

6TL0BJ1GMM  
22-09460

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 22-09460		Investigating Officer/Deputy DEPUTY J. MACASKILL	
Crash Date 09/21/2022		Crash Time 05:15 PM		Date Arrived 09/21/2022		Time Arrived 05:27 PM	
Date Notified 09/21/2022		Time Notified 05:17 PM		Total Units 03		Total Injured 01	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 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	
		Additional Information NONE	
Not Drawn to Scale			

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

ON 9/21/22 AT APPROXIMATELY 1715, UNIT 3 WAS STOPPED ON COUNTY HIGHWAY H NEAR LYNDON RD WAITING TO TURN LEFT ONTO LYNDON RD. UNIT 2 WAS STOPPED BEHIND UNIT 3. UNIT 1 WAS DRIVING WEST BOUND ON COUNTY HIGHWAY H AND CRASHED INTO THE REAR OF UNIT 2 CAUSING UNIT 2 TO CRASH INTO THE REAR OF UNIT 3. OPERATOR OF UNIT 1 STATED THERE WERE ONLY LOOKING DIRECTLY IN FRONT OF THEIR VEHICLE AND THAT IS WHY THEY DID NOT SEE THE STOPPED VEHICLES AHEAD OF THEM.

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Location

ON CTHH WB 39 FT E OF LYNDON RD IN THE TOWN OF DELLONA IN SAUK COUNTY	Latitude 43.61872926	Longitude -89.847741512
	X Coordinate 270223.1875	Y Coordinate 4833468.5
	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>03 - FRONT TO REAR</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>T-INTERSECTION</b>	
Closure Type <b>LANE CLOSURE</b>		Reasons for Closure <b>LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS</b>	
Date Initial Lane/Rd Closed <b>09/21/2022</b>	Time Initial Lane/Rd Closed <b>05:15 PM</b>		
Date All Lanes Open <b>09/21/2022</b>	Time All Lanes Open <b>06:05 PM</b>	Date Scene Cleared <b>09/21/2022</b>	Time Scene Cleared <b>06:05 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>AUTOMOBILE</b>	
	Vehicle Type <b>PASSENGER CAR</b>				Operating As Endorsements	
	Total Occs <b>3</b>	Train/Bus # Recorded	Total # Citations Issued <b>1</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>YES</b>	Direction Of Travel <b>WESTBOUND</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>NO CONTROL</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>ALC1970</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>1C3CDZAB5CN290365</b>	Make <b>DODGE</b>	Year <b>2012</b>	Model <b>AVENGER</b>

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

UNIT VEHICLE	Color <b>GRY - GRAY</b>	Body Style <b>SD - SEDAN</b>	Bus Use
	Initial Contact Point <b>12 - FRONT</b>	Vehicle Damage <b>01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT</b>	
	Extent Of Damage <b>DISABLING DAMAGE</b>	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>	Vehicle Removed By <b>PLATTS WRECKER</b>
	What Driver Was Doing <b>GOING STRAIGHT</b>	Driver Prior Action Other	Vehicle Factors <b>NOT APPLICABLE</b>
	Driver Actions <b>OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER, LOOKED BUT DID NOT SEE</b>		
01	01	Owner Name <b>DAVID W CUNNINGHAM (608) 547-3387</b>	Owner Address <b>S1413 COON BLUFF RD WISCONSIN DELLS, WI 53965 , US</b>
<b>Sequence Of Events</b>			
01	01	Event <b>MOTOR VEH IN TRANSPORT</b>	
02	02	Event	
03	03	Event	
04	04	Event	
<b>Policy Holder</b>			
01	01	Insurance Company <b>STATE-FARM-GENERAL-INS-CO</b>	Individual <b>DAVID CUNNINGHAM</b>
<b>Individual</b>			
UNIT INDIVIDUAL	Driver <b>AUSTIN DAVID CUNNINGHAM (608) 547-3387</b>	Citations Issued <b>1</b>	Sex <b>MALE</b>
		Date of Birth <b>[REDACTED]</b>	Race <b>WHITE</b>
	Address <b>S1413 COON BLUFF RD WISCONSIN DELLS, WI 53965 , US</b>	Driver License Number <b>[REDACTED]</b> <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
<b>Safety Equipment</b>			
	On Duty Crash	Safety Equipment	
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>SHOULDER &amp; LAP BELT</b>
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
01	001	Injury Severity <b>Injury NO APPARENT INJURY</b>	Airbag <b>DEPLOYED-FRONT</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 <b>[REDACTED]</b>
			EMS Run#

