

6TL0B655PR  
20-02356

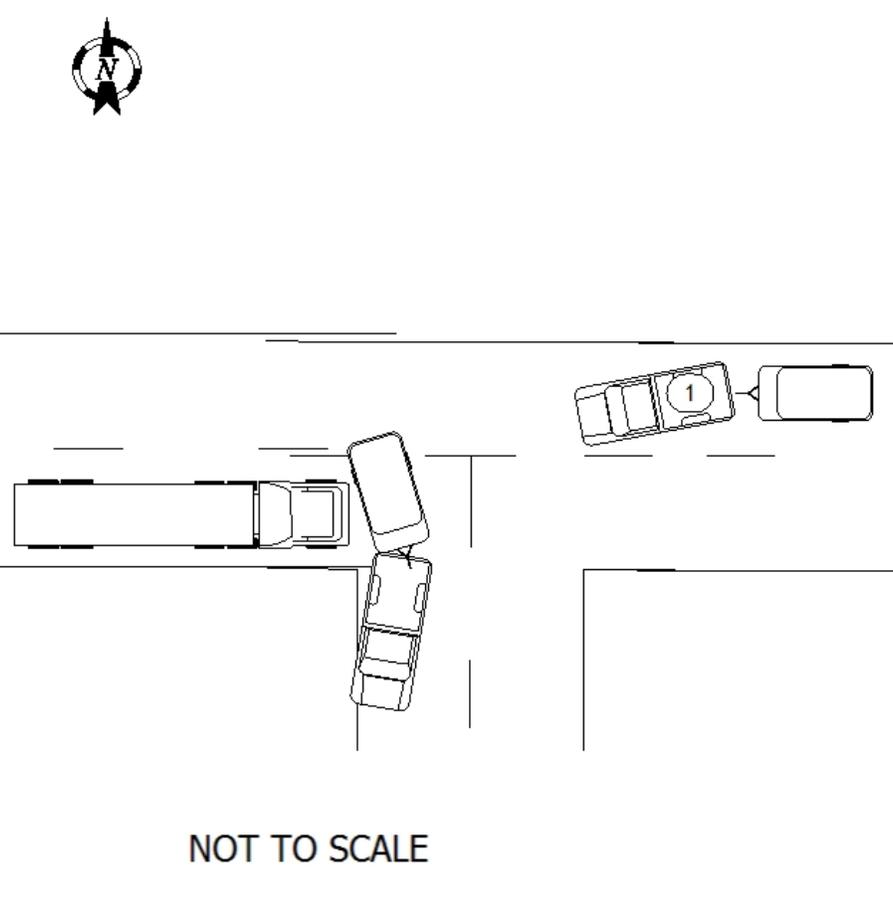
# WISCONSIN MOTOR VEHICLE CRASH REPORT

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 <b>20-02356</b>	Investigating Officer/Deputy <b>DEPUTY W. NEUBAUER</b>	
Crash Date <b>03/02/2020</b>		Crash Time <b>08:40 PM</b>	Date Arrived <b>03/02/2020</b>	Time Arrived <b>08:57 PM</b>	
Date Notified <b>03/02/2020</b>		Time Notified <b>08:45 PM</b>	Total Units <b>02</b>	Total Injured <b>00</b>	Total Killed <b>00</b>
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone	<input checked="" type="checkbox"/> Trailer or Towed	<input checked="" type="checkbox"/> Reporting Threshold
<input type="checkbox"/> Government Property	<input type="checkbox"/> Active School Zone	School Bus Related <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

## Description

Diagram  <p style="text-align: center;">NOT TO SCALE</p>	Reconstruction By
	Photos By <b>DEP. W. NEUBAUER</b>
	Additional Information <b>NONE, PHOTOS</b>
<input checked="" type="checkbox"/> I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.	
UNIT 1 WAS TRAVELING W/B ON STH 33. UNIT 2 WAS TRAVELING E/B ON STH 33. UNIT1 ATTEMPTED TO TURN LEFT ONTO ABLEMAN RD. UNIT 1 TURNED IN FROM OF UNIT 2. UNIT 2 COLLIDED WITH UNIT 1 TRAILER.	

