

6TL0D5DXWB

21-00355

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 21-00355		Investigating Officer/Deputy DEPUTY C. FRANK	
Crash Date 01/12/2021		Crash Time 07:10 AM		Date Arrived 01/12/2021		Time Arrived 07:43 AM	
Date Notified 01/12/2021		Time Notified 07:15 AM		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 YES, SCHOOL BUS DIREC		Tags	
<input type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

Description

<p>Diagram</p> <p style="text-align: right;">Not to scale</p>	Reconstruction By
	Photos By 9198
	Additional Information NONE, PHOTOS

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

THE ABOVE DATE AND TIME UNIT 1 WAS WESTBOUND ON KESSLER RD AND UNIT 2 WAS EASTBOUND ON KESSLER RD. UNIT 2 WAS NEGOTIATING A CURVE TO THE LEFT. UNIT 2 CROSSED LEFT OF CENTER. UNIT 1 WAS NEGOTIATING A CURVE TO THE RIGHT. UNIT 1 ENCOUNTERED UNIT 2 WHERE THE OPERATOR APPLIED THE BRAKES TO AVOID A COLLISION. UNIT 1 SWERVED TO THE RIGHT TO AVOID A COLLISION. UNIT 1 STRUCK UNIT 2 IN THE REAR DRIVER SIDE OF THE BUS. BOTH UNIT SUSTAINED MINOR DAMAGE. UNIT 2 OPERATOR CONTINUED WITHOUT STOPPING. UNIT 1 STOPPED AND CALLED LAW ENFORCEMENT. UNIT 2 OPERATOR WAS UNAWARE OF THE CONTACT BETWEEN THE UNITS.

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Location

ON E11964 KESSLER RD 1090 FT E OF OLD LAKE RD (FIRE E11964) IN THE TOWN OF BARABOO IN SAUK COUNTY	Latitude 43.452988802	Longitude -89.725249448
	X Coordinate 279503.5625	Y Coordinate 4814728.5
	Structure Type FIRE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 06 - SIDESWIPE/OPPOSITE DIRECTION		Light Condition DAWN	
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 NON-JUNCTION	Intersection Type NOT AN INTERSECTION	

Unit Summary

UNIT 01	Unit Status IN TRANSIT		Vehicle Operating As Classification C CLASS		Unit Type TRUCK	
	Vehicle Type STRAIGHT TRUCK (INSERT 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 WESTBOUND	<input type="checkbox"/> Pre Crash Tire 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 NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature CURVE RIGHT		Road Grade UPHILL	
	Truck Bus or HazMat NO					

Vehicle

UNIT
VEHICLE
01

License Plate Number PB9790	Plate Type HTK - HEAVY TRUCK	St WI	Country of Issuance UNITED STATES
Vehicle Identification Number 4V2EC6UE61N311696	Make VOLVO	Year 2001	Model XPEDITOR
Color	Body Style ST - STAKE TRUCK		Bus Use
Initial Contact Point 11 - LEFT FRONT CORNER	Vehicle Damage 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER		
Extent Of Damage FUNCTIONAL DAMAGE			

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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By	
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
01	Owner Name WASTE MANAGEMENT OF WISCONSIN INC (855) 292-6029		Owner Address W132N10487 GRANT AVE GERMANTOWN, WI 53022 , US	
	Sequence Of Events			
01 02 03 04	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
	Event			
UNIT	Policy Holder			
	Insurance Company ACE-AMERICAN-INS-CO		Organization/Company WASTE MANAGEMENT OF WISCONSIN INC	
UNIT INDIVIDUAL	Individual			
	Driver MICHAEL H HENGSTLER (608) 415-1011		Citations Issued 0	Sex MALE
	Address 648 N WEBB AVE REEDSBURG, WI 53959 , US		Date of Birth [REDACTED]	Race
			Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
01 001	Safety Equipment		On Duty Crash	
	Row 01 - FRONT ROW		Seat Position 09 - RIGHT	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	Non Motorist		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other				To/From School
	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO	
01 001	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 C CLASS		Unit Type BUS	
	Vehicle Type SCHOOL BUS				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded 8	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 2	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function VEHICLE USED AS SCHOOL BUS		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 CURVE LEFT		Road Grade DOWNHILL	
	Truck Bus or HazMat VEHICLE DESIGNED TO CARRY 9 OR MORE PPL, INCLUDING DRIVER					

