

WISCONSIN MOTOR VEHICLE
CRASH REPORT

6TL0BFKDGX

Document Number Override		Primary Crash Document#		Agency Crash Number 22-07091		Investigating Officer/Deputy DEPUTY H. VOLZ	
Crash Date 07/22/2022		Crash Time 02:33 PM		Date Arrived 07/22/2022		Time Arrived 02:37 PM	
Date Notified 07/22/2022		Time Notified 02:35 PM		Total Units 04		Total Injured 02	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 checked="" 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

<p>Diagram</p>	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, UNIT 2 AND UNIT 3 WERE ALL TRAVELING WB ON USH 12. UNIT 4 WAS TRAVELING EB ON USH 12. UNITS 2 AND 3 WERE SLOWING OR STOPPED IN TRAFFIC THAT WAS BACKED UP FROM THE STOP LIGHT INTERSECTION AT USH 12 AND CTH PF. UNIT 1 STRUCK UNIT 2 IN THE REAR. THIS CAUSED UNIT 2 TO STRIKE UNIT 3. UNIT 2 THEN CROSSED THE CENTERLINE AND ENTERED THE EB LANE OF TRAFFIC. UNIT 4 STRUCK UNIT 2. UNIT 2 ROLLED INTO THE DITCH AND LANDED ON THE DRIVERS SIDE OF THE VEHICLE BEFORE COMING TO REST.

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1300 LANGE COURT
BARABOO, WI 53913
(608) 356-4895

Location

ON USH12 WB 1235 FT S OF USH12 WB IN THE VILLAGE OF PRAIRIE DU SAC IN SAUK COUNTY	Latitude 43.289675013	Longitude -89.759065418
	X Coordinate 276167.15625	Y Coordinate 4796680.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 03 - FRONT TO REAR		Light Condition DAYLIGHT	
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 LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS	
Date Initial Lane/Rd Closed 07/22/2022	Time Initial Lane/Rd Closed 02:41 PM		
Date All Lanes Open 07/22/2022	Time All Lanes Open 03:37 PM	Date Scene Cleared 07/22/2022	Time Scene Cleared 03:43 PM

Unit Summary

UNIT 01	Unit Status IN TRANSIT		Vehicle Operating As Classification A CLASS		Unit Type TRUCK	
	Vehicle Type TRUCK TRACTOR (SEMI ATTACHED)				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 1	Total Trailers 1	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel WESTBOUND	<input checked="" 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 NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat TRUCK OR TRUCK COMBINATION > 10,000LBS GVWR/GCWR					

01	Vehicle				
	License Plate Number 2342047		Plate Type APO - APPORTIONED	St IN	Country of Issuance UNITED STATES
	Vehicle Identification Number 1FUBGBDV4HLHH9412		Make FREIGHTLINER CORP	Year 2017	Model UNKNOWN

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UNIT VEHICLE	Color WHI - WHITE		Body Style TK - TRUCK		Bus Use	
	Initial Contact Point 11 - LEFT FRONT CORNER		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 CRAIGS TOWING			
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors NOT APPLICABLE			
UNIT VEHICLE	Driver Prior Action Other					
	Driver Actions OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER					
01 01	Owner Name SYSCO LEASING LLC (608) 356-8711			Owner Address 910 SOUTH BOULEVARD BARABOO, WI 53913 , US		
	Sequence Of Events					
01 01	Event MOTOR VEH IN TRANSPORT					
	Event					
	Event					
	Event					
UNIT 01	Policy Holder					
	Insurance Company ZURICH-AMERICAN-INS-CO			Organization/Company SYSCO LEASING LLC		
UNIT TRAILER	Trailer/Towed					
	Trailer Plate # P744493		Plate Type APO - APP	Make GDAN	State IN	Country of Issuance UNITED STATES
	Unit Type SEMI TRAILER		Organization/Company SYSCO LEASING LLC (608) 356-8711			Address 910 SOUTH BOULEVARD BARABOO, WI 53913 , US
Vehicle Identification Number 1GRAA8428KB140757						
UNIT INDIVIDUAL	Individual					
	Driver ADAM RAYMOND MUNDTH (608) 477-0590			Citations Issued 1	Sex MALE	
	Address 1211 3RD ST REEDSBURG, WI 53959 , US			Date of Birth [REDACTED]	Race WHITE	
			Driver License Number [REDACTED]			
			STATE: WISCONSIN COUNTRY: UNITED STATES			
Safety Equipment						
On Duty Crash			Safety Equipment			
Row 01 - FRONT ROW		Seat Position 07 - LEFT	SHOULDER & LAP BELT			
Helmet Use			Helmet Compliance			