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Location

ON STH23 EB 34 FT W OF ABLEMAN RD IN THE TOWN OF EXCELSIOR IN SAUK COUNTY	Latitude <b>43.532921955</b>	Longitude <b>-89.917145963</b>
	X Coordinate <b>264288.125</b>	Y Coordinate <b>4824132.5</b>
	Structure Type <b>NO STRUCTURE</b>	

Crash Scene

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>	First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>01 - ANGLE</b>	Light Condition <b>DARK/UNLIT</b>	
Road Surface Condition(s) <b>DRY</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>		
Weather Condition(s) <b>CLEAR</b>		
Animal Type	Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>	Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land	Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>YES</b>	Junction Location <b>INTERSECTION</b>	Intersection Type <b>T-INTERSECTION</b>

Unit Summary

UNIT 01	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>TRUCK</b>		
	Vehicle Type <b>UTILITY TRUCK/PICKUP TRUCK</b>	Operating As Endorsements			
	Total Occs <b>2</b>	Train/Bus # Recorded	Total # Citations Issued <b>3</b>	Total Trailers <b>1</b>	Total HazMat Types <b>0</b>
	Insurance? <b>NO</b>	Direction Of Travel <b>WESTBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>55</b>	Total Lanes <b>2</b>
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>	Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>	Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>	Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>				

UNIT 01 VEHICLE	<b>Vehicle</b>			
	License Plate Number <b>348587F</b>	Plate Type <b>LTK - LIGHT TRUCK</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>1GDJK34R0VF009967</b>	Make <b>GENERAL MOTORS COR</b>	Year <b>1997</b>	Model <b>SIERRA K35</b>
	Color <b>GRN - GREEN</b>	Body Style <b>CB - CAB CHASSIS</b>		Bus Use
	Initial Contact Point <b>04 - RIGHT SIDE REAR</b>	Vehicle Damage <b>04 - RIGHT SIDE REAR</b>		
Extent Of Damage <b>MINOR DAMAGE</b>				

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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>		
	What Driver Was Doing <b>LEFT TURN</b>		Vehicle Factors		
	Driver Prior Action Other		<b>NOT APPLICABLE</b>		
	Driver Actions <b>FAILED TO YIELD RIGHT-OF-WAY</b>				
01	01	Owner Name <b>GARY LEE JERRETT JR (608) 393-3497</b>		Owner Address <b>E7288 STATE ROAD 23 AND 33 REEDSBURG, WI 53959 , US</b>	
<b>Sequence Of Events</b>					
	01	Event <b>LEFT TURN</b>			
	02	Event <b>MOTOR VEH IN TRANSPORT</b>			
	03	Event			
	04	Event			
UNIT TRAILER/	<b>Trailer/Towed</b>				
	Trailer Plate # <b>HF5693</b>	Plate Type <b>FTL - FARM</b>	Make <b>FLAI</b>	State <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Unit Type <b>UTILITY TRAILER</b>	Individual <b>GARY LEE JERRETT JR (608) 393-3497</b>		Address <b>E7288 STATE ROAD 23 AND 33 REEDSBURG, WI 53959 , US</b>	
	Vehicle Identification Number <b>112HAN306NL040181</b>				
UNIT INDIVIDUAL	<b>Individual</b>				
	Driver <b>GARY LEE JERRETT JR (608) 393-3497</b>		Citations Issued <b>3</b>	Sex <b>MALE</b>	
			Date of Birth	Race <b>WHITE</b>	
	Address <b>E7288 STATE ROAD 23 AND 33 REEDSBURG, WI 53959 , US</b>		Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
UNIT 001	<b>Safety Equipment</b>		On Duty Crash		
			Safety Equipment		
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>SHOULDER &amp; LAP BELT</b>		
	Helmet Use		Helmet Compliance		
	Eye Protection		Tint Compliance		
	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>		
	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</b>	
	Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #	
	Hospital		Date of Death	Time of Death	

