

6TL0CCZ7T0
21-11616

WISCONSIN MOTOR VEHICLE
CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMENT
1300 LANGE COURT
BARABOO, WI 53913
(608) 356-4895

6TL0CCZ7T0

| | | | | | |
|--|---|--|--|--|--|
| Document Number Override 6TL0B3P3HD | | Primary Crash Document# | Agency Crash Number 21-11616 | Investigating Officer/Deputy DEPUTY J. GREENWOOD | |
| Crash Date 12/03/2021 | | Crash Time 05:53 PM | Date Arrived 12/03/2021 | Time Arrived 06:06 PM | |
| Date Notified 12/03/2021 | | Time Notified 05:56 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 checked="" type="checkbox"/> Reportable | | Crash Type DT4000 (STANDARD CRASH) | | <input checked="" type="checkbox"/> Amended | <input type="checkbox"/> Secondary Crash |

Description

| | |
|--|---------------------------------------|
| <p>Diagram</p> <p style="text-align: center;">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 2 WAS TRAVELING WESTBOUND ON COUNTY HIGHWAY H. UNIT 1 WAS STOPPED AT THE STOP SIGN ON COUNTY HIGHWAY P AT THE INTERSECTION OF CTH H. UNIT 1 PULLED OUT FROM THE STOP SIGN AND PROCEEDED TO MAKE A LEFT HAND TURN ONTO COUNTY HIGHWAY H IN FRONT OF UNIT 2. UNIT 2 COLLIDED WITH UNIT 1. OPERATOR OF UNIT 1 ADMITTED HE WAS STUPID AND PULLED OUT WHEN HE SHOULD NOT HAVE. THE OPERATOR OF UNIT 1 WAS CITED FOR FAILING TO YIELD FROM A STOP SIGN.

MAKE CHANGES TO DIAGRAM

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Location

| | | |
|---|--------------------------------|----------------------------|
| ON CTHP WB 80 FT E OF CTHH WB IN THE TOWN OF DELLONA IN SAUK COUNTY | Latitude 43.592556485 | Longitude -89.910090505 |
| | X Coordinate 265090.28125 | Y Coordinate 4830736 |
| | 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 DARK/UNLIT | |
| 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 PARTIAL CONTROL | Special Study |
| Within Interchange Area NO | Junction Location INTERSECTION | Intersection Type T-INTERSECTION |

Unit Summary

| | | | | | |
|-------------|---|---|--|--|--------------------------------|
| UNIT | Unit Status IN TRANSIT | Vehicle Operating As Classification D CLASS | | Unit Type AUTOMOBILE | |
| | Vehicle Type PASSENGER VAN | 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 WESTBOUND | <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 CURVE RIGHT | | Road Grade LEVEL | |
| | Truck Bus or HazMat NO | | | | |

Vehicle

| | | | | |
|-----------|---|---------------------------------------|---------------------|---|
| 01 | License Plate Number 351JGN | Plate Type AUT - AUTOMOBILE | St WI | Country of Issuance UNITED STATES |
| | Vehicle Identification Number KNDMB5C18G6130774 | Make KIA MOTORS CORPORAT | Year 2016 | Model SEDONA |
| | Color BLU - BLUE | Body Style VN - VAN | | Bus Use |
| | Initial Contact Point 02 - RIGHT SIDE FRONT | | | |

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| | | | | |
|--------------------|---|---|---|--|
| UNIT VEHICLE | Vehicle Damage | | 7 8 9 10 11 5 4 3 2 1 | |
| | Extent Of Damage DISABLING DAMAGE | | | 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 04 - RIGHT SIDE REAR, 05 - RIGHT REAR CORNER |
| | Towed Due To Damage TOWED DUE TO DISABLING DAMAGE | | | Vehicle Removed By STEVES AUTO SERVICE |
| | What Driver Was Doing LEFT TURN | | | Vehicle Factors |
| UNIT VEHICLE | Driver Prior Action Other | | NOT APPLICABLE | |
| | Driver Actions FAILED TO YIELD RIGHT-OF-WAY | | | |
| | Owner Name NICHOLAS JOHN SUTTMAN (262) 903-3994 | | Owner Address 3125 ROYAL OAKS DR ELKHORN, WI 53121 , US | |
| UNIT VEHICLE | Sequence Of Events | | | |
| | Event LEFT TURN | | | |
| | Event MOTOR VEH IN TRANSPORT | | | |
| | Event | | | |
| UNIT VEHICLE | Policy Holder | | | |
| | Insurance Company ERIE-INS-CO | Individual NICHOLAS SUTTMAN | | |
| UNIT INDIVIDUAL | Individual | | | |
| | Driver KENNETH ROBERT KIDD (262) 903-4033 | Citations Issued 1 | Sex MALE | |
| | | Date of Birth [REDACTED] | Race WHITE | |
| | Address E4420 W REDSTONE DR LA VALLE, WI 53941 , US | Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES | | |
| UNIT INDIVIDUAL | 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 | |
| UNIT INDIVIDUAL | Injury | | Airbag | |
| | NO APPARENT INJURY | | DEPLOYED-CURTAIN | |
| | 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 | |

