

20-10248

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

Document Number Override		Primary Crash Document #		Agency Crash Number 20-10248		Investigating Officer/Deputy DEPUTY C. FRANK	
Crash Date 08/19/2020		Crash Time 03:01 PM		Date Arrived 08/19/2020		Time Arrived 03:08 PM	
Date Notified 08/19/2020		Time Notified 03:03 PM		Total Units 02		Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure		<input type="checkbox"/> Work Zone		<input 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 checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

ON_STH33_WB 4_FT_E OF_CTHBD_SB IN_THE_VILLAGE_OF_WEST_BARABOO IN_SAUK_COUNTY	Latitude	Longitude	Lat/LongSource	Access Control
	43.47479385	-89.7688186	TLT/ILT	
	X Coordinate	Y Coordinate	On Roadway Link ID#	On Roadway Link Offset
	276058.8437	4817266.5	4564249	4
	Override <input type="checkbox"/>	Tribal Land		Structure Type

First Harmful Event		First Harmful Event Location	
MOTOR VEH IN TRANSPORT		ON ROADWAY	
Manner of Collision		Light Condition	
06 - SIDESWIPE/OPPOSITE DIRECTION		DAYLIGHT	
Road Surface Condition(s)		Environment Factor(s)	
DRY		NONE	
Roadway Factor(s)		Weather Condition(s)	
NONE		CLEAR	
Animal Type		Relation To Trafficway	
		TRAFFICWAY - ON ROAD	
Crash Classification - Location		Crash Classification - Jurisdiction	
PUBLIC PROPERTY		NO SPECIAL JURISDICTION	
Tribal Land		Access Control	Special Study
NO		NO CONTROL	
Within Interchange Area	Junction Location	Intersection Type	
NO	INTERSECTION	FOUR-WAY INTERSECTION	

01 UNIT	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 25	Total Lanes 4	
	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 TRAFFIC SIGNAL		Traffic Control Inoperative/Missing NO	
	Surface Type CONCRETE		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

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UNIT 01	Role DRIVER			Citations Issued 0		<input type="checkbox"/> Use Driver Address		Individual Type INDIVIDUAL		
	Last Name ALBRECHT			First Name BEVERLY			Middle Initial A		Suffix	
	Street Address			Street Address 2			PO Box			
	City			State WI		Zip Code		Country of Residence UNITED STATES		
	DOB		Sex F	Race W	Hair BLOND	Eyes BLUE	Height 502	Weight 180	Phone Number (920) 960-8889 EXT.	
	Driver's License Number			State WI		License Jurisdiction STATE		Country of Issuance UNITED STATES		
	License Type NON-CDL DRIVER'S LICENSE			License Status VALID LICENSE			DL Expire Year 2025			
	Equipment		On Duty Accident			Safety Equipment				
	Row 01 - FRONT ROW		Seat Position 07 - LEFT			SHOULDER & LAP BELT				
	Helmet Use			Helmet Compliance						
Eye Protection			Tint Compliance							
UNIT 01	Injury		Injury Severity NO APPARENT INJURY			Airbag NON DEPLOYED				
	Ejected NOT EJECTED			Ejection Path NOT EJECTED/NOT APPLICA			Trapped/Extricated NOT TRAPPED			
	Medical Transport NOT TRANSPORTED			EMS Agency Identifier			EMS Run #			
	Hospital			Date of Death			Time of Death			
	Non Motorist		Striking Unit #			Location		To/From School		
	Prior Action			Action						
	Distracted By Action NOT DISTRACTED									
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)			Action Other						
	Drug & Alcoh		Individual Condition APPEARED NORMAL							
	Suspected Alcohol Use NO			Suspected Drug Use NO						
UNIT 01	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									
	License Plate Number 74468			Plate Type AUT - AUTOMOBILE		St WI		Country of Issuance UNITED STATES		
	Vehicle Identification Number 5Y2SL65898Z401801					Year 2008		Make PONTIAC		
	Model VIBE			Body Style 4H - HATCHBACK 4 DOOR			Color SIL - SILVER (ALUMINUM)			
	Initial Contact Point 11 - LEFT FRONT CORNER									

