# 6TL0C884FW

20-10620

## Wisconsin Motor Vehicle Crash Report

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

	Document Number	r Override		Crash Document #		Agency Crash Number 20-10620			Investigating Officer/Deputy DEPUTY T. SUTHERLAND						
<b>≥</b>	Crash Date <b>08/30/2020</b>		Crash Tir 09:50 A			Date Arriv 08/30/20				Time Arrived 10:14 AM					
L0C884FW	Date Notified <b>08/30/2020</b>		Time Not <b>09:59 A</b>			Total Unit	s			Total Injured <b>01</b>	Total <b>00</b>	Killed	1		
ပ္ပ	On Emerger	ncy	Hit and Rur	Lane	Clos	ure	Work 2	Zone		Trailer or 1	Towed			Reporting Thresho	
eTL	Govern Prope			ve School Zon	е	NO School B	us Related			Tags					
	<b>✓</b> Reportable		DT4000	OB (STANDARD (	RASH	1)				Amended				Seconda Crash	ry
	Location ===														
	ON STH136 WE	3			Latit	tude	Longitud	de	Lat/	LongSource		Access	s Contro	ol	
	200 FT E				43.4	49646157	-89.94	15931	TL.	T/ILT					
	OF MILE RD IN THE TOWN C IN SAUK COUN		SIOR			oordinate <b>926.7968</b>	Y Coord 482016			Roadway Link ID# 99460		On Ro <b>6111</b>	adway l	_ink Offset	
					Ove	erride	Tribal La	and					ire Type		
	Crash Scene				•			<u>^</u>							
	First Harmful Even	it			First	t Harmful Ev	ent Locatio	n							
	DITCH				SHO	OULDER	RIGHT								
	Manner of Collision	n			Ligh	t Condition									
	00 - NO COLLIS	SION W/VE	HICLE IN TR	ANSPORT	DA'	YLIGHT									
	Road Surface Con	dition(s)			Envi	ironment Fa	actor(s)								
	DRY				NO	NE									
	Roadway Factor(s)	)			Wea	ather Condit	ion(s)								
	NONE				CLE	EAR									
	Animal Type					ation To Tra	•	N ROA	D						
	Crash Classificatio	n - Location			Cras	sh Classifica	ation - Juriso	diction							
	PUBLIC PROPE	ERTY			NO	SPECIAL	JURISDI	CTION							
	Tribal Land					ess Control CONTRO	L	S	Specia	l Study					
	Within Interchange	Area	Junction Loca	tion	ı	In	tersection T	уре							
	NO		NON-JUNC	ΓΙΟΝ		N	OT AN IN	TERSEC	CTIO	N					
	Unit Summar	v				·									
	Unit Status	<del>,</del>		Vehicle Operat	ina As	Classification	n	Unit 1	Гуре						
	IN TRANSIT			M CLASS	Ü			МОТ	ORC	YCLE					
5	Vehicle Type MOTORCYCLE						rating As Endorsements								
	Total Occs 1	Train/Bus #	# Recorded	Total # Citation	s Issue	ed	Total Tra	ilers		Total HazMat Ty  0	pes				
LINO	Insurance? Direction Of Travel YES WESTBOUND			Pre Cr	ashTir ark	Tire Speed Limi		mit		Total Lanes 2					
5	Most Harmful Event: Collision With Special Function NO SPECIA					CTION	1	Emer <b>NOT</b>	gency APP	Motor Vehicle Us PLICABLE	se				
	Traffic Way TWO-WAY, NOT DIVIDED			Traffic Control NO CONTRO	DL			Traffic	c Con	trol Inoperative/Mi	issing				
	Surface Type			Road Curvatur	e			Road	Grad	e					
	BLACKTOP (BI	TUMINOU	S)	CURVE RIG	НТ			LEV	EL						
5	Truck Bus or HazN	//at		•											

