

6TL0D6N01P  
21-10729

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 21-10729		Investigating Officer/Deputy DEPUTY B. STODDARD	
Crash Date 11/07/2021		Crash Time 12:26 PM		Date Arrived 11/07/2021		Time Arrived 12:44 PM	
Date Notified 11/07/2021		Time Notified 12:26 PM		Total Units 01		Total Injured 02	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 checked="" 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>	Reconstruction By
	Photos By
	Additional Information NONE

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

UNIT 1 WAS NORTH EAST ON CTH PF. UNIT 1 OPERATOR FAILED TO NEGOTIATE A CURVE TO THE EAST AND TOOK THE CORNER STRAIGHT. UNIT 1 ENTERED THE NORTH DITCH AND CAME TO REST IN THE NORTH DITCH.

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Location

ON CTHPF EB 0.73 MI N OF SCHARA RD IN THE TOWN OF FREEDOM IN SAUK COUNTY	Latitude	Longitude
	43.390781623	-89.944770211
	X Coordinate	Y Coordinate
	261497.28125	4808424.5
Structure Type		

Crash Scene

First Harmful Event <b>DITCH</b>	First Harmful Event Location <b>SHOULDER LEFT</b>	
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>DRY</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>		
Weather Condition(s) <b>CLEAR</b>		
Animal Type	Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>	Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land	Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>

Unit Summary

<b>UNIT</b>	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>M CLASS</b>	Unit Type <b>MOTORCYCLE</b>		
	Vehicle Type <b>MOTORCYCLE</b>	Operating As Endorsements			
	Total Occs <b>2</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>UNKNOWN</b>	Direction Of Travel <b>EASTBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>55</b>	Total Lanes <b>2</b>
	Most Harmful Event: Collision With <b>DITCH</b>	Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>	Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>	Road Curvature <b>CURVE RIGHT</b>		Road Grade <b>UPHILL</b>	
	Truck Bus or HazMat <b>NO</b>				

Vehicle

<b>UNIT</b>	<b>VEHICLE</b>	License Plate Number <b>8879M</b>	Plate Type <b>CYC - CYCLE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>1HFSC1420GA218144</b>	Make <b>HONDA</b>	Year <b>1986</b>	Model <b>GL1200A</b>
		Color <b>BGE - BEIGE</b>	Body Style <b>RS - ROAD-STREET</b>		Bus Use
		Initial Contact Point <b>02 - RIGHT SIDE FRONT</b>	Vehicle Damage <b>01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 04 - RIGHT SIDE REAR</b>		
		Extent Of Damage <b>FUNCTIONAL DAMAGE</b>			



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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OWNER</b>	
	What Driver Was Doing <b>NEGOTIATING CURVE</b>		Vehicle Factors	
	Driver Prior Action Other		<b>TIRES</b>	
	Driver Actions <b>RAN OFF ROADWAY</b>			
01 01	Owner Name <b>RICHARD CHARLES HEGERFELD</b>		Owner Address <b>N750 GOLF RD LOT 70 PRAIRIE DU SAC, WI 53578 , US</b>	
	<b>Sequence Of Events</b>			
01 02 03 04	Event <b>DITCH</b>			
	Event			
	Event			
	Event			
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>TODD ROBERT STARK (608) 370-2724</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
	Address <b>S7997 MAPLE PARK RD PRAIRIE DU SAC, WI 53578 , US</b>		Date of Birth [REDACTED]	Race <b>WHITE</b>
	Driver License Number [REDACTED]		<b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01 001	<b>Safety Equipment</b>		On Duty Crash	
	Row <b>01 - FRONT ROW</b>		Seat Position <b>07 - LEFT</b>	
	Protective Gear <b>GLOVES, BOOTS, JACKET, LONG PANTS</b>		Helmet Use <b>FULL-FACE</b>	
	Helmet Compliance <b>APPROVED</b>		Eye Protection <b>YES: WINDSHIELD</b>	
	Tint Compliance <b>UNKNOWN</b>		Injury Severity <b>SUSPECTED MINOR INJURY</b>	
	Airbag <b>NON DEPLOYED</b>		Ejected <b>NOT APPLICABLE</b>	
	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</b>	
	Medical Transport <b>EMS GROUND</b>		EMS Agency Identifier <b>6001024</b>	
	EMS Run #		Hospital <b>ST CLARE HOSP</b>	
	Date of Death		Time of Death	
<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>		
Distracted By Action <b>NOT DISTRACTED</b>				
<b>Non Motorist</b>		Striking Unit #		Location

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UNIT	INDIVIDUAL	Prior Action	
		Action	
		Action Other	To/From School
01	001	<b>Drug &amp; Alcohol</b> Suspected Alcohol Use <b>NO</b> Suspected Drug Use <b>NO</b>	
		Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type
		Alcohol Test Results	
		Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type
		Drug Test Results	
Drug Type			
Individual Condition <b>APPEARED NORMAL</b>			
UNIT	INDIVIDUAL	<b>Individual</b>	
		Passenger <b>ROBIN L ALT</b> (608) 370-2725	Citations Issued <b>0</b>
			Sex <b>FEMALE</b>
			Date of Birth [REDACTED]
			Race <b>WHITE</b>
Address <b>S7997 MAPLE PARK RD</b> <b>PRAIRIE DU SAC, WI 53578 , US</b>		Driver License Number [REDACTED] <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01	002	<b>Safety Equipment</b> On Duty Crash	
		Protective Gear <b>GLOVES, BOOTS, JACKET, LONG PANTS</b>	
		Row <b>02 - SECOND ROW</b>	Seat Position <b>07 - LEFT</b>
		Helmet Use <b>FULL-FACE</b>	Helmet Compliance <b>APPROVED</b>
		Eye Protection <b>YES: WINDSHIELD</b>	Tint Compliance <b>UNKNOWN</b>
<b>Injury</b> Injury Severity <b>SUSPECTED MINOR INJURY</b>		Airbag <b>NON DEPLOYED</b>	
Ejected <b>NOT APPLICABLE</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>	
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #
Hospital		Date of Death	Time of Death
<b>Distracted By</b> Distracted By Source			
Distracted By Action			
<b>Non Motorist</b> Striking Unit #		Location	
Prior Action			

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01 002 UNIT INDIVIDUAL	Action		
	Action Other		To/From School
	<b>Drug &amp; Alcohol</b>	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		