

6TL0CCZ7TZ

22-05850

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 6TL097RB7J		Primary Crash Document#	Agency Crash Number 22-05850	Investigating Officer/Deputy DEPUTY C. BRATZ	
Crash Date 06/20/2022		Crash Time 09:00 PM	Date Arrived 06/20/2022	Time Arrived 11:25 PM	
Date Notified 06/20/2022		Time Notified 10:30 PM	Total Units 02	Total Injured 00	Total Killed 01
<input type="checkbox"/> On Emergency	<input checked="" 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 SAUK COUNTY SHERIFF
		Photos By DEPUTY BRATZ
<p style="text-align: center;">CASSSEL RD</p> <p style="text-align: center;">CTH B</p> <p style="text-align: center;">STH 60</p> <p style="text-align: center;">IMAGE NOT TO SCALE</p>		Additional Information PHOTOS, RECONSTRUCTION, FATAL CRASH SUPPLEMENT

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

BICYCLIST TRAVELING WESTBOUND ON CTH B. SUSPECT VEHICLE ALSO TRAVELING WESTBOUND ON CTH B STRUCK BICYCLIST. BICYCLIST SUSTAINED FATAL INJURY. SUSPECT VEHICLE WAS NOT ON SCENE. IT WAS LATER FOUND DURING INVESTIGATION, THE SUSPECT VEHICLE ALONG WITH SUSPECT OF VEHICLE, HAD BEEN IDENTIFIED. SUSPECT DRIVER WAS IDENTIFIED AS PATRICK J. NACHREINER. SUSPECT VEHICLE WAS IDENTIFIED AS A VAN BEARING WI LICENSE PLATE RZ3259. VEHICLE SUSTAINED DAMAGE TO FRONT OF VEHICLE ALONG TO THE PASSENGER SIDE OF VEHICLE.

DURING COURSE OF INVESTIGATION, BOTH SUSPECT ALONG WITH SUSPECT'S VEHICLE IN CRASH WERE IDENTIFIED

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Location

ON CTHB WB 918 FT E OF CASSELL RD IN THE TOWN OF TROY IN SAUK COUNTY	Latitude	43.249251592	Longitude	-89.854426952
	X Coordinate	268277	Y Coordinate	4792451
	Structure Type	NO STRUCTURE		

Crash Scene

First Harmful Event MOTOR VEH TRAN OTHER RDWY		First Harmful Event Location ON ROADWAY	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT		Light Condition DUSK	
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	
Closure Type FULL CLOSURE		Reasons for Closure	
Date Initial Lane/Rd Closed 06/20/2022	Time Initial Lane/Rd Closed 11:40 PM	LAW ENFORCEMENT	
Date All Lanes Open 06/21/2022	Time All Lanes Open 03:10 AM	Date Scene Cleared 06/21/2022	Time Scene Cleared 03:10 AM

Unit Summary

UNIT 01	Unit Status IN TRANSIT		Vehicle Operating As Classification O CLASS		Unit Type BICYCLE	
	Vehicle Type BICYCLE				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? NO	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With DITCH		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 STRAIGHT		Road Grade UPHILL	
	Truck Bus or HazMat NO					

Vehicle

License Plate Number	Plate Type	St	Country of Issuance
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UNIT VEHICLE	01	Vehicle Identification Number	Make	Year	Model TREK
	01	Color BLK - BLACK	Body Style BI - BICYCLE	Bus Use	
		Initial Contact Point 06 - REAR	Vehicle Damage		
	Extent Of Damage DISABLING DAMAGE	06 - REAR			
	Towed Due To Damage NOT TOWED	Vehicle Removed By			
	What Driver Was Doing	Vehicle Factors			
	Driver Prior Action Other	NOT APPLICABLE			
UNIT VEHICLE	01	Driver Actions			
01	01	Owner Name MICHAEL WARD KIERSKI	Owner Address S10845 TROY RD SAUK CITY, WI 53583 , US		