UNIT VEHICLE 02	Vehicle				
	License Plate Number 23649B		Plate Type BUS - BUS	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1BAKJCEA6JF341954		Make BLUE BIRD BODY CO	Year 2018	Model SCHOOL BUS
	Color YEL - YELLOW		Body Style BU - BUS		Bus Use SCHOOL
	Initial Contact Point 08 - LEFT SIDE REAR		Vehicle Damage		
	Extent Of Damage FUNCTIONAL DAMAGE		08 - LEFT SIDE REAR		
	Towed Due To Damage NOT TOWED		Vehicle Removed By		

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UNIT VEHICLE	What Driver Was Doing NEGOTIATING CURVE	Vehicle Factors	
	Driver Prior Action Other	NOT APPLICABLE	
	Driver Actions WRONG SIDE OR WRONG WAY		
	Owner Name LAMERS BUS LINES INC (920) 496-3600	Owner Address 2407 S POINT RD GREEN BAY, WI 54313 , US	
UNIT 02	Sequence Of Events		
	Event MOTOR VEH IN TRANSPORT		
	Event		
	Event		
UNIT 03	Event		
	Event		
	Event		
	Event		
UNIT 04	Policy Holder		
	Insurance Company SELF-INSURED	Organization/Company LAMERS BUS LINES INC	
	Individual		
	Driver SHAWN DAVID FULLER (608) 434-5950	Citations Issued 0	Sex MALE
UNIT INDIVIDUAL	Date of Birth [REDACTED]	Race WHITE	
	Address 1451 SPRUCE DR BARABOO, WI 53913 , US	Driver License Number [REDACTED]	
	STATE: WISCONSIN COUNTRY: UNITED STATES		
UNIT 02	Safety Equipment	On Duty Crash	Safety Equipment
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT
	Helmet Use	Helmet Compliance	
	Eye Protection	Tint Compliance	
UNIT 002	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
UNIT 002	Distracted By	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)	
	Distracted By Action	NOT DISTRACTED	
	Non Motorist	Striking Unit #	Location

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UNIT INDIVIDUAL	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			
	Individual			
	Individual		Citations Issued 0	Sex
UNIT INDIVIDUAL	Date of Birth		Race	
	Address		Driver License Number	
	Safety Equipment		On Duty Crash	
	Row	Seat Position	Safety Equipment	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	Injury		Injury Severity	
	Airbag			
	Ejected	Ejection Path	Trapped/Extricated	
	Medical Transport		EMS Agency Identifier	
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	Action			
	Action Other			To/From School
	Drug & Alcohol		Suspected Alcohol Use	Suspected Drug Use
	Alcohol Test Given		Alcohol Test Type	Alcohol Test Results
	Drug Test Given		Drug Test Type	Drug Test Results
	Drug Type			
	Individual Condition			
	Individual			
	Individual		Citations Issued	Sex
			Date of Birth	Race
UNIT INDIVIDUAL	Address		Driver License Number	
	Safety Equipment		On Duty Crash	Safety Equipment
	Row	Seat Position		
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	Injury	Injury Severity		Airbag
		Ejected	Ejection Path	Trapped/Extricated
	Medical Transport		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	Action		
		Action Other		To/From School
02	004	Drug & Alcohol		
		Suspected Alcohol Use		Suspected Drug Use
		Alcohol Test Given	Alcohol Test Type	Alcohol Test Results
		Drug Test Given	Drug Test Type	Drug Test Results
		Drug Type		
Individual Condition				
UNIT	INDIVIDUAL	Individual		
		Individual	Citations Issued	Sex
			Date of Birth	Race
		Address	Driver License Number	
02	005	Safety Equipment		
		On Duty Crash		Safety Equipment
		Row	Seat Position	
		Helmet Use		Helmet Compliance
		Eye Protection		Tint Compliance
		Injury		
		Injury Severity		Airbag
		Ejected	Ejection Path	Trapped/Extricated
Medical Transport		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	Action		
	Action Other		To/From School
	Drug & Alcohol		Suspected Alcohol Use
			Suspected Drug Use
	Alcohol Test Given		Alcohol Test Type
			Alcohol Test Results
	Drug Test Given		Drug Test Type
			Drug Test Results
	Drug Type		
	Individual Condition		
UNIT INDIVIDUAL	Individual		
	Individual		Citations Issued
			Sex
	Date of Birth		Race
	Address		Driver License Number
	Safety Equipment		On Duty Crash
			Safety Equipment
	Row	Seat Position	
	Helmet Use		Helmet Compliance
Eye Protection		Tint Compliance	
UNIT INDIVIDUAL	Injury		Injury Severity
			Airbag
	Ejected	Ejection Path	Trapped/Extricated
	Medical Transport		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 02	INDIVIDUAL 006	Action		
		Action Other		To/From School
		Drug & Alcohol		Suspected Alcohol Use
		Suspected Drug Use		
		Alcohol Test Given	Alcohol Test Type	Alcohol Test Results
		Drug Test Given	Drug Test Type	Drug Test Results
		Drug Type		
		Individual Condition		
		Individual		
		UNIT 02	INDIVIDUAL 007	Individual
Date of Birth	Race			
Address	Driver License Number			
Safety Equipment				
On Duty Crash	Safety Equipment			
Row	Seat Position			
Helmet Use	Helmet Compliance			
Eye Protection	Tint Compliance			
Injury	Injury Severity			Airbag
Ejected	Ejection Path			Trapped/Extricated
Medical Transport	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	Action		
	Action Other		To/From School
	Drug & Alcohol		Suspected Drug Use
	Alcohol Test Given	Alcohol Test Type	Alcohol Test Results
	Drug Test Given	Drug Test Type	Drug Test Results
	Drug Type		
	Individual Condition		
	Individual		
	Individual	Citations Issued	Sex
		Date of Birth	Race
UNIT INDIVIDUAL	Address		Driver License Number
	Safety Equipment		Safety Equipment
	Row	Seat Position	
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	Injury		Airbag
	Injury Severity		
	Ejected	Ejection Path	Trapped/Extricated
	Medical Transport	EMS Agency Identifier	EMS Run #
	Hospital	Date of Death	Time of Death
UNIT INDIVIDUAL	Distracted By		Distracted By Source
	Distracted By Action		
	Non Motorist		Striking Unit #
	Location		
UNIT INDIVIDUAL	Prior Action		

