UNIT 2'S FRONT LEFT FENDER/TIRE AREA. PLATE ON UTILITY TRAILER IS SIMILAR TO: XP57884.

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Location

ON CTHBD 442 FT N OF PENNY LN IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude 43.52385278	Longitude -89.777892679
	X Coordinate 275506.90625	Y Coordinate 4822739.5
	Structure Type	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 07 - SIDESWIPE/SAME DIRECTION		Light Condition DAYLIGHT	
Road Surface Condition(s) DRY		Roadway Factor(s) NONE	
Environment Factor(s) NONE			
Weather Condition(s) CLEAR			
Animal Type		Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY		Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land		Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION	

Unit Summary

UNIT 01	Unit Status HIT AND RUN		Vehicle Operating As Classification D CLASS		Unit Type TRUCK		
	Vehicle Type UTILITY TRUCK/PICKUP TRUCK				Operating As Endorsements		
	Total Occs 0	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 1	Total HazMat Types 0		
	Insurance? UNKNOWN	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2		
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function UNKNOWN		Emergency Motor Vehicle Use UNKNOWN		
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO		
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL		
	Truck Bus or HazMat NO						
	UNIT 01 VEHICLE	Vehicle					
		License Plate Number		Plate Type	St	Country of Issuance	
Vehicle Identification Number		Make	Year	Model			
Color		Body Style		Bus Use			
Initial Contact Point 99 - UNKNOWN		Vehicle Damage					
Extent Of Damage VEHICLE NOT AT SCENE		16 - VEHICLE NOT AT SCENE					

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UNIT 01	VEHICLE	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR			
		What Driver Was Doing OVERTAKE LEFT	Vehicle Factors			
		Driver Prior Action Other	UNKNOWN			
		Driver Actions OPERATED MOTOR VEHICLE IN AGGRESSIVE/RECKLESS MANNER, UNKNOWN				
		Owner Name	Owner Address , ,			
Sequence Of Events						
UNIT 01	TRAILER/	Event MOTOR VEH IN TRANSPORT				
		Event				
		Event				
		Event				
Trailer/Towed						
UNIT 01	TRAILER/	Trailer Plate #	Plate Type	Make	State	Country of Issuance
		Unit Type	Unknown			Address
		Vehicle Identification Number				, ,

Unit Summary

UNIT 02	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR	Operating As Endorsements			
	Total Occs 2	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL
	Truck Bus or HazMat NO				
	Vehicle				
	UNIT 02	License Plate Number ACX3964	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
Vehicle Identification Number 1G4ZR5SS9HU153355		Make BUICK	Year 2017	Model LACROSSE	
Color WHI - WHITE		Body Style SD - SEDAN		Bus Use	

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UNIT	VEHICLE	Initial Contact Point 10 - LEFT SIDE FRONT		Vehicle Damage		
		Extent Of Damage MINOR DAMAGE		10 - LEFT SIDE FRONT		
		Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR		
		What Driver Was Doing GOING STRAIGHT		Vehicle Factors		
		Driver Prior Action Other		NOT APPLICABLE		
UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTION				
02	02	Owner Name ROBERT V SCHWEISS (608) 546-2603		Owner Address 1330 GREENLEAF AVE PLAIN, WI 53577 , US		
Sequence Of Events						
01	01	Event MOTOR VEH IN TRANSPORT				
		Event				
		Event				
		Event				
02	02	Event				
		Event				
03	03	Event				
		Event				
04	04	Event				
		Event				
Policy Holder						
UNIT	UNIT	Insurance Company AMERICAN-FAMILY-INS-CO		Individual ROBERT SCHWEISS		
Individual						
UNIT	INDIVIDUAL	Driver ROBERT V SCHWEISS (608) 546-2603		Citations Issued 0	Sex MALE	
				Date of Birth	Race WHITE	
		Address 1330 GREENLEAF AVE PLAIN, WI 53577 , US		Driver License Number		
				STATE: WISCONSIN COUNTRY: UNITED STATES		
02	001	Safety Equipment		On Duty Crash		
		Safety Equipment				
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT		
		Helmet Use		Helmet Compliance		
		Eye Protection		Tint Compliance		
		Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED	
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED	
Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #		
Hospital		Date of Death		Time of Death		

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UNIT	INDIVIDUAL	Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
		Distracted By Action NOT DISTRACTED				
		Non Motorist	Striking Unit #	Location		
		Prior Action				
		Action				
		Action Other				
		To/From School				
		Drug & Alcohol	Suspected Alcohol Use NO		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	001	Drug Type				
		Individual Condition APPEARED NORMAL				
		Individual				
		Passenger CONSTANCE J SCHWEISS (608) 963-3406		Citations Issued 0	Sex FEMALE	
				Date of Birth	Race WHITE	
		Address 1330 GREENLEAF AVE PLAIN, WI 53577 , US		Driver License Number		
		Safety Equipment		On Duty Crash		
		Row 01 - FRONT ROW		Seat Position 09 - RIGHT		
		Helmet Use		SHOULDER & LAP BELT		
		Eye Protection		Helmet Compliance		
02	002	Injury Severity NO APPARENT INJURY		Airbag NON DEPLOYED		
		Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #
		Hospital		Date of Death		Time of Death
		Distracted By		Distracted By Source		

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UNIT INDIVIDUAL 02 002	Distracted By Action		
	Non Motorist	Striking Unit #	Location
	Prior Action		
	Action		
	Action Other		To/From School
	Drug & Alcohol	Suspected Alcohol Use NO	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
	Drug Type		
Individual Condition APPEARED NORMAL			