

6TL0D1PTMJ  
22-08970

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 22-08970		Investigating Officer/Deputy DEPUTY R. BARNES	
Crash Date 09/07/2022		Crash Time 01:17 PM		Date Arrived 09/07/2022		Time Arrived 01:24 PM	
Date Notified 09/07/2022		Time Notified 01:17 PM		Total Units 02		Total Injured 00	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 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 R. BARNES	
		Additional Information PHOTOS	

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

ON 09/07/22 I RESPONDED TO A TWO VEHICLE CRASH THAT OCCURRED AT THE INTERSECTION OF HWY 113 AND HWY W IN SAUK COUNTY, WI. NO INJURIES WERE REPORTED, THOUGH THE FEMALE DRIVER OF UNIT 2 WAS EVALUATED BY EMS.

UNIT 1 WAS TRAVELING EAST ON HIGHWAY W AND STOPPED FOR STOP SIGN AT THE INTERSECTION OF HWY W AND HWY 113. THE OPERATOR OF UNIT 1 LOOKED SEVERAL TIMES, HOWEVER DID NOT SEE ANY VEHICLES ON HIGHWAY 113. THE OPERATOR THEN ENTERED THE INTERSECTION AND AS HE DID SO, NOTICED UNIT 2 TRAVELING NORTHBOUND ON HWY 113. THE OPERATOR OF UNIT 1 TRIED TO STOP, BUT WAS UNABLE TO BEFORE STRIKING UNIT 2. THE OPERATOR OF UNIT 2 STATED SHE TRIED TO AVOID UNIT 1 ONCE SHE NOTICED IT, BUT WAS UNABLE TO AVOID THE COLLISION.

UNIT 1 WAS ABLE TO BE DRIVEN, HOWEVER UNIT 2 SUSTAINED DISABLING DAMAGE.

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Location

ON CTHW NB 6 FT E OF KESSLER RD IN THE TOWN OF GREENFIELD IN SAUK COUNTY	Latitude	Longitude
	43.452684572	-89.71504306
	X Coordinate	Y Coordinate
	280328.28125	4814667.5
Structure Type		

Crash Scene

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>	First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>01 - ANGLE</b>	Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>DRY</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>		
Weather Condition(s) <b>CLEAR</b>		
Animal Type	Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>	Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land	Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>INTERSECTION</b>	Intersection Type <b>FOUR-WAY INTERSECTION</b>
Closure Type <b>CLOSURE-ONE DIRECTION</b>	Reasons for Closure <b>LAW ENFORCEMENT, FIRE/EMS</b>	
Date Initial Lane/Rd Closed <b>09/07/2022</b>	Time Initial Lane/Rd Closed <b>01:17 PM</b>	
Date All Lanes Open <b>09/07/2022</b>	Time All Lanes Open <b>01:47 PM</b>	Date Scene Cleared <b>09/07/2022</b>
		Time Scene Cleared <b>01:47 PM</b>

Unit Summary

<b>UNIT 01</b>	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>TRUCK</b>		
	Vehicle Type <b>UTILITY TRUCK/PICKUP TRUCK</b>	Operating As Endorsements			
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>1</b>	Total HazMat Types <b>0</b>
	Insurance? <b>YES</b>	Direction Of Travel <b>EASTBOUND</b>	<input checked="" type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>55</b>	Total Lanes <b>2</b>
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>	Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>	Traffic Control <b>STOP SIGN</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>	Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>				

Vehicle

<b>01 01</b>	License Plate Number <b>TJ2027</b>	Plate Type <b>LTK - LIGHT TRUCK</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>3GCPKSE73DG139650</b>	Make <b>CHEVROLET</b>	Year <b>2013</b>	Model <b>SLV</b>

