

6TL0DBC3BM

21-00311

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 21-00311		Investigating Officer/Deputy DEPUTY C. GALLAGHER	
Crash Date 01/10/2021		Crash Time 05:15 PM		Date Arrived 01/10/2021		Time Arrived 05:24 PM	
Date Notified 01/10/2021		Time Notified 05:15 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	

Description

<p>Diagram</p> <p>Not to Scale</p>		<p>Reconstruction By</p> <p>Photos By</p> <p>Additional Information NONE</p>
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☒ I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

UNIT 1 & 2 WERE TRAVELING NORTHBOUND ON STH 12. UNIT 1 STRUCK AN OBJECT ON THE ROADWAY. THE OBJECT WAS THEN MOVED TO THE SECOND LANE ON STH 12. UNIT 2 STRUCK THE OBJECT ON THE ROADWAY. UNIT 1 SUFFERED A FLAT FRONT PASSENGER SIDE TIRE. UNIT 2 SUFFERED A FRONT FLAT DRIVERS SIDE TIRE. THE OBJECT WAS LATER LOCATED AND IDENTIFIED AS A STEEL BALL HITCH BELONGING TO AN UNKNOWN VEHICLE.

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ON USH12 WB 0.38 MI N OF STH33 WB IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude	Longitude
	43.51976906	-89.785996209
	X Coordinate	Y Coordinate
	274836.78125	4822308
	Structure Type	
	NO STRUCTURE	

First Harmful Event OTHER OBJECT - NOT FIXED		First Harmful Event Location ON ROADWAY	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT		Light Condition DAWN	
Road Surface Condition(s) DRY		Roadway Factor(s) NONE	
Environment Factor(s) NONE			
Weather Condition(s) CLEAR			
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 NON-JUNCTION	Intersection Type NOT AN INTERSECTION	

UNIT 01	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 NORTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 65	Total Lanes 4	
	Most Harmful Event: Collision With OTHER OBJECT - NOT FIXED		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type CONCRETE		Road Curvature STRAIGHT		Road Grade LEVEL	
Truck Bus or HazMat NO						

UNIT	VEHICLE	01	License Plate Number ACF6775	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		01	Vehicle Identification Number 4T1BG22K31U818827	Make TOYOTA	Year 2001	Model CAMRY
			Color TAN - TAN	Body Style SD - SEDAN		Bus Use
			Initial Contact Point 02 - RIGHT SIDE FRONT	Vehicle Damage 02 - RIGHT SIDE FRONT		
			Extent Of Damage MINOR DAMAGE			

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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	Owner Name CLAIRE BEVERLY ROBERGE (608) 370-4086		Owner Address 3149 BULL RUN SUN PRAIRIE, WI 53590 , US	
	Sequence Of Events			
01	01	Event OTHER OBJECT - NOT FIXED		
	02	Event		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company ALLSTATE-INS-CO		Individual CLAIRE ROBERGE	
UNIT INDIVIDUAL	Individual			
	Driver CLAIRE BEVERLY ROBERGE (608) 370-4086		Citations Issued 0	Sex FEMALE
	Address 3149 BULL RUN SUN PRAIRIE, WI 53590 , US		Date of Birth [REDACTED]	Race WHITE
			Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
01	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	
001	Injury		Injury Severity NO APPARENT INJURY	
	Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE	Airbag NON DEPLOYED
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier	Trapped/Extricated NOT TRAPPED
	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 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 NORTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 65	Total Lanes 4	
	Most Harmful Event: Collision With OTHER OBJECT - NOT FIXED		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type CONCRETE		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

UNIT VEHICLE 02 02	Vehicle				
	License Plate Number AJW7295		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1LNHM94R09G607049		Make LINCOLN	Year 2009	Model MKS
	Color BLK - BLACK		Body Style SD - SEDAN		Bus Use
	Initial Contact Point 10 - LEFT SIDE FRONT		Vehicle Damage		
	Extent Of Damage MINOR DAMAGE		10 - LEFT SIDE FRONT		
	Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER		

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UNIT VEHICLE	What Driver Was Doing GOING STRAIGHT	Vehicle Factors	
	Driver Prior Action Other	NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION		
	Owner Name JOHN KENNETH ADAMS (608) 347-6789	Owner Address 2602 MCKENNA BLVD MADISON, WI 53711 , US	
UNIT 02	Sequence Of Events		
	Event OTHER OBJECT - NOT FIXED		
	Event		
	Event		
UNIT 03	Event		
	Event		
	Event		
	Event		
UNIT 04	Policy Holder		
	Insurance Company USAA-GENERAL-INDEMNITY-CO	Individual JOHN ADAMS	
	Individual		
	Driver JOHN KENNETH ADAMS (608) 347-6789	Citations Issued 0	Sex MALE
UNIT INDIVIDUAL	Date of Birth [REDACTED]	Race WHITE	
	Address 2602 MCKENNA BLVD MADISON, WI 53711 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
	Safety Equipment		
	On Duty Crash	Safety Equipment SHOULDER & LAP BELT	
UNIT 02	Row 01 - FRONT ROW	Seat Position 07 - LEFT	
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	Injury		
UNIT 002	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
UNIT 002	Distracted By		
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
	Distracted By Action NOT DISTRACTED		
	Non Motorist		
UNIT 002	Striking Unit #	Location	

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UNIT INDIVIDUAL 02 002	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				