

6TL0DDT5L6
21-10934

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 6TL0BFKDFW		Primary Crash Document#	Agency Crash Number 21-10934	Investigating Officer/Deputy DEPUTY H. VOLZ	
Crash Date 11/13/2021		Crash Time 10:45 AM	Date Arrived 11/13/2021	Time Arrived 11:01 AM	
Date Notified 11/13/2021		Time Notified 10:47 AM	Total Units 02	Total Injured 01	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input checked="" 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 checked="" type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram	Reconstruction By
	Photos By DEPUTY H VOLZ
	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 STH 60. UNIT 2 WAS TRAVELING EAST ON USH 12. UNIT 1 APPROACHED THE STOP SIGN ON STH 60 AT USH 12. UNIT 1 STOPPED AT THE STOP SIGN AND ATTEMPTED TO PROCEED THROUGH THE INTERSECTION ONTO BALLWEG ROAD. UNIT 1 FAILED TO YIELD TO UNIT 2 ON USH 12. UNIT 1 ENTERED THE INTERSECTION. UNIT 2 STRUCK UNIT 1 ON THE DRIVERS SIDE. UNIT 1 SPUN AROUND 1-2 TIMES BEFORE TIPPING ONTO ITS PASSENGER SIDE AND THEN COMING TO REST. UNIT 2 SPUN AROUND APPROXIMATELY 90 DEGREES AND ENTERED THE NORTH SIDE DITCH BEFORE COMING TO REST.

NARRATIVE DISPLAYED UNITS INCORRECTLY. UNIT LABELS HAVE BEEN CORRECTED IN THE AMENDED FORM. NO OTHER CHANGES.

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Location

ON STH60 EB 12 FT S OF USH12 EB IN THE TOWN OF PRAIRIE DU SAC IN SAUK COUNTY	Latitude	Longitude
	43.271399669	-89.756454871
	X Coordinate	Y Coordinate
	276311.96875	4794643.5
Structure Type		NO STRUCTURE

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 01 - ANGLE		Light Condition DAYLIGHT	
Road Surface Condition(s) DRY		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 INTERSECTION-RELATED	Intersection Type FOUR-WAY INTERSECTION	
Closure Type LANE CLOSURE		Reasons for Closure	
Date Initial Lane/Rd Closed 11/13/2021	Time Initial Lane/Rd Closed 10:55 AM	LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS	
Date All Lanes Open 11/13/2021	Time All Lanes Open 11:30 AM	Date Scene Cleared 11/13/2021	Time Scene Cleared 11:57 AM

Unit Summary

UNIT	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE		
	Vehicle Type (SPORT) UTILITY VEHICLE			Operating As Endorsements		
	Total Occs 4	Train/Bus # Recorded	Total # Citations Issued 1	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	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	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

Vehicle

License Plate Number ADM1611	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
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01 UNIT VEHICLE	Vehicle Identification Number 1FMJK1PT2MEA32439		Make FORD	Year 2021	Model EXPEDITION
	Color BRO - BROWN		Body Style 4D - 4DR		Bus Use
	Initial Contact Point 09 - LEFT SIDE MIDDLE		Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 04 - RIGHT SIDE REAR, 05 - RIGHT REAR CORNER, 06 - REAR, 07 - L		
	Extent Of Damage FUNCTIONAL DAMAGE		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By EVERETTS TOWING		
01 UNIT VEHICLE	What Driver Was Doing GOING STRAIGHT		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions FAILED TO YIELD RIGHT-OF-WAY, LOOKED BUT DID NOT SEE				
01 UNIT VEHICLE	Owner Name RICHARD CHARLES FONK (262) 930-4317		Owner Address 5035 SCHOEN RD UNION GROVE, WI 53182 , US		
	Sequence Of Events				
01 UNIT VEHICLE	Event MOTOR VEH IN TRANSPORT				
	Event				
	Event				
	Event				
01 UNIT VEHICLE	Policy Holder				
	Insurance Company AMERICAN-FAMILY-MUTUAL-INS-CO		Individual RICHARD FONK		
01 UNIT INDIVIDUAL	Driver GARY ALAN FONK (262) 930-4367		Citations Issued 1	Sex MALE	
	Address 15941 DURAND AVE UNION GROVE, WI 53182 , US		Date of Birth [REDACTED]	Race WHITE	
	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES				
01 UNIT INDIVIDUAL	Safety Equipment		On Duty Crash		
	Safety Equipment SHOULDER & LAP BELT				
	Row 01 - FRONT ROW	Seat Position 07 - LEFT			
	Helmet Use		Helmet Compliance		
Eye Protection		Tint Compliance			
01 UNIT INDIVIDUAL	Injury		Injury Severity NO APPARENT INJURY		Airbag DEPLOYED-COMBINATION
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED	

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UNIT INDIVIDUAL	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				
	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 INDIVIDUAL	Individual				
	Passenger RICHARD CHARLES FONK (262) 930-4317		Citations Issued 0	Sex MALE	
	Address 5035 SCHOEN RD UNION GROVE, WI 53182 , US		Date of Birth [REDACTED]	Race WHITE	
	Driver License Number [REDACTED]		STATE: WISCONSIN COUNTRY: UNITED STATES		
UNIT INDIVIDUAL	Safety Equipment		On Duty Crash		
	Safety Equipment SHOULDER & LAP BELT		Row 01 - FRONT ROW		
	Seat Position 09 - RIGHT		Helmet Use		
	Helmet Compliance		Eye Protection		
	Tint Compliance		Injury Severity NO APPARENT INJURY		
UNIT INDIVIDUAL	Injury		Airbag DEPLOYED-COMBINATION		
	Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run#	

