

20-10525

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

Document Number Override		Primary Crash Document #		Agency Crash Number 20-10525		Investigating Officer/Deputy DEPUTY H. VOLZ	
Crash Date 08/27/2020		Crash Time 03:40 PM		Date Arrived 08/27/2020		Time Arrived 04:24 PM	
Date Notified 08/27/2020		Time Notified 03:44 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 type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

ON GOLF COURSE RD 37 FT N OF HIGH VIEW RD IN THE TOWN OF REEDSBURG IN SAUK COUNTY	Latitude	Longitude	Lat/LongSource	Access Control
	43.46774124	-89.9643871	TLT/ILT	
	X Coordinate	Y Coordinate	On Roadway Link ID#	On Roadway Link Offset
	260212.6875	4817028	4555568	37
Override <input type="checkbox"/>	Tribal Land			Structure Type NO STRUCTURE

First Harmful Event		First Harmful Event Location	
MOTOR VEH IN TRANSPORT		ON ROADWAY	
Manner of Collision		Light Condition	
01 - ANGLE		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 CONTROL			
Within Interchange Area	Junction Location	Intersection Type	
NO	INTERSECTION	T-INTERSECTION	

01	Unit Status IN TRANSIT		Vehicle Operating As Classification O CLASS		Unit Type EQUIPMENT	
	Vehicle Type FARM TRACTOR/SELF PROPELLED				Operating As Endorsements	
UNIT	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 45	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 STOP SIGN		Traffic Control Inoperative/Missing NO	
01	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

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UNIT 01 INDIVIDUAL	Role DRIVER		Citations Issued 0		<input type="checkbox"/> Use Driver Address		Individual Type INDIVIDUAL	
	Last Name KLITZKE		First Name SCOTT		Middle Initial WALTER		Suffix	
	Street Address S4791 GOLF COURSE RD		Street Address 2		PO Box			
	City ROCK SPRINGS		State WI		Zip Code 53961		Country of Residence UNITED STATES	
	DOB	Sex M	Race W	Hair BROWN	Eyes GREEN	Height 600	Weight 200	Phone Number (608) 524-5644 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 2024			
	Equipment	On Duty Accident		Safety Equipment				
	Row 01 - FRONT ROW	Seat Position 07 - LEFT		NOT APPLICABLE				
	Helmet Use		Helmet Compliance					
Eye Protection		Tint Compliance						
UNIT 01 INDIVIDUAL	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					
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 DY9517		Plate Type LTK - LIGHT TRUCK		St WI		Country of Issuance UNITED STATES		
Vehicle Identification Number 1GCEK19Z66Z251777				Year 2006		Make CHEVROLET		
Model SILVERADO		Body Style TK - TRUCK				Color GRN - GREEN		
Initial Contact Point 01 - RIGHT FRONT CORNER								

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UNIT VEHICLE	01	Vehicle Damage		
		Extent Of Damage NO DAMAGE	00 - NO DAMAGE	
		Towed Due To Damage NOT TOWED	Vehicle Factors	
		Vehicle Removed By OPERATOR	NOT APPLICABLE	
	02	What Driver Was Doing LEFT TURN	Driver Prior Action Other	Bus Use
		Driver Actions FAILED TO YIELD RIGHT-OF-WAY		
		<input checked="" type="checkbox"/> Vehicle Owner Same As Operator		<input checked="" type="checkbox"/> Use Operator Address
		Organization Type INDIVIDUAL	Company Name	
		Last Name POST	First Name TIMOTHY	Middle FRANCIS
		Street Address E7565A STONE CHURCH RD	Street Address2	PO Box
03	City ROCK SPRINGS	St WI	Zip Code 53961	
	Country of Residence UNITED STATES			
	Telephone Number (608) 522-4928 EXT.			
	Event LEFT TURN			
04	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
	Event			
UNIT HOL	01	Insurance Company WESTFIELD-INS-CO	<input checked="" type="checkbox"/> Policy Holder Same As Owner	<input checked="" type="checkbox"/> Policy Holder Same As Driver
		Organization Type INDIVIDUAL	Last Name KLITZKE	First Name SCOTT
Unit Summary				
UNIT 02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS	Unit Type TRUCK
	Vehicle Type UTILITY TRUCK/PICKUP TRUCK		Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0
	Insurance? UNKNOWN	Direction Of Travel SOUTHBOUND	<input type="checkbox"/> Pre CrashTire Mark	Total HazMat Types 0
	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 HILLCREST
	Truck Bus or HazMat NO			
	Role DRIVER		Citations Issued 0	<input type="checkbox"/> Use Driver Address
	Individual Type INDIVIDUAL			

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02	UNIT	INDIVIDUAL	Last Name POST		First Name TIMOTHY		Middle Initial FRANCIS	Suffix
			Street Address E7565A STONE CHURCH RD		Street Address 2		PO Box	
02	UNIT	INDIVIDUAL	City ROCK SPRINGS		State WI	Zip Code 53961	Country of Residence UNITED STATES	
			DOB	Sex M	Race W	Hair GRAY	Eyes BLUE	Height 600
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 2028	
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 DY9517		Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES	
			Vehicle Identification Number 1GCEK19Z66Z251777			Year 2006	Make CHEVROLET	
02	UNIT	INDIVIDUAL	Model SILVERADO		Body Style TK - TRUCK		Color GRN - GREEN	
			Initial Contact Point 04 - RIGHT SIDE REAR					

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UNIT VEHICLE	02	Extent Of Damage MINOR DAMAGE		Vehicle Damage 04 - RIGHT SIDE REAR		
		Towed Due To Damage NOT TOWED		Vehicle Factors		
		Vehicle Removed By OPERATOR		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 POST		First Name TIMOTHY	Middle FRANCIS	Suffix Date of Birth
		Street Address E7565A STONE CHURCH RD		Street Address2		PO Box
		City ROCK SPRINGS	St WI	Zip Code 53961	Country of Residence UNITED STATES	
	Telephone Number (608) 522-4928 EXT.					
01	Event MOTOR VEH IN TRANSPORT					
02	Event					
03	Event					
04	Event					

Description

Diagram

Reconstruction By

Photos By

Additional Information

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Non-Reportable

NONE

UNIT 1 WAS TRAVELING EB ON HIGH VIEW ROAD. UNIT 2 WAS TRAVELING SB ON GOLF COURSE ROAD. UNIT 1 STOPPED AT THE STOP SIGN AND LOOKED LEFT AND THEN TO THE RIGHT. UNIT 1 PROCEEDED TO TURN LEFT (NORTH) FROM THE STOP SIGN. UNIT 1 DID NOT SEE UNIT 2 OVER THE HILL. UNIT 1 STRUCK UNIT 2 IN THE REAR LEFT FENDER AREA. NON-REPORTABLE AMOUNT OF DAMAGE. NO DAMAGE TO TRACTOR.

Signature

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

Law Enforcement Agency

Agency Space 20-10525				
Officer Rank DEP	Officer Last Name VOLZ	Officer First Name HANNAH	Officer Middle Name M	Suffix
DOT Officer ID 9137		DNR Officer ID	Officer Badge Number 9137	
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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