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Form containing various sections: Eye Protection, Injury Severity, Ejected, Medical Transport, Hospital, Distracted By, Non Motorist, Prior Action, Action, Drug & Alcohol, Alcohol Test Given, Drug Test Given, Drug Type, Individual Condition, Violations, Carrier, and GVWR. Includes checkboxes for 'Use Vehicle Owner Same as Carrier' and 'Permitted Vehicle On Permitted Route'.

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Table with 4 columns: Measured Height, Measured Length, Measured Width, Measured Weight

Unit Summary

Unit Summary form containing fields for Unit Status (IN TRANSIT), Vehicle Operating As Classification (D CLASS), Unit Type (TRUCK), Vehicle Type (UTILITY TRUCK/PICKUP TRUCK), and various operational details.

Vehicle

Vehicle form containing fields for License Plate Number (LW2258), Vehicle Identification Number (4TAVN52NXXZ525212), Make (TOYOTA), Model (TACOMA), and Owner Information (MARK RUSSELL WENZLAFF).

Sequence Of Events

Sequence Of Events form with a table listing events, starting with 'MOTOR VEH IN TRANSPORT' at 01:00.

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UNIT	Policy Holder		
	Insurance Company COUNTRY-PREFERRED-INSURANCE-CO	Individual MARK WENZLAFF	
UNIT	Individual		
	Driver MARK RUSSELL WENZLAFF (608) 233-5558	Citations Issued 0	Sex MALE
	Date of Birth [REDACTED]		Race WHITE
UNIT	Address 5718 ELDER PL MADISON, WI 53705 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES
	Safety Equipment		Safety Equipment SHOULDER & LAP BELT
02	On Duty Crash		Helmet Compliance
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	Eye Protection
	Tint Compliance		Airbag NON DEPLOYED
	Injury		Injury Severity SUSPECTED SERIOUS INJUR
002	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated TRAPPED/EXTRICATED
	Medical Transport EMS GROUND	EMS Agency Identifier 6000555	EMS Run#
	Hospital UNIVERSITY OF WI HOSPITALS & CLINICS AUT	Date of Death	Time of Death
	Distracted By		
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
UNIT	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			
02	002		

Individual Condition

APPEARED NORMAL

Unit Summary

03	Unit Status	Vehicle Operating As Classification		Unit Type		
	IN TRANSIT	D CLASS		AUTOMOBILE		
UNIT	Vehicle Type			Operating As Endorsements		
	PASSENGER CAR					
	Total Occs	Train/Bus # Recorded	Total # Citations Issued	Total Trailers	Total HazMat Types	
	1		0	0	0	
	Insurance?	Direction Of Travel	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit	Total Lanes	
	YES	WESTBOUND		55	2	
	Most Harmful Event: Collision With			Special Function		Emergency Motor Vehicle Use
	MOTOR VEH IN TRANSPORT			NO SPECIAL FUNCTION		NOT APPLICABLE
Traffic Way			Traffic Control		Traffic Control Inoperative/Missing	
TWO-WAY, NOT DIVIDED			NO CONTROL		NO	
Surface Type			Road Curvature		Road Grade	
BLACKTOP (BITUMINOUS)			STRAIGHT		LEVEL	
Truck Bus or HazMat						
NO						