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UNIT 02	INDIVIDUAL 008	Action		
		Action Other		To/From School
		Suspected Alcohol Use		Suspected Drug Use
		Alcohol Test Given		Alcohol Test Type
		Alcohol Test Results		
		Drug Test Given		Drug Test Type
		Drug Test Results		
		Drug Type		
		Individual Condition		
		UNIT 02	INDIVIDUAL 009	Individual
Individual				
Citations Issued	Sex			
Date of Birth	Race			
Address				
Driver License Number				
Safety Equipment				
On Duty Crash				
Row	Seat Position			
Helmet Use				
Helmet Compliance				
Eye Protection				
Tint Compliance				
UNIT 02	INDIVIDUAL 009	Injury		
		Injury Severity		
		Airbag		
		Ejected	Ejection Path	
		Trapped/Extricated		
		Medical Transport		
		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	Action											
	Action Other											
	To/From School											
	Drug & Alcohol		Suspected Alcohol Use			Suspected Drug Use						
	Alcohol Test Given			Alcohol Test Type				Alcohol Test Results				
	Drug Test Given			Drug Test Type			Drug Test Results					
	Drug Type											
	Individual Condition											
	Carrier											
	02 009	02 01	UNIT TRUCK BUS	<input checked="" type="checkbox"/> Use Vehicle Owner Same as Carrier		Source VEHICLE-SIDE						
Name LAMERS BUS LINES INC USDOT# 100115				Address 2407 S POINT RD GREEN BAY, WI 54313 , US								
GVWR NOT APPLICABLE				Vehicle Configuration BUS(SEATS FOR MORE THAN 15 OCCUPANTS, INCLU				Cargo Body Type BUS (SEATS FOR MORE THAN 15 OCCUPAN				
US DOT # 100115				Carrier Type INTERSTATE CARRIER				Permitted Load NOT APPLICABLE				
<input type="checkbox"/> OS/OW Load				WI Permit Number		<input type="checkbox"/> Permitted Vehicle On Permitted Route		<input type="checkbox"/> Escort Vehicle Required By Permit		<input type="checkbox"/> Escort Vehicle Present		
Measured Height				Measured Length		Measured Width		Measured Weight				