WISCONSIN MOTOR VEHICLE CRASH REPORT

UNIT INDIVIDUAL	Hospital		Date of Death		Time of Death	
	<b>Distracted By</b> Distracted By Source NOT APPLICABLE (NOT DISTRACTED)					
	Distracted By Action NOT DISTRACTED					
	<b>Non Motorist</b>		Striking Unit #		Location	
	Prior Action					
	Action					
	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	
01 001	Drug Type					
	Individual Condition APPEARED NORMAL					
	<b>Individual</b>					
	Passenger TYE DAVID BARNEY			Citations Issued 0	Sex MALE	
				Date of Birth [REDACTED]	Race WHITE	
	Address S740 COON BLUFF RD WISCONSIN DELLS, WI 53965 , US			Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES		
	<b>Safety Equipment</b>		On Duty Crash		Safety Equipment	
	Row 02 - SECOND ROW	Seat Position 09 - RIGHT	SHOULDER & LAP BELT			
	Helmet Use			Helmet Compliance		
	Eye Protection			Tint Compliance		
01 002	<b>Injury</b>		Injury Severity NO APPARENT INJURY		Airbag DEPLOYED-FRONT	
	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  
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UNIT INDIVIDUAL	<b>Distracted By</b> Distracted By Source	
	Distracted By Action	
	<b>Non Motorist</b>	Striking Unit # Location
	Prior Action	
	Action	
	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 INDIVIDUAL	<b>Individual</b>	
	Passenger LOGAN D CUNNINGHAM (608) 547-3387	Citations Issued 0 Sex MALE
	Date of Birth [REDACTED]	Race WHITE
	Address S1413 COON BLUFF RD WISCONSIN DELLS, WI 53965 , US	Driver License Number
UNIT INDIVIDUAL	<b>Safety Equipment</b>	
	On Duty Crash	Safety Equipment SHOULDER & LAP BELT
	Row 01 - FRONT ROW	Seat Position 09 - RIGHT
	Helmet Use	Helmet Compliance
	Eye Protection	Tint Compliance
UNIT INDIVIDUAL	<b>Injury</b>	
	Injury Severity NO APPARENT INJURY	Airbag DEPLOYED-FRONT
	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	
UNIT INDIVIDUAL	<b>Distracted By</b> Distracted By Source	

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<b>UNIT</b>	Distracted By Action					
	<b>INDIVIDUAL</b>	<b>Non Motorist</b>		Striking Unit #		
		Location				
	Prior Action					
	Action					
	Action Other			To/From School		
	<b>01</b>	<b>003</b>	<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>						
<b>01</b>	<b>Violations</b>					
	UTC Number <b>BD755044</b>	Issue To? <b>001</b>	Statute Number <b>346.89(1)</b>	Description <b>INATTENTIVE DRIVING</b>		

### Unit Summary

<b>UNIT</b>	<b>02</b>	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>			
		Vehicle Type <b>PASSENGER CAR</b>				Operating As Endorsements			
		Total Occs <b>1</b>		Train/Bus # Recorded		Total # Citations Issued <b>0</b>		Total Trailers <b>0</b>	
		Total HazMat Types <b>0</b>		Insurance? <b>YES</b>		Direction Of Travel <b>WESTBOUND</b>		<input 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>NO CONTROL</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>							
		<b>02</b>	<b>02</b>	<b>Vehicle</b>					
License Plate Number <b>419AKY</b>				Plate Type <b>AUT - AUTOMOBILE</b>		St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>		
Vehicle Identification Number <b>1G1ZJ57B38F246308</b>				Make <b>CHEVROLET</b>		Year <b>2008</b>	Model <b>MALIBU 2LT</b>		
Color <b>RED - RED</b>				Body Style <b>4D - 4DR</b>		Bus Use			