Vehicle

03	03	License Plate Number	Plate Type	St	Country of issuance	
		AAL9133	AUT - AUTOMOBILE	WI	UNITED STATES	
UNIT	VEHICLE	Vehicle Identification Number	Make	Year	Model	
		3VWRJ71K58M165643	VOLKSWAGEN	2008	JET	
		Color	Body Style		Bus Use	
		GRY - GRAY	4D - 4DR			
		Initial Contact Point	Vehicle Damage			
		06 - REAR	03 - RIGHT SIDE MIDDLE, 04 - RIGHT SIDE REAR, 05 - RIGHT REAR CORNER, 06 - REAR, 07 - LEFT REAR CORNER			
		Extent Of Damage	Towed Due To Damage			
DISABLING DAMAGE	TOWED DUE TO DISABLING DAMAGE					
Towed Due To Damage		Vehicle Removed By				
TOWED DUE TO DISABLING DAMAGE		CRAIGS TOWING				
What Driver Was Doing		Vehicle Factors				
SLOW/STOPPING		NOT APPLICABLE				
Driver Prior Action Other						
UNIT	VEHICLE	Driver Actions				
		NO CONTRIBUTING ACTION				
		Owner Name		Owner Address		
03	03	BRIANNA MAE HUEMMER		5021 PENDLETON DR # 209		
		(608) 250-0973		MADISON, WI 53718 , US		

Sequence Of Events

04	03	01	Event
			MOTOR VEH IN TRANSPORT
			Event
			Event
04	03	02	Event
			Event
			Event
04	03	03	Event
			Event

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UNIT	Policy Holder		
	Insurance Company AMERICAN-FAMILY-INS-CO		Individual BRIANNA HUEMMER
UNIT	Individual		
	Driver BRIANNA MAE HUEMMER (608) 250-0973		Citations Issued 0
	Date of Birth [REDACTED]		Sex FEMALE
UNIT	Address 5021 PENDLETON DR # 209 MADISON, WI 53718 , US		Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES
	Safety Equipment		Safety Equipment SHOULDER & LAP BELT
UNIT	On Duty Crash	Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT
UNIT	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
03	003	Injury	
		Injury Severity SUSPECTED MINOR INJURY	Airbag DEPLOYED-CURTAIN
03	003	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE
		Trapped/Extricated NOT TRAPPED	
03	003	Medical Transport EMS GROUND	EMS Agency Identifier 6000368
		Hospital SAUK PRAIRIE HOSP	Date of Death
03	003	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)	
		Distracted By Action NOT DISTRACTED	
03	003	Non Motorist	
		Striking Unit#	Location
03	003	Prior Action	
		Action	
03	003	Action Other	To/From School
		Drug & Alcohol	
03	003	Suspected Alcohol Use NO	Suspected Drug Use NO
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type
03	003	Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN	Drug Test Type
03	003	Drug Test Results	
		Drug Type	

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Individual Condition

APPEARED NORMAL

Unit Summary

Unit Summary table with fields: Unit Status (IN TRANSIT), Vehicle Operating As Classification (A CLASS), Unit Type (TRUCK), Vehicle Type (TRUCK TRACTOR (SEMI ATTACHED)), Total Occs (1), Train/Bus # Recorded, Total # Citations Issued (0), Total Trailers (1), Total HazMat Types (0), Insurance? (YES), Direction Of Travel (EASTBOUND), 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 (NO CONTROL), Traffic Control Inoperative/Missing (NO), Surface Type (BLACKTOP (BITUMINOUS)), Road Curvature (STRAIGHT), Road Grade (LEVEL), Truck Bus or HazMat (TRUCK OR TRUCK COMBINATION > 10,000LBS GVWR/GCWR)

Vehicle

Vehicle table with fields: License Plate Number (98094X), Plate Type (APO - APPORTIONED), St (WI), Country of issuance (UNITED STATES), Vehicle Identification Number (1M1AW09Y7EM042449), Make (MACK), Year (2014), Model (FLT 172), Color (WHI - WHITE), Body Style (TK - TRUCK), Bus Use, Initial Contact Point (12 - FRONT), Vehicle Damage (01 - RIGHT FRONT CORNER, 04 - RIGHT SIDE REAR, 11 - LEFT FRONT CORNER, 12 - FRONT, 14 - UNDERCARRIAGE), Extent Of Damage (FUNCTIONAL DAMAGE), Towed Due To Damage (NOT TOWED), Vehicle Removed By (OPERATOR), What Driver Was Doing (GOING STRAIGHT), Vehicle Factors, Driver Prior Action Other (NOT APPLICABLE), Driver Actions (NO CONTRIBUTING ACTION), Owner Name (EAGLE VALLEY AG SERVICE LLC), Owner Address (843 15TH STREET, PRAIRIE DU SAC, WI 53578, US)