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT	<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>			
	Distracted By Action <b>NOT DISTRACTED</b>					
	<b>Non Motorist</b>	Striking Unit #	Location			
	Prior Action					
	Action					
	Action Other		To/From School			
	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>		Suspected Drug Use <b>NO</b>		
	Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type		Alcohol Test Results	
	Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type		Drug Test Results	
	Drug Type					
01	001	Individual Condition <b>APPEARED NORMAL</b>				
		<b>Individual</b>				
		Passenger <b>LANNIE R PYFFEROEN</b>		Citations Issued <b>0</b>		Sex <b>MALE</b>
				Date of Birth		Race <b>WHITE</b>
		Address <b>E7980 E LAKE VIRGINIA RD REEDSBURG, WI 53959 , US</b>		Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
		<b>Safety Equipment</b>	On Duty Crash		Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
		Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</b>			
		Helmet Use		Helmet Compliance		
		Eye Protection		Tint Compliance		
		01	002	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	
Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>			Trapped/Extricated <b>NOT TRAPPED</b>		
Medical Transport <b>NOT TRANSPORTED</b>				EMS Agency Identifier		EMS Run #
Hospital				Date of Death		Time of Death
<b>Distracted By</b>				Distracted By Source		

WISCONSIN MOTOR VEHICLE  
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UNIT	Distracted By Action					
	INDIVIDUAL	<b>Non Motorist</b>	Striking Unit #	Location		
		Prior Action				
	Action					
	Action Other			To/From School		
	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>			
	Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type		Alcohol Test Results		
	Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results			
	Drug Type					
	Individual Condition <b>APPEARED NORMAL</b>					
<b>Violations</b>						
01	002	UTC Number <b>BB958272</b>	Issue To? <b>001</b>	Statute Number <b>344.62(1)</b>	Description <b>OPERATE MOTOR VEHICLE W/O INSURANCE</b>	
		UTC Number <b>BB958273</b>	Issue To? <b>001</b>	Statute Number <b>346.18(2)</b>	Description <b>FAIL/YIELD WHILE MAKING LEFT TURN</b>	
		UTC Number <b>BB958274</b>	Issue To? <b>001</b>	Statute Number <b>346.13(1)</b>	Description <b>UNSAFE LANE DEVIATION</b>	

**Unit Summary**

UNIT	02	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>A CLASS</b>		Unit Type <b>TRUCK</b>			
		Vehicle Type <b>TRUCK TRACTOR (SEMI ATTACHED)</b>				Operating As Endorsements			
		Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>		Total Trailers <b>1</b>	Total HazMat Types <b>0</b>		
		Insurance? <b>YES</b>	Direction Of Travel <b>EASTBOUND</b>	<input type="checkbox"/> Pre CrashTire Mark		Speed Limit <b>55</b>	Total Lanes <b>2</b>		
		Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>			Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>		
		Traffic Way <b>TWO-WAY, NOT DIVIDED</b>			Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>		
		Surface Type <b>BLACKTOP (BITUMINOUS)</b>			Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>		
		Truck Bus or HazMat <b>TRUCK OR TRUCK COMBINATION &gt; 10,000LBS GVWR/GCWR</b>							
		<b>Vehicle</b>							
		License Plate Number <b>64941</b>			Plate Type <b>APO - APPORTIONED</b>		St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	