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UNIT VEHICLE	Initial Contact Point <b>06 - REAR</b>		Vehicle Damage <b>01 - RIGHT FRONT CORNER, 04 - RIGHT SIDE REAR, 05 - RIGHT REAR CORNER, 06 - REAR, 07 - LEFT REAR CORNER, 08 - LEFT SIDE REAR, 11 - LEFT FR</b>		
	Extent Of Damage <b>DISABLING DAMAGE</b>				
	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>PLATTS WRECKER</b>		
	What Driver Was Doing <b>STOP IN TRAFFIC</b>		Vehicle Factors <b>NOT APPLICABLE</b>		
UNIT VEHICLE	Driver Prior Action Other				
	Driver Actions <b>NO CONTRIBUTING ACTION</b>				
02 02	Owner Name <b>DIANE M FLETCHER (608) 393-8613</b>		Owner Address <b>N799 JORDAN RD WISCONSIN DELLS, WI 53965 , US</b>		
	<b>Sequence Of Events</b>				
02 01	Event <b>MOTOR VEH IN TRANSPORT</b>				
	Event <b>MOTOR VEH IN TRANSPORT</b>				
	Event				
	Event				
04 03	<b>Policy Holder</b>				
	Insurance Company <b>ALLSTATE-INS-CO</b>		Individual <b>DIANE FLETCHER</b>		
04 02	<b>Individual</b>				
	Driver <b>DIANE M FLETCHER (608) 393-8613</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>	
			Date of Birth [REDACTED]	Race <b>WHITE</b>	
	Address <b>N799 JORDAN RD WISCONSIN DELLS, WI 53965 , US</b>		Driver License Number [REDACTED] <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
02 004	<b>Safety Equipment</b>		On Duty Crash		
			Safety Equipment <b>SHOULDER &amp; LAP BELT</b>		
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>			
	Helmet Use		Helmet Compliance		
	Eye Protection		Tint Compliance		
02 004	<b>Injury</b>		Injury Severity <b>SUSPECTED MINOR INJURY</b>		Airbag <b>NON DEPLOYED</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

WISCONSIN MOTOR VEHICLE  
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<b>UNIT</b> <b>INDIVIDUAL</b>       <b>02</b> <b>004</b>	<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>		

**Unit Summary**

<b>UNIT</b>       <b>03</b>	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>AUTOMOBILE</b>	
	Vehicle Type <b>PASSENGER CAR</b>	Operating As Endorsements		
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>
	Insurance? <b>YES</b>	Direction Of Travel <b>WESTBOUND</b>	<input type="checkbox"/> <b>Pre Crash Tire Mark</b>	Total HazMat Types <b>0</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>NO CONTROL</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>03</b> <b>03</b>	License Plate Number <b>AGU5308</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>JTMBF4DV5BD042969</b>	Make <b>TOYOTA</b>	Year <b>2011</b>	Model <b>RAV4</b>
	Color <b>BLK - BLACK</b>	Body Style <b>UT - SPORT UTILITY VEHICLE</b>	Bus Use	
	Initial Contact Point <b>07 - LEFT REAR CORNER</b>			



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UNIT VEHICLE	Vehicle Damage		7 8 9 10 11 5 4 3 2 1	
	Extent Of Damage <b>MINOR DAMAGE</b>			06 - REAR, 07 - LEFT REAR CORNER, 08 - LEFT SIDE REAR
	Towed Due To Damage <b>NOT TOWED</b>			Vehicle Removed By <b>OPERATOR</b>
	What Driver Was Doing <b>STOP IN TRAFFIC</b>			Vehicle Factors
UNIT VEHICLE	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
	Owner Name <b>JAYSON P PETTIT (608) 434-5152</b>		Owner Address <b>40 BAYER LN WISCONSIN DELLS, WI 53965 , US</b>	
	<b>Sequence Of Events</b>			
UNIT VEHICLE	Event <b>MOTOR VEH IN TRANSPORT</b>			
	Event			
	Event			
	Event			
UNIT VEHICLE	<b>Policy Holder</b>			
	Insurance Company <b>PROGRESSIVE-CASUALTY-INS-CO</b>	Individual <b>JAYSON PETTIT</b>		
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>JAXON DANIEL MANGSETH PETTIT (608) 434-5152</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>	
		Date of Birth [REDACTED]	Race <b>WHITE</b>	
	Address <b>40 BAYER LN WISCONSIN DELLS, WI 53965 , US</b>	Driver License Number [REDACTED] <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
UNIT INDIVIDUAL	<b>Safety Equipment</b>		On Duty Crash	
	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>			
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>		
	Helmet Use		Helmet Compliance	
Eye Protection		Tint Compliance		
UNIT INDIVIDUAL	<b>Injury</b>		Airbag	
	<b>NO APPARENT INJURY</b>		<b>NON DEPLOYED</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	
Hospital		Date of Death	EMS Run#	
		Time of Death		

WISCONSIN MOTOR VEHICLE  
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<b>UNIT</b> <b>INDIVIDUAL</b>       <b>03</b> <b>005</b>	<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>		