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20-11089

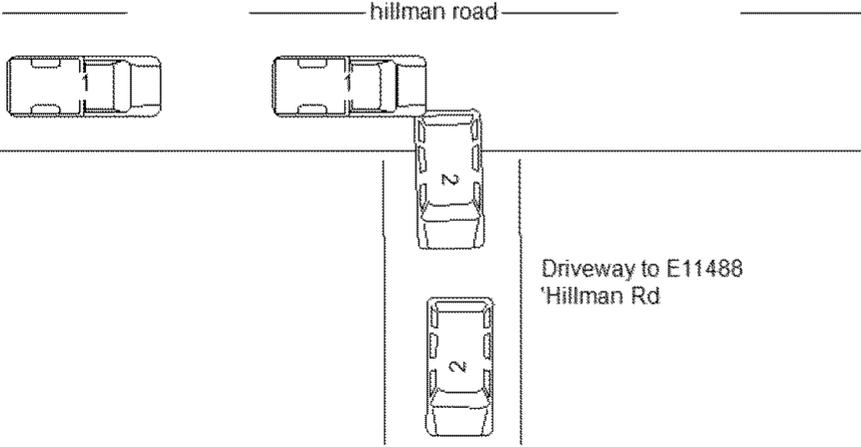
WISCONSIN MOTOR VEHICLE
CRASH REPORT

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		Investigating Officer/Deputy SERGEANT S. STEINHORST	
Crash Date 09/12/2020		Crash Time 05:40 PM		Date Arrived 09/12/2020		Time Arrived 05:58 PM	
Date Notified 09/12/2020		Time Notified 05:45 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 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	

Description

Diagram Not to scale 	Reconstruction By
	Photos By STEINHORST
	Additional Information PHOTOS

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

UNIT 1 WAS TRAVELING EAST ON HILLMAN RD NEAR E11488 HILLMAN ROAD. UNIT 2 HAD PULLED INTO E11448 HILLMAN ROAD AND BEGAN BACKING OUT OF THE DRIVEWAY AND INTO THE ROADWAY. UNIT 2 BACKED INTO THE FRONT RIGHT SIDE OF UNIT 1. UNIT 1 CONTINUED EAST AND PULLED OVER. UNIT 2 LEFT THE SCENE ON HILLMAN ROAD. UNIT 1 WAS REMOVED BY THE OPERATOR.

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Location

ON HILLMAN RD 0.27 MI W OF CHTH EB IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude 43.582810113	Longitude -89.751849992
	X Coordinate 277828.46875	Y Coordinate 4829218
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 05 - REAR TO SIDE	Light Condition DAYLIGHT	
Road Surface Condition(s) WET	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLOUDY		
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 DRIVEWAY ACCESS-RELATED	Intersection Type NOT AN INTERSECTION

Unit Summary

01 UNIT	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	Total HazMat Types 0
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 45	Total Lanes 02
	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 DOWNHILL		
	Truck Bus or HazMat NO				

Vehicle

01 UNIT VEHICLE	License Plate Number SA7993	Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1GTHK231X4F130478	Make GENERAL MOTORS COR	Year 2004	Model SRA
	Color SIL - SILVER (ALUMINUM)	Body Style PK - PICKUP	Bus Use	
	Initial Contact Point 02 - RIGHT SIDE FRONT	Vehicle Damage		
	Extent Of Damage FUNCTIONAL DAMAGE	02 - RIGHT SIDE FRONT		

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UNIT VEHICLE	Towed Due To Damage NOT TOWED	Vehicle Removed By OWNER	
	What Driver Was Doing GOING STRAIGHT	Vehicle Factors	
	Driver Prior Action Other	NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION		
01 01	Owner Name ZAYNTHUS RAYDEN JANZ (608) 514-3469	Owner Address 213 S MAIN ST COTTAGE GROVE, WI 53527 , US	
	Sequence Of Events		
01 02 03 04	Event MOTOR VEH IN TRANSPORT		
	Event		
	Event		
	Event		
UNIT	Policy Holder		
	Insurance Company GEICO-CASUALTY-CO	Individual ZAYNTHUS JANZ	
UNIT INDIVIDUAL	Individual		
	Driver ZAYNTHUS RAYDEN JANZ (608) 514-3469	Citations Issued 0	Sex MALE
		Date of Birth [REDACTED]	Race WHITE
	Address 213 S MAIN ST COTTAGE GROVE, WI 53527 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
01 001	Safety Equipment		On Duty Crash
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	Safety Equipment 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
Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)	
Distracted By Action NOT DISTRACTED			

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UNIT INDIVIDUAL 01 001	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					

Unit Summary

UNIT 02	Unit Status HIT AND RUN		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type (SPORT) UTILITY VEHICLE				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? UNKNOWN	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 45	Total Lanes 02	
	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 UNKNOWN		Traffic Control Inoperative/Missing UNKNOWN	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade UPHILL	
	Truck Bus or HazMat NO					

UNIT VEHICLE 02 02	Vehicle				
	License Plate Number		Plate Type	St	Country of Issuance
	Vehicle Identification Number		Make	Year	Model
	Color WHI - WHITE		Body Style UT - SPORT UTILITY VEHICLE		Bus Use
	Initial Contact Point 06 - REAR		16 - VEHICLE NOT AT SCENE		
	Extent Of Damage VEHICLE NOT AT SCENE				
	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR		

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UNIT VEHICLE	What Driver Was Doing BACKING		Vehicle Factors	
	Driver Prior Action Other		UNKNOWN	
	Driver Actions UNSAFE BACKING, UNKNOWN			
02 02	Owner Name		Owner Address	
			, ,	
Sequence Of Events				
01 02 03 04	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
	Event			
UNIT INDIVIDUAL	Individual			
	Driver		Citations Issued 0	Sex
	Address		Date of Birth	Race
			Driver License Number	
02 002	Safety Equipment		On Duty Crash	
			Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	NONE USED - VEHICLE OCCUPANT	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	Injury		Injury Severity NO APPARENT INJURY	Airbag NOT APPLICABLE
	Ejected NOT APPLICABLE		Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT APPLICABLE
Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #	
Hospital		Date of Death	Time of Death	
Distracted By		Distracted By Source		
Distracted By Action				
Non Motorist		Striking Unit #	Location	
Prior Action				

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UNIT INDIVIDUAL 02 002	Action		
	Action Other		To/From School
	Drug & Alcohol	Suspected Alcohol Use	Suspected Drug Use
	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 NOT OBSERVED		