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UNIT VEHICLE	01	Vehicle Damage		11 - LEFT FRONT CORNER				
		Extent Of Damage MINOR DAMAGE		Vehicle Factors				
		Towed Due To Damage NOT TOWED		Vehicle Removed By NOT APPLICABLE				
		What Driver Was Doing LEFT TURN		Driver Prior Action Other		Bus Use		
	Driver Actions FAILED TO YIELD RIGHT-OF-WAY							
	<input type="checkbox"/> Vehicle Owner Same As Operator			<input type="checkbox"/> Use Operator Address				
	Organization Type GOVERNMENT		Company Name SAUK CO HEALTH DEPT					
	Last Name		First Name		Middle	Suffix	Date of Birth	
	Street Address 505 BROADWAY #372		Street Address2		PO Box			
	City BARABOO		St WI	Zip Code 53913		Country of Residence UNITED STATES		
Telephone Number								
UNIT	01	Event MOTOR VEH IN TRANSPORT						
	02	Event						
	03	Event						
	04	Event						
UNIT HOL	01	Insurance Company SELF-INSURED		<input checked="" type="checkbox"/> Policy Holder Same As Owner		<input type="checkbox"/> Policy Holder Same As Driver		
		Organization Type GOVERNMENT	Last Name	First Name		Policy Holder Company SAUK CO HEALTH DEPT		
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 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0		
		Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 25	Total Lanes 4		
	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 TRAFFIC SIGNAL		Traffic Control Inoperative/Missing NO			
	Surface Type CONCRETE		Road Curvature STRAIGHT		Road Grade LEVEL			
	Truck Bus or HazMat NO							
	02	Role DRIVER		Citations Issued 0		<input type="checkbox"/> Use Driver Address		Individual Type INDIVIDUAL

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02	UNIT	INDIVIDUAL	Last Name ZINDRICK		First Name THOMAS		Middle Initial J	Suffix
			Street Address 503 8TH ST		Street Address 2		PO Box	
02	UNIT	INDIVIDUAL	City BARABOO		State WI	Zip Code 53913	Country of Residence UNITED STATES	
			DOB	Sex M	Race W	Hair GRAY	Eyes BROWN	Height 508
02	UNIT	INDIVIDUAL	Driver's License Number		State WI	License Jurisdiction STATE	Country of Issuance UNITED STATES	
			License Type NON-CDL DRIVER'S LICENSE		License Status VALID LICENSE		DL Expire Year 2021	
02	UNIT	INDIVIDUAL	Equipment	On Duty Accident		Safety Equipment		
			Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT			
02	UNIT	INDIVIDUAL	Helmet Use		Helmet Compliance			
			Eye Protection		Tint Compliance			
02	UNIT	INDIVIDUAL	Injury	Injury Severity NO APPARENT INJURY		Airbag NON DEPLOYED		
			Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICA		Trapped/Extricated NOT TRAPPED	
02	UNIT	INDIVIDUAL	Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #	
			Hospital		Date of Death		Time of Death	
02	UNIT	INDIVIDUAL	Non Motorist	Striking Unit #		Location		To/From School
			Prior Action		Action			
02	UNIT	INDIVIDUAL	Distracted By Action NOT DISTRACTED					
			Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		Action Other			
02	UNIT	INDIVIDUAL	Drug & Alcoh	Individual Condition APPEARED NORMAL				
			Suspected Alcohol Use NO		Suspected Drug Use NO			
02	UNIT	INDIVIDUAL	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	UNIT	INDIVIDUAL	Drug Type					
02	UNIT	INDIVIDUAL	License Plate Number 304XWZ		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
			Vehicle Identification Number 4S4BRCCC9D3258880			Year 2013	Make SUBARU	
02	UNIT	INDIVIDUAL	Model OUTBACK		Body Style 4H - HATCHBACK 4 DOOR		Color BLK - BLACK	
			Initial Contact Point 09 - LEFT SIDE MIDDLE					