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UNIT VEHICLE	02	Vehicle Identification Number <b>3HSDJAPR0EN532556</b>	Make <b>INTERNATIONAL</b>	Year <b>2014</b>	Model <b>SEMI</b>	
	02	Color <b>RED - RED</b>	Body Style <b>DS - TRACTOR-TRUCK DIESEL</b>	Bus Use		
	02	Initial Contact Point <b>12 - FRONT</b>	Vehicle Damage			
	02	Extent Of Damage <b>DISABLING DAMAGE</b>	<b>01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT</b>			
	02	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>	Vehicle Removed By <b>STEVES AUTO SERVICE</b>			
	02	What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors			
	02	Driver Prior Action Other	<b>NOT APPLICABLE</b>			
UNIT VEHICLE	02	Driver Actions <b>NO CONTRIBUTING ACTION</b>				
	02	Owner Name <b>KEENE'S TRANSFER (608) 372-4178</b>	Owner Address <b>909 TOWNLINE RD 87 TOMAH, WI 54660 , US</b>			
<b>Sequence Of Events</b>						
UNIT	01	Event <b>MOTOR VEH IN TRANSPORT</b>				
	02	Event				
	03	Event				
	04	Event				
UNIT	<b>Policy Holder</b>					
	02	Insurance Company <b>GREAT-WEST-CASUALTY-CO</b>	Organization/Company <b>KEENE'S TRANSFER</b>			
UNIT TRAILER/	<b>Trailer/Towed</b>					
	02	Trailer Plate # <b>678602</b>	Plate Type <b>STL - SEMI</b>	Make <b>WANC</b>	State <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	02	Unit Type <b>SEMI TRAILER</b>	Organization/Company <b>KEENE'S TRANSFER (608) 372-4178</b>		Address <b>909 TOWNLINE RD 87 TOMAH, WI 54660 , US</b>	
UNIT INDIVIDUAL	02	Vehicle Identification Number <b>1JJV532D5FL879325</b>				
	<b>Individual</b>					
	02	Driver <b>STEVEN ALLEN GUNDER (608) 387-0203</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>		
02		Date of Birth	Race <b>WHITE</b>			
02	Address <b>12928 COUNTY HIGHWAY PP TOMAH, WI 54660 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>				
UNIT	<b>Safety Equipment</b>					
	02	On Duty Crash	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>			
02	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>				

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02	003	Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
		<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>		Airbag <b>NON DEPLOYED</b>		
			Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</b>	
		Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #		
		Hospital		Date of Death	Time of Death		
		<b>Distracted By</b>	Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>				
			Distracted By Action <b>NOT DISTRACTED</b>				
		<b>Non Motorist</b>	Striking Unit #	Location			
			Prior Action				
UNIT	INDIVIDUAL	Action					
		Action Other				To/From School	
		<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>		Suspected Drug Use <b>NO</b>		
			Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type		Alcohol Test Results	
		Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type		Drug Test Results		
		Drug Type					
		Individual Condition <b>APPEARED NORMAL</b>					
		<b>Carrier</b>					
		02	01	<input checked="" type="checkbox"/> Use Vehicle Owner Same as Carrier		Source <b>DRIVER</b>	
				Name <b>KEENE'S TRANSFER USDOT# 74345</b>		Address <b>909 TOWNLINE RD 87 TOMAH, WI 54660 , US</b>	
UNIT	TRUCK	GVWR <b>10,001-26,000 LBS</b>	Vehicle Configuration <b>TRUCK TRACTOR/SEMI-TRAILER</b>		Cargo Body Type <b>VAN/ENCLOSED BOX</b>		
		US DOT # <b>74345</b>	Carrier Type <b>INTERSTATE CARRIER</b>		Permitted Load <b>NOT APPLICABLE</b>		
		<input type="checkbox"/> OS/OW Load	WI Permit Number	<input type="checkbox"/> Permitted Vehicle On Permitted Route	<input type="checkbox"/> Escort Vehicle Required By Permit	<input type="checkbox"/> Escort Vehicle Present	
		Measured Height	Measured Length	Measured Width	Measured Weight		