WISCONSIN MOTOR VEHICLE
CRASH REPORT

| | | |
|--|--|--|
| UNIT INDIVIDUAL | Distracted By Distracted By Source PASSENGER/OTHER NON-MOTORIST | |
| | Distracted By Action TALKING/LISTENING | |
| | Striking Unit # | Location |
| | Non Motorist | |
| | 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 SUSAN LEE KIDD (262) 903-4033 | Citations Issued 0 Sex FEMALE |
| | Date of Birth [REDACTED] | Race |
| | Address E4420 W REDSTONE DR LA VALLE, WI 53941 , US | Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES |
| UNIT INDIVIDUAL | Safety Equipment On Duty Crash Safety Equipment | |
| | Row 02 - SECOND ROW Seat Position 09 - RIGHT | SHOULDER & LAP BELT |
| | Helmet Use Helmet Compliance | |
| | Eye Protection Tint Compliance | |
| | Injury Injury Severity NO APPARENT INJURY Airbag DEPLOYED-CURTAIN | |
| UNIT INDIVIDUAL | 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 | Distracted By Action | | | |
| | 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 | | | |
| UNIT | Individual | | | |
| | Passenger | Citations Issued | Sex | |
| | BENJAMIN N SUTTMAN | 0 | MALE | |
| | | Date of Birth | Race | |
| | | | WHITE | |
| | Address | Driver License Number | | |
| | 315 ROYAL OAKS DRIVE ELKHORN, WI 53121 , US | | | |
| | Safety Equipment | On Duty Crash | Safety Equipment | |
| | | | SHOULDER & LAP BELT | |
| | | Row | Seat Position | |
| 01 - FRONT ROW | | 09 - RIGHT | | |
| Helmet Use | | Helmet Compliance | | |
| | | | | |
| Eye Protection | Tint Compliance | | | |
| | | | | |
| UNIT | Injury | Injury Severity | Airbag | |
| | | NO APPARENT INJURY | DEPLOYED-CURTAIN | |
| | Ejected | Ejection Path | Trapped/Extricated | |
| | NOT EJECTED | NOT EJECTED/NOT APPLICABLE | NOT TRAPPED | |
| | Medical Transport | EMS Agency Identifier | EMS Run# | |
| | NOT TRANSPORTED | | | |
| Hospital | Date of Death | Time of Death | | |
| | | | | |
| UNIT | Distracted By | Distracted By Source | | |
| | | Distracted By Action | | |

WISCONSIN MOTOR VEHICLE
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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 | | |
| | | 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 JILLIAN A SUTTMAN (262) 903-3994 | | Citations Issued 0 | Sex FEMALE | | |
| | | Date of Birth [REDACTED] | | Race WHITE | | | |
| | | Address 3125 ROYAL OAKS DRIVE ELKHORN, WI 53121 , US | | Driver License Number | | | |
| | | Safety Equipment | | On Duty Crash | | | |
| | | Row 02 - SECOND ROW | | Seat Position 07 - LEFT | | CHILD RESTRAINT SYSTEM - FORWARD FACING | |
| | | Helmet Use | | Helmet Compliance | | | |
| | | Eye Protection | | Tint Compliance | | | |
| | | Injury | | Injury Severity NO APPARENT INJURY | | Airbag DEPLOYED-CURTAIN | |
| | | 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 | | | | | |
| Distracted By Action | | | | | | | |
| UNIT | INDIVIDUAL | Non Motorist | | Striking Unit # | Location | | |