Sequence Of Events

UNIT VEHICLE	01	Event DITCH
	02	Event
	03	Event
	04	Event

Individual

UNIT INDIVIDUAL	01	Bicyclist MICHAEL WARD KIERSKI	Citations Issued 0	Sex MALE
			Date of Birth [REDACTED]	Race WHITE
	Address S10845 TROY RD SAUK CITY, WI 53583 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		

Safety Equipment

UNIT VEHICLE	01	On Duty Crash	Safety Equipment	
		Row 98 - NOT APPLICABLE	Seat Position	HELMET
	Helmet Use	Helmet Compliance		
	Eye Protection	Tint Compliance		

Injury

UNIT VEHICLE	001	Injury Severity FATAL INJURY	Airbag NOT APPLICABLE
		Ejected NOT APPLICABLE	Ejection Path NOT EJECTED/NOT APPLICABLE
	Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run#

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UNIT INDIVIDUAL	Hospital	Date of Death 06/21/2022	Time of Death 02:48	
	Distracted By	Distracted By Source UNKNOWN		
	Distracted By Action UNKNOWN			
	Non Motorist	Striking Unit # 02	Location NOT AT INTERSECTION-ON ROADWAY, NOT IN MARKED CROSSWALK	
	Prior Action WALKING/CYCLING ALONG ROADWAY WITH TRAFFIC (IN OR ADJACENT TO TRAVEL LANE)			
	Action UNKNOWN			
	Action Other			To/From School NO
	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 Summary

UNIT 02	Unit Status HIT AND RUN	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? UNKNOWN	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With PEDALCYCLE	Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NON-EMERGENCY, NON-TRANSPORT		
	Traffic Way TWO-WAY, NOT DIVIDED	Traffic Control NO CONTROL	Traffic Control Inoperative/Missing NO		
	Surface Type BLACKTOP (BITUMINOUS)	Road Curvature STRAIGHT	Road Grade UPHILL		
	Truck Bus or HazMat NO				

Vehicle

UNIT 02	License Plate Number RZ3259	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1GTW7AFBXL1261297	Make GENERAL MOTORS COR	Year 2020	Model SAVANA
	Color WHI - WHITE	Body Style 3D - THREE DOOR	Bus Use	

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UNIT VEHICLE	Initial Contact Point 01 - RIGHT FRONT CORNER	Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 12 - FRONT		
	Extent Of Damage FUNCTIONAL DAMAGE			
	Towed Due To Damage NOT TOWED	Vehicle Removed By		
	What Driver Was Doing UNKNOWN	Vehicle Factors		
	Driver Prior Action Other	UNKNOWN		
UNIT VEHICLE	Driver Actions UNKNOWN			
	Owner Name PATRICK J NACHREINER		Owner Address 955 MEADOW LN PLAIN, WI 53577 , US	
02 02	Sequence Of Events			
	Event PEDALCYCLE			
	Event			
	Event			
04 03 02 01	Event			
	Event			
	Event			
	Event			
UNIT INDIVIDUAL	Individual			
	Driver PATRICK J NACHREINER	Citations Issued 0	Sex MALE	
		Date of Birth [REDACTED]	Race WHITE	
02 002	Address 955 MEADOW LN PLAIN, WI 53577 , US		Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
	Safety Equipment		On Duty Crash	
02 002	Safety Equipment NONE USED - VEHICLE OCCUPANT			
	Row 01 - FRONT ROW	Seat Position 07 - LEFT		
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	Injury		Injury Severity NO APPARENT INJURY	Airbag NOT APPLICABLE
	Ejected NOT APPLICABLE	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT APPLICABLE	
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 02 002	Distracted By Action		
	Non Motorist	Striking Unit #	Location
	Prior Action		
	Action		
	Action Other		To/From School
	Drug & Alcohol	Suspected Alcohol Use	Suspected Drug Use
	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		