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UNIT VEHICLE	02	Vehicle Damage		
	02	Extent Of Damage FUNCTIONAL DAMAGE	09 - LEFT SIDE MIDDLE	
		Towed Due To Damage NOT TOWED	Vehicle Factors	
		Vehicle Removed By	NOT APPLICABLE	
		What Driver Was Doing GOING STRAIGHT	Driver Prior Action Other	
			Bus Use	
		Driver Actions NO CONTRIBUTING ACTION		
		<input checked="" type="checkbox"/> Vehicle Owner Same As Operator <input checked="" type="checkbox"/> Use Operator Address		
		Organization Type INDIVIDUAL	Company Name	
		Last Name ZINDRICK	First Name THOMAS	
		Middle J		
		Suffix		
		Date of Birth		
	Street Address 503 8TH ST	Street Address2	PO Box	
	City BARABOO	St WI	Zip Code 53913	
			Country of Residence UNITED STATES	
	Telephone Number (608) 495-3549 EXT.			
UNIT	01	Event MOTOR VEH IN TRANSPORT		
	02	Event		
	03	Event		
	04	Event		
UNIT HOL	02	Insurance Company GEICO-ADVANTAGE-INSURANCE-CO	<input checked="" type="checkbox"/> Policy Holder Same As Owner <input checked="" type="checkbox"/> Policy Holder Same As Driver	
		Organization Type INDIVIDUAL	Last Name ZINDRICK	First Name THOMAS
			Policy Holder Company	

Description

Diagram

Reconstruction By

Photos By

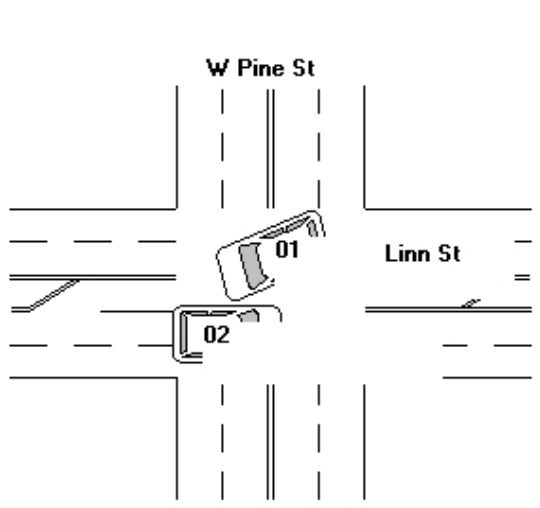
Additional Information

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W Pine St

Linn St

01

02

NONE

Not to scale

ON THE ABOVE DATE AND TIME UNIT 01 WAS WB ON LINN ST AT W PINE ST. UNIT 01 WAS TURNING SB ON W PINE ST. UNIT 02 WAS EB ON LINN ST AT W PINE ST AND CONTINUING EB THROUGH THE INTERSECTION. UNIT 01 TURNED LEFT AND STRUCK UNIT 02 IN THE DRIVER SIDE.

Signature

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

Law Enforcement Agency

Agency Space 20-10248				
Officer Rank DEP	Officer Last Name FRANK	Officer First Name C	Officer Middle Name M	Suffix
DOT Officer ID 9198		DNR Officer ID	Officer Badge Number 9198	
Officer EMail				
Local Agency Number	Law Enforcement Agency Jurisdiction SAUK		Law Enforcement Agency type COUNTY SHERIFF	
Law Enforcement Agency Name SAUK COUNTY SHERIFFS DEPTMEN		TAS Agency Name SAUK COUNTY SHERIFF		
Law Enforcement Agency Street Address 1300 LANGE COURT		Law Enforcement Agency Street Address2		
Law Enforcement Agency City BARABOO	LEA State WI	Law Enforcement Agency Zip Code 53913		

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Law Enforcement Agency Phone Number (608) 356-4895 EXT.	ORI Number WI0570000	BFUNC Agency 5600	TraCS Agency Number 205
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