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_		Role DRIVER			Citations Issued 0			Driver Idress	Individual INDIVID			
6	01	Last Name TJUGUM			First Name THOMAS			Middle Init	tial	Suffix		
		Street Address 5103 MCKENNA R	RD		Street Address 2				PO Box		1	
_	JAL	City MONONA			State WI	Zip Code <b>53716</b>		Country of Residence UNITED STATES				
LNO	INDIVIDUAL	DOB	Sex M	Race <b>W</b>		Eyes <b>BLUE</b>		eight <b>10</b>	Weight 175	l .	Number 221-1812 EXT.	
	IND	Driver's License Num	ber		State WI	License Jurs <b>STATE</b>	idiction	Country of UNITED	STATE			
		License Type NON-CDL DRIVER	R'S LICENS	E	License Status VALID LICENS	E			DL Expire <b>2022</b>	Year		
		Equipment	On Duty Acc		Protective Gear							
	-	Row 01 - FRONT ROW		Seat Position  07 - LEFT	JACKET, LONG	3 PAI	NTS					
	01	Helmet Use HALF	I.		Helmet Compliand	е						
		Eye Protection YES: WORN			Tint Compliance YES							
		Injury	Injury Severi	-	Airbag NOT APPLICABLE							
늘	JUAL	Ejected NOT APPLICABLE	Ejection Path NOT EJECTED	APPLICA	Trapped/Ex							
LNO	INDIVIDUAL	MedicalTransport EMS GROUND			EMS Agency Iden 513	tifier		EMS Run #	<i>‡</i>			
	Z	Hospital REEDSBURG ARE	EA MED CT	R	Date of Death			Time of De	ath			
		Non Motorist	Striking Unit	#	Location			To/FromSo	hool			
		Prior Action			Action			•				
	01	Distracted By Action NOT DISTRACTED	D									
		Distracted By Source NOT APPLICABLE		TRACTED)	Action Other							
		Drug & Alcoh	Individual Co	ondition D NORMAL	·							
	AL	Suspected Alcohol Us	se		Suspected Drug U	lse						
LNO	INDIVIDUAL	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type					Alcohol Te	est Resul	ts	
ر	INDI	Drug Test Given TEST NOT GIVEN				Drug Test Results						
		Drug Type										
		License Plate Number	r		Plate Type  CYC - CYCLE		s		untry of Issu			
		Vehicle Identification I	Number		010-010LE			ear Mai		1123		
		1HD1FC412AB656	6504				2		RLEY DA	VIDSO	N	
		Model HARLEY DAV			Body Style  MC - MOTORC		Col RE	or <b>D - RED</b>				
		Initial Contact Point										
		03 - RIGHT SIDE N	MIDDLE									

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						Vehicle Dam	nage							
Extent Of Damage						03 - RIGHT SIDE MIDDLE								
2	MINOR DAMAGE													
	Towed Due To Damage						tors							
		NOT TOWED												
		Vehicle Removed By	NOT APPL	LICABLE										
		What Driver Was Doing			Driver Prior	Action Other			Bus Us	e				
		NEGOTIATING CURVE		Dilvoi I IIOI	, totion offici		203 03	ise .						
	щ	Driver Actions FAILURE TO CONTROL, R	AN CEE	2045:	VAV									
LIND	VEHICLE	FAILURE TO CONTROL, R	AN OFF I	ROADW	VAY									
ر	VE						T							
		∨ Vehicle Owner Same A	s Operate				<b>✓</b> Use Ope	erator A	ddres	s				
		Organization Type INDIVIDUAL		Compa	any Name									
		Last Name		First Na				Middle		Suffix	Date of Birth			
		TJUGUM THOMAS						EVER						
		Street Address 5103 MCKENNA RD		Street	Address2			PO Box						
		City	Zip Cod											
		MONONA WI 53716						UNITE	TES					
		Telephone Number (608) 221-1812 EXT.												
		Event												
	0	DITCH						7						
	02	Event												
	03	Event												
		Event				·								
	04								_					
μl	_	Insurance Company STATE-FARM-MUTUAL-AL	JTOMOBII	F-INS	-co	Po Sai	licy Holder me As Owne	. 🔽	Polic	y Holder	Same As Driver			
LIND	_	Organization Type	Last Name		-	First Na				der Compa				
	ឣ	INDIVIDUAL	TJUGUM			THOM				·				
Ī	Des	cription						-						
	Diag	ram									Reconstruction By			
											Photos By			
											Additional Information			
											Additional information			

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•					М	    iile Ro	ead	NO	NE
			STH	136					
- • <b>©</b> •		_					_		
								-	
		_4							
						N	ot To Scale		
OPERATOR OF MOTO	ORCYCLE THAT CRASHED MO	T CRASH	ED CAME AR	OUND CORN	ER AND LAID THE MO	TORCY	CLE ONTO ROAD	WAY TO	ING TO TURN LEFT ON MILE ROAD. AVOID HITTING THE MOTORCYCLES 085 STH 136 WITH PERMISSION OF
	enforcemen	t office	, agree tha	at I have no	t added any CJIS	data in	this report.		
Law Enforceme	ent Agenc	у —							
Agency Space <b>20-10620</b>									
Officer Rank <b>DEP</b>	Officer Last N			Officer First  T	Name	Office	r Middle Name		Suffix
DOT Officer ID 9195			DNR Office	er ID		Office	r Badge Number		1
Officer EMail						13.00			
Local Agency Number	1	Law En		gency Jurisdic	tion		Law Enforcement		y type
Law Enforcement Age					TAS Agency Name	I			
Law Enforcement Age		dress			Law Enforcement A	gency S	Street Address2		
Law Enforcement Age			LEA State		Law Enforce	ement A	gency Zip Code		

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Crash Date 08/30/2020

Crash Time 09:50 AM

BARABOO	wı	53913	
Law Enforcement Agency Phone Number (608) 356-4895 EXT.	ORI Number <b>WI0570000</b>	BFUNC Agency 5600	TraCS Agency Number 205