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UNIT VEHICLE	Color	RED - RED	Body Style	PK - PICKUP	Bus Use	
	Initial Contact Point	01 - RIGHT FRONT CORNER	Vehicle Damage		7 8 9 10 11 6 12 5 4 3 2 1	
	Extent Of Damage	FUNCTIONAL DAMAGE	01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT			
	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 FAILED TO YIELD RIGHT-OF-WAY, LOOKED BUT DID NOT SEE					
	Owner Name AUSTIN JERALD POWERS (608) 393-1957			Owner Address S5487 OLD LAKE RD BARABOO, WI 53913 , US		
UNIT VEHICLE	<b>Sequence Of Events</b>					
	Event	MOTOR VEH IN TRANSPORT				
	Event					
	Event					
UNIT VEHICLE	Event					
	Event					
	Event					
UNIT VEHICLE	<b>Policy Holder</b>					
	Insurance Company	PROGRESSIVE-ADVANCED-INSURANCE-CO		Individual	AUSTIN POWERS	
UNIT TRAILER	<b>Trailer/Towed</b>					
	Trailer Plate #	Plate Type	Make	State	Country of Issuance	
	Unit Type	UTILITY TRAILER		Individual	AUSTIN JERALD POWERS (608) 393-1957	
Vehicle Identification Number	Address S5487 OLD LAKE RD BARABOO, WI 53913 , US					
UNIT INDIVIDUAL	<b>Individual</b>					
	Driver	AUSTIN JERALD POWERS		Citations Issued	0	
				Sex	MALE	
				Date of Birth	[REDACTED]	
			Race	WHITE		
	Address S5487 OLD LAKE RD BARABOO, WI 53913 , US		Driver License Number [REDACTED]			
			STATE: WISCONSIN COUNTRY: UNITED STATES			
UNIT INDIVIDUAL	<b>Safety Equipment</b>					
	On Duty Crash			Safety Equipment		
	Row	01 - FRONT ROW		Seat Position	07 - LEFT	
Helmet Use	SHOULDER & LAP BELT					
	Helmet Compliance					

WISCONSIN MOTOR VEHICLE  
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01	001	Eye Protection	Tint Compliance			
		<b>Injury</b>	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		
		<b>Distracted By</b>	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)			
		Distracted By Action UNKNOWN				
		<b>Non Motorist</b>	Striking Unit #	Location		
		Prior Action				
		Action				
UNIT	INDIVIDUAL	Action Other			To/From School	
		<b>Drug &amp; Alcohol</b>	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 Summary

02	UNIT	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE			
		Vehicle Type (SPORT) UTILITY VEHICLE			Operating As Endorsements		
		Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
		Insurance? YES	Direction Of Travel NORTHBOUND	<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 CURVE RIGHT	Road Grade DOWNHILL		
		Truck Bus or HazMat NO					

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UNIT 02	VEHICLE	<b>Vehicle</b>			
		License Plate Number AGN9717	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1GNALAEK7FZ108591	Make CHEVROLET	Year 2015	Model EQX
		Color SIL - SILVER (ALUMINUM)	Body Style UT - SPORT UTILITY VEHICLE	Bus Use	
		Initial Contact Point 10 - LEFT SIDE 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 CRAIGS TOWING		
		What Driver Was Doing NEGOTIATING CURVE	Vehicle Factors		
		Driver Prior Action Other	NOT APPLICABLE		
		Driver Actions NO CONTRIBUTING ACTION			
UNIT 02	VEHICLE	Owner Name KATHRYN W BURNHAM (608) 493-4412	Owner Address E12813 WEST POINT DR MERRIMAC, WI 53561 , US		
		<b>Sequence Of Events</b>			
UNIT 01	VEHICLE	Event MOTOR VEH IN TRANSPORT			
		Event			
		Event			
		Event			
UNIT 02	VEHICLE	<b>Policy Holder</b>			
		Insurance Company ACUITY,-A-MUTUAL-INSURANCE-CO	Individual KATHRYN BURNHAM		
UNIT 02	INDIVIDUAL	<b>Individual</b>			
		Driver KATHRYN W BURNHAM (608) 493-4412	Citations Issued 0	Sex FEMALE	
			Date of Birth [REDACTED]	Race WHITE	
		Address E12813 WEST POINT DR MERRIMAC, WI 53561 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES		
UNIT 02	INDIVIDUAL	<b>Safety Equipment</b>			
		On Duty Crash	Safety Equipment		
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
		Helmet Use	Helmet Compliance		
	Eye Protection	Tint Compliance			

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02 002	UNIT INDIVIDUAL	<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>DEPLOYED-COMBINATION</b>		
		Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</b>		
		Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #		
		Hospital		Date of Death	Time of Death		
		<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>			
		Distracted By Action <b>NOT DISTRACTED</b>					
		<b>Non Motorist</b>		Striking Unit #	Location		
		Prior Action					
		Action					
		Action Other				To/From School	
<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>		Suspected Drug Use <b>NO</b>			
Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type		Alcohol Test Results			
Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type		Drug Test Results			
Drug Type							
Individual Condition <b>APPEARED NORMAL</b>							
02 002							