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UNIT INDIVIDUAL	Hospital		Date of Death		Time of Death	
	Distracted By Distracted By Source					
	Distracted By Action					
	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	
01 002	Drug Type					
	Individual Condition APPEARED NORMAL					
	Individual					
	Passenger MARY LILLIAN FONK			Citations Issued 0	Sex FEMALE	
	Address 16340 BRAUN RD STURTEVANT, WI 53177 , US			Date of Birth [REDACTED]		
			Race WHITE			
01 003	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
	Safety Equipment		On Duty Crash		Safety Equipment	
	Row 02 - SECOND ROW	Seat Position 07 - LEFT	NONE USED - VEHICLE OCCUPANT			
	Helmet Use			Helmet Compliance		
	Eye Protection			Tint Compliance		
	Injury		Injury Severity SUSPECTED MINOR INJURY		Airbag DEPLOYED-COMBINATION	
	Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED	
	Medical Transport EMS GROUND		EMS Agency Identifier 6000555		EMS Run #	
	Hospital SAUK PRAIRIE HOSP		Date of Death		Time of Death	

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UNIT INDIVIDUAL	Distracted By Distracted By Source	
	Distracted By Action	
	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 NOT OBSERVED		
UNIT INDIVIDUAL	Individual	
	Passenger RANDY JAMES FONK (262) 770-9732	Citations Issued 0
	Sex MALE	
	Date of Birth [REDACTED]	Race WHITE
	Address 16340 BRAUN RD STURTEVANT, WI 53177 , US	Driver License Number [REDACTED]
	STATE: WISCONSIN COUNTRY: UNITED STATES	
	Safety Equipment	On Duty Crash
	Safety Equipment SHOULDER & LAP BELT	
	Row 02 - SECOND ROW	Seat Position 09 - RIGHT
	Helmet Use	
Helmet Compliance		
Eye Protection		
Tint Compliance		
UNIT INDIVIDUAL	Injury	Injury Severity NO APPARENT INJURY
	Airbag DEPLOYED-COMBINATION	
	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	

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UNIT	INDIVIDUAL	Distracted By Action				
		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 NOT OBSERVED				
01	004	Violations				
		UTC Number BD758980	Issue To? 001	Statute Number 346.18(3)	Description FAIL/YIELD RIGHT/WAY FROM STOP SIGN	

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	
		Insurance? YES		Direction Of Travel EASTBOUND		<input checked="" type="checkbox"/> Pre Crash Tire Mark		Speed Limit 55	
		Total HazMat Types 0		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 LEFT		Road Grade LEVEL			
		Truck Bus or HazMat NO							
		02	02	Vehicle					
				License Plate Number 596KTY		Plate Type AUT - AUTOMOBILE		St WI	Country of Issuance UNITED STATES
Vehicle Identification Number 1G1ND52F95M226765				Make CHEVROLET		Year 2005	Model CLASSIC		
Color GLD - GOLD				Body Style 4D - 4DR		Bus Use			

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UNIT VEHICLE	Initial Contact Point 12 - FRONT		Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT		
	Extent Of Damage DISABLING DAMAGE				
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By EVERETTS TOWING		
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors NOT APPLICABLE		
UNIT VEHICLE	Driver Prior Action Other				
	Driver Actions NO CONTRIBUTING ACTION				
02 02	Owner Name JOSHUA M LAUVER		Owner Address W7563 DUNNING DR PARDEEVILLE, WI 53954 , US		
	Sequence Of Events				
01 02 03 04	Event MOTOR VEH IN TRANSPORT				
	Event				
	Event				
	Event				
UNIT 02	Policy Holder				
	Insurance Company STATE-FARM-MUTUAL-AUTOMOBILE-INS-CO		Individual JOSHUA LAUVER		
UNIT INDIVIDUAL	Individual				
	Driver KEVIN LEE PERRY		Citations Issued 0	Sex MALE	
			Date of Birth [REDACTED]	Race WHITE	
	Address S7559 US HIGHWAY 12 LOT Q-17 NORTH FREEDOM, WI 53951 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
02 005	Safety Equipment		On Duty Crash		
			Safety Equipment SHOULDER & LAP BELT		
	Row 01 - FRONT ROW	Seat Position 07 - LEFT			
	Helmet Use		Helmet Compliance		
	Eye Protection		Tint Compliance		
02 005	Injury		Injury Severity NO APPARENT INJURY		Airbag DEPLOYED-FRONT
	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

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UNIT INDIVIDUAL 02 005	Distracted By Distracted By Source NOT APPLICABLE (NOT DISTRACTED)	
	Distracted By Action NOT DISTRACTED	
	Non Motorist	Striking Unit # Location
	Prior Action	
	Action	
	Action Other To/From School	
	Drug & Alcohol	Suspected Alcohol Use Suspected Drug Use NO NO
	Alcohol Test Given	Alcohol Test Type Alcohol Test Results TEST NOT GIVEN
	Drug Test Given	Drug Test Type Drug Test Results TEST NOT GIVEN
	Drug Type	
Individual Condition APPEARED NORMAL		

Witness

WITN 01 ESS	Individual BRIAN MICHAEL WHITE (608) 393-3434	Address 1017A PARKSIDE AVE # 202 BARABOO, WI 53913 , US	Date of Birth [REDACTED]

Witness

WITN 02 ESS	Individual LAURA M WHITE (608) 393-4776	Address 1017A PARKSIDE AVE # 202 BARABOO, WI 53913 , US	Date of Birth [REDACTED]