

6TL0B655TS
22-06267

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 22-06267		Investigating Officer/Deputy DEPUTY W. NEUBAUER	
Crash Date 07/02/2022		Crash Time 03:15 PM		Date Arrived 07/02/2022		Time Arrived 03:52 PM	
Date Notified 07/02/2022		Time Notified 03:18 PM		Total Units 02		Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input checked="" type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone		<input type="checkbox"/> Trailer or Towed	<input checked="" 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

Diagram		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 TRAVELING EASTBOUND ON CTY B IN VILLAGE OF PLAIN. UNIT 2 TRAVELING SOUTHBOUND ON STH 23 IN VILLAGE OF PLAIN. UNIT 1 DROVE THROUGH CTY B/STH 23 INTERSECTION WITHOUT OBEYING STOP SIGN. UNIT 2 CRASHED INTO UNIT 1 FRONT TO REAR DRIVER SIDE. UNIT 2 STOPPED AT SCENE. UNIT 1 STOPPED MOMENTARILY AND THEN LEFT THE SCENE. DRIVER OF UNIT 1 ADMITTED TO LEAVING THE SCENE AND HAVING NO INSURANCE.

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Location

INTERSECTION ON STH23 EB AT MAIN ST/ CTHB EB IN THE VILLAGE OF PLAIN IN SAUK COUNTY	Latitude 43.278827667	Longitude -90.044036865
	X Coordinate 253003.28125	Y Coordinate 4796279
	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) WET	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLOUDY, RAIN		
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 YES	Junction Location INTERSECTION	Intersection Type FOUR-WAY INTERSECTION

Unit Summary

UNIT 01	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 3	Total Trailers 0	Total HazMat Types 0
	Insurance? NO	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 25	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 DOWNHILL		
	Truck Bus or HazMat NO				

Vehicle

UNIT VEHICLE 01 01	License Plate Number AMR6618	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 5NPET4AC0AH618288	Make HYUNDAI	Year 2010	Model SONATA
	Color BLK - BLACK	Body Style SD - SEDAN	Bus Use	
	Initial Contact Point 08 - LEFT SIDE REAR	Vehicle Damage		
	Extent Of Damage DISABLING DAMAGE	08 - LEFT SIDE REAR		



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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By EVERETTS TOWING	
	What Driver Was Doing		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions DISREGARDED STOP SIGN, UNKNOWN			
01 01	Owner Name JAMES ANDREW SRNEC (608) 556-7520		Owner Address 33 HOLLYWOOD DR MADISON, WI 53713 , US	
	Sequence Of Events			
01 02 03 04	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
	Event			
UNIT INDIVIDUAL	Individual			
	Driver JAMES ANDREW SRNEC (608) 434-1669		Citations Issued 3	Sex MALE
	Address 33 HOLLYWOOD DR MADISON, WI 53713 , US		Date of Birth [REDACTED]	Race WHITE
	Driver License Number [REDACTED]		STATE: WISCONSIN COUNTRY: UNITED STATES	
01 001	Safety Equipment		On Duty Crash	
	Safety Equipment		RESTRAINT USE UNKNOWN	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	Helmet Use	
	Helmet Compliance		Eye Protection	
Tint Compliance		Airbag NOT APPLICABLE		
Injury		Injury Severity NO APPARENT INJURY		
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 UNKNOWN		Distracted By Action UNKNOWN		
Non Motorist		Striking Unit #		
Location				

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UNIT INDIVIDUAL	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			
	Violations			
	01 001	UTC Number BB958539	Issue To? 001	Statute Number 346.67(1)
02 01	UTC Number BB958540	Issue To? 001	Statute Number 344.62(1)	Description OPERATE MOTOR VEHICLE W/O INSURANCE
03 01	UTC Number BB958541	Issue To? 001	Statute Number 346.04(2)	Description FAIL/OBEY TRAFFIC SIGN/SIGNAL

Unit Summary

UNIT 02	Unit Status IN TRANSIT		Vehicle Operating As Classification C CLASS		Unit Type TRUCK	
	Vehicle Type CARGO VAN (10,000 LBS OR LESS)				Operating As Endorsements	
	Total Occs 2		Train/Bus # Recorded		Total # Citations Issued 0	
	Total Trailers 0		Total HazMat Types 0			
	Insurance? UNKNOWN		Direction Of Travel SOUTHBOUND		<input type="checkbox"/> Pre Crash Tire Mark	
	Speed Limit 30		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 STRAIGHT		Road Grade DOWNHILL
	Truck Bus or HazMat TRUCK OR TRUCK COMBINATION > 10,000LBS GVWR/GCWR					
UNIT 02	Vehicle					
	License Plate Number AE87449		Plate Type APO - APPORTIONED		St AZ	Country of Issuance UNITED STATES
	Vehicle Identification Number 1FDXE4FS4DDA93535		Make FORD		Year 2013	Model ECONOLINE
	Color MUL - MULTICOLOR		Body Style TK - TRUCK		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 NOT TOWED		Vehicle Removed By OPERATOR		
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors NOT APPLICABLE		
	Driver Prior Action Other				
UNIT VEHICLE	Driver Actions NO CONTRIBUTING ACTION				
	Owner Name UHAUL		Owner Address PO BOX 21508 PHOENIX, AZ 85036 1508, US		
02 02	Sequence Of Events				
	01	Event MOTOR VEH IN TRANSPORT			
	02	Event			
	03	Event			
	04	Event			
UNIT INDIVIDUAL	Individual				
	Driver BRENDEN A WESTERFELDT (608) 432-4787		Citations Issued 0	Sex MALE	
			Date of Birth [REDACTED]	Race WHITE	
	Address S10313 OLD HIGHWAY 23 SPRING GREEN, WI 53588 , US		Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES		
02 002	Safety Equipment		On Duty Crash		
			Safety Equipment RESTRAINT USE UNKNOWN		
	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 NOT APPLICABLE (NOT DISTRACTED)			

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UNIT	INDIVIDUAL	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
		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 JACOB CHARLES ROBERTS (608) 574-4771	Citations Issued 0
			Sex MALE
			Date of Birth [REDACTED]
			Race WHITE
		Address 213 W COMMERCE ST MINERAL POINT, WI 53565 , US	Driver License Number [REDACTED]
			STATE: WISCONSIN COUNTRY: UNITED STATES
		Safety Equipment	On Duty Crash Safety Equipment
		Row 01 - FRONT ROW	Seat Position 09 - RIGHT
		RESTRAINT USE UNKNOWN	
Helmet Use Helmet Compliance			
Eye Protection Tint Compliance			
UNIT	INDIVIDUAL	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
		Distracted By Action	

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UNIT	Non Motorist		Striking Unit #	Location		
	Prior Action					
	Action					
INDIVIDUAL	Action Other				To/From School	
	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO		
02	003	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	TRUCK BUS	Carrier				
		<input checked="" type="checkbox"/> Use Vehicle Owner Same as Carrier		Source DRIVER		
		Name UHAUL		Address PO BOX 21508 PHOENIX, AZ 85036 1508, US		
		GVWR 10,000 LBS OR LESS		Vehicle Configuration VEHICLE 10,000 LBS OR LESS PLACARDED FOR HAZ		Cargo Body Type VAN/ENCLOSED BOX
		US DOT #		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	