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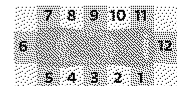
| | | | | |
|--------------------|--|-----|------------------------------------|--|
| UNIT INDIVIDUAL | Prior Action | | | |
| | Action | | | |
| | Action Other | | | To/From School |
| | Drug & Alcohol | | Suspected Alcohol Use NO | Suspected Drug Use NO |
| | Alcohol Test Given TEST NOT GIVEN | | Alcohol Test Type | Alcohol Test Results |
| | Drug Test Given TEST NOT GIVEN | | Drug Test Type | Drug Test Results |
| | Drug Type | | | |
| | Individual Condition APPEARED NORMAL | | | |
| | Violations | | | |
| | 01 | 004 | 01 | UTC Number: BC937142 Issue To?: 001 Statute Number: 346.18(2) Description: FAIL/YIELD WHILE MAKING LEFT TURN |

Unit Summary

| | | | | | | |
|------------|---|--|---|--|--|--|
| UNIT 02 | 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 | |
| | Insurance? YES | | Direction Of Travel WESTBOUND | | Total Trailers 0 | |
| | Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT | | Special Function NO SPECIAL FUNCTION | | Total HazMat Types 0 | |
| | Traffic Way TWO-WAY, NOT DIVIDED | | Traffic Control NO CONTROL | | Speed Limit 55 | |
| | Surface Type BLACKTOP (BITUMINOUS) | | Road Curvature CURVE RIGHT | | Total Lanes 2 | |
| | Truck Bus or HazMat NO | | Emergency Motor Vehicle Use NOT APPLICABLE | | Traffic Control Inoperative/Missing NO | |
| | Pre Crash Tire Mark <input type="checkbox"/> | | Road Grade LEVEL | | | |

Vehicle

| | | | | | | |
|-----------------------|---|--|---|---------------------|---|--|
| UNIT VEHICLE 02 | License Plate Number PF2157 | | Plate Type LTK - LIGHT TRUCK | St WI | Country of Issuance UNITED STATES | |
| | Vehicle Identification Number 1GCSKTE3XAZ157071 | | Make CHEVROLET | Year 2010 | Model SILVERADO | |
| | Color SIL - SILVER (ALUMINUM) | | Body Style PK - PICKUP | | Bus Use | |
| | Initial Contact Point 11 - LEFT FRONT CORNER | | Vehicle Damage 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER | | | |
| | Extent Of Damage DISABLING DAMAGE | | | | | |



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|---|--|--|--|--|
| UNIT VEHICLE | Towed Due To Damage TOWED DUE TO DISABLING DAMAGE | | Vehicle Removed By STEVES AUTO SERVICE | |
| | What Driver Was Doing NEGOTIATING CURVE | | Vehicle Factors | |
| | Driver Prior Action Other | | NOT APPLICABLE | |
| | Driver Actions | | | |
| 02 | Owner Name BOBBY N WALDNER (608) 475-1361 | | Owner Address 153 N MAIN ST APT 1 RICHLAND CENTER, WI 53581 , US | |
| | Sequence Of Events | | | |
| 01 | Event MOTOR VEH IN TRANSPORT | | | |
| | Event | | | |
| | Event | | | |
| | Event | | | |
| 02 | Policy Holder | | | |
| | Insurance Company PROGRESSIVE-CASUALTY-INS-CO | | Individual BOBBY WALDNER | |
| 03 | Individual | | | |
| | Driver BOBBY N WALDNER | | Citations Issued 0 | Sex MALE |
| | Address 153 N MAIN ST APT 1 RICHLAND CENTER, WI 53581 , US | | Date of Birth [REDACTED] | Race WHITE |
| | | | Driver License Number [REDACTED] | STATE: WISCONSIN COUNTRY: UNITED STATES |
| 04 | Safety Equipment | | On Duty Crash | |
| | Row 01 - FRONT ROW | Seat Position 07 - LEFT | SHOULDER & LAP BELT | |
| 05 | Helmet Use | | Safety Equipment | |
| | Eye Protection | | Helmet Compliance | |
| 02 | 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 02 005 | 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 | | | |