Sequence Of Events

Sequence Of Events table with Event 01: MOTOR VEH IN TRANSPORT

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UNIT	Policy Holder			
	Insurance Company GRINNELL-MUTUAL-REINSURANCE-CO		Organization/Company EAGLE VALLEY AG SERVICE LLC	
UNIT 04	Trailer/Towed			
	Trailer Plate # 779940	Plate Type STL - SEMI	Make TRLK	State WI
UNIT TRAILER/	Unit Type SEMI TRAILER	Organization/Company EAGLE VALLEY AG SERVICE LLC (608) 370-4343		Country of Issuance UNITED STATES
	Vehicle Identification Number 1TKN0432XBW033400			Address 843 15TH STREET PRAIRIE DU SAC, WI 53578 , US
UNIT INDIVIDUAL	Individual			
	Driver JOEY JAY LITSCHER (608) 963-2877		Citations Issued 0	Sex MALE
UNIT INDIVIDUAL	Date of Birth [REDACTED]		Race WHITE	
	Address E12698A SHADY LANE RD BARABOO, WI 53913 , US		Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
UNIT 04	Safety Equipment		On Duty Crash	
	Row 01 - FRONT ROW		Seat Position 07 - LEFT	
UNIT 004	Helmet Use		Safety Equipment SHOULDER & LAP BELT	
	Eye Protection		Helmet Compliance	
UNIT 004	Injury		Airbag	
	Injury Severity NO APPARENT INJURY		NON DEPLOYED	
UNIT INDIVIDUAL	Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE	
	Medical Transport NOT TRANSPORTED		Trapped/Extricated NOT TRAPPED	
UNIT INDIVIDUAL	Hospital		EMS Agency Identifier	
	Date of Death		EMS Run #	
UNIT INDIVIDUAL	Distracted By			
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)			
UNIT INDIVIDUAL	Distracted By Action NOT DISTRACTED			
	Non Motorist		Striking Unit #	
UNIT INDIVIDUAL	Location		Prior Action	
	Action			
UNIT INDIVIDUAL	Action Other			To/From School
	Drug & Alcohol		Suspected Alcohol Use	
NO		Suspected Drug Use		
NO				

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04 004
Alcohol Test Given: TEST NOT GIVEN
Drug Test Given: TEST NOT GIVEN
Drug Type:
Individual Condition: APPEARED NORMAL

04 02
Carrier
Use Vehicle Owner Same as Carrier: [checked]
Source: VEHICLE-SIDE
Name: EAGLE VALLEY AG SERVICE LLC
Address: 843 15TH STREET, PRAIRIE DU SAC, WI 53578, US
GVWR: MORE THAN 26,000 LB
Vehicle Configuration: TRUCK TRACTOR/SEMI-TRAILER
Cargo Body Type: GRAIN/CHIPS/GRAVEL
US DOT #: 1852024
Carrier Type: INTERSTATE CARRIER
Permitted Load: NOT APPLICABLE
OS/OW Load, W/ Permit Number, Permitted Vehicle On Permitted Route, Escort Vehicle Required By Permit, Escort Vehicle Present
Measured Height, Measured Length, Measured Width, Measured Weight

Witness
WITN 01
ESS
Individual: ABBY C HELLE
Address: 1318 3RD STREET SW, DYERSVILLE, IA 52040, US
Date of Birth: [redacted]

Witness
WITN 02
ESS
Individual: MARCUS L HELLE
Address: 1318 3RD STREET SW, DYERSVILLE, IA 52040, US
Date of Birth: [redacted]

Witness
WITN 03
ESS
Individual: SAER W HOADLEY
Address: 630 WESTWYND CT # 3, MAZOMANIE, WI 53560, US
Date of Birth: [redacted]