

6TL0D2XVQT
23-03451



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 23-03451	Investigating Officer/Deputy DEPUTY B. SCHLOUGH	
Crash Date 04/10/2023		Crash Time 11:21 AM	Date Arrived 04/10/2023	Time Arrived 11:21 AM	
Date Notified 04/10/2023		Time Notified 11:21 AM	Total Units 02	Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure	<input checked="" 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

<p>Diagram</p>  <p style="text-align: center;">STH 23</p>  <p>HWT DEPT UNIT</p> <p style="text-align: center;">DRAWING NOT TO SCALE</p>	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 WAS TRAVELING SLOWLY W/B ON STH 23 WORKING FOR THE HIGHWAY DEPT. UNIT 2 HAD WENT AROUND ANOTHER HIGHWAY DEPT UNIT AND HAD TO PULL IN BEHIND UNIT 1 DUE TO A E/B VEHICLE APPROACHING. UNIT 2 CAME TO A STOP BEHIND UNIT 1. OPERATOR OF UNIT 1 THOUGHT UNIT 2 HAD COMPLETED THE PASS AROUND UNIT 1. OPERATOR OF UNIT 1 PROCEEDED TO BACK UP TO PACK DOWN ROAD PATCH. OPERATOR OF UNIT 1 DIDN'T OBSERVE UNIT 2 STOPPED BEHIND HIM AND BACKED INTO UNIT 2. BOTH UNITS CAME TO REST ON THE ROADWAY FACING W/B.

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Location

ON STH23 WB 418 FT N OF HICKORY RD IN THE TOWN OF FRANKLIN IN SAUK COUNTY	Latitude 43.334025457	Longitude -90.062249668
	X Coordinate 251750.34375	Y Coordinate 4802463.5
	Structure Type	

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		WORK ZONE (CONSTRUCTION/MAINTENANCE/UTILITY)	
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	
Work Zone Crash Location ACTIVITY AREA		Work Zone Crash Type INTERMITTENT OR MOVING WORK	
Workers Present YES		Law Enforcement Present NO	
Work Zone Speed Limit 55	Advisory/Regulatory Speed Limit REGULATORY	Normal Posted Speed Limit 55	

Unit Summary

UNIT	Unit Status IN TRANSIT	Vehicle Operating As Classification B CLASS		Unit Type TRUCK		
	Vehicle Type STRAIGHT TRUCK (INSERT TRUCK)	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 WESTBOUND	<input 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 C14396		Plate Type MUN - MUNICIPAL	St WI	Country of Issuance UNITED STATES
01	Vehicle Identification Number 3HAEDTAR9LL162155		Make INTERNATIONAL	Year 2020	Model HV507	

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UNIT VEHICLE	Color ONG - ORANGE	Body Style TK - TRUCK	Bus Use
	Initial Contact Point 06 - REAR	Vehicle Damage	
	Extent Of Damage NO DAMAGE	00 - NO DAMAGE	
	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR	
	What Driver Was Doing BACKING	Vehicle Factors	
Driver Prior Action Other	NOT APPLICABLE		
Driver Actions NO CONTRIBUTING ACTION			
01	01	Owner Name SAUK COUNTY HIGHWAY DEPARTMENT (608) 355-4855	Owner Address 620 LINN ST PO BOX 26 BARABOO, WI 53913 , US
Sequence Of Events			
01	01	Event MOTOR VEH IN TRANSPORT	
02	02	Event	
03	03	Event	
04	04	Event	
UNIT	Policy Holder		
	Insurance Company WISCONSIN-COUNTY-MUTUAL-INS-CORP	Government SAUK COUNTY HIGHWAY DEPARTMENT	
UNIT	Individual		
UNIT INDIVIDUAL	Driver THOMAS BRENNAN (608) 495-3608	Citations Issued 0	Sex MALE
		Date of Birth	Race WHITE
	Address E2968 HICKORY GLEN RD HILLPOINT, WI 53937 , US	Driver License Number 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
	Eye Protection		Tint Compliance
01	001	Injury	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 #

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UNIT	Hospital		Date of Death		Time of Death	
	Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)			
	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					
	Individual Condition APPEARED NORMAL					
	Carrier					
	<input type="checkbox"/> Use Vehicle Owner Same as Carrier			Source VEHICLE-SIDE		
	Name SAUK COUNTY HIGHWAY DEPARTMENT			Address 620 LINN ST PO BOX 26 BARABOO, WI 53913 , US		
GVWR MORE THAN 26,000 LB		Vehicle Configuration SINGLE-UNIT TRUCK (2-AXLE AND GVWR MORE THA		Cargo Body Type DUMP		
US DOT #		Carrier Type NOT IN COMMERCE/GOVERNMENT		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		

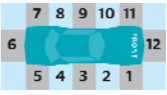
UNIT	Unit Summary					
	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR				Operating As Endorsements	
	Total Occs 2	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2	

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UN	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 NO			
02	Vehicle			
	License Plate Number 770BHN		Plate Type AUT - AUTOMOBILE	St WI
	Country of Issuance UNITED STATES		Year 2011	Model FOCUS SE
	Vehicle Identification Number 1FAHP3FNXBW143675		Make FORD	Bus Use
	Color RED - RED		Body Style 4D - 4DR	
	Initial Contact Point 12 - FRONT		Vehicle Damage	
	Extent Of Damage FUNCTIONAL DAMAGE		12 - FRONT	
				
	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
	What Driver Was Doing SLOW/STOPPING		Vehicle Factors	
Driver Prior Action Other		NOT APPLICABLE		
UNIT	Driver Actions NO CONTRIBUTING ACTION			
	Owner Name MARLA FEINER (608) 546-2414		Owner Address 1645 HONEY CREEK DR PLAIN, WI 53577 , US	
	Sequence Of Events			
01	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
	Event			
02	Event			
	Event			
03	Event			
	Event			
04	Event			
	Event			
UNIT	Policy Holder			
	Insurance Company GERMANTOWN-MUTUAL-INS-CO		Individual MARLA FEINER	
INDIVIDUAL	Individual			
	Driver JOHN MICHAEL FEINER (608) 546-2414		Citations Issued 0	Sex MALE
	Date of Birth		Race WHITE	
Address 1645 HONEY CREEK DR PLAIN, WI 53577 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		

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02	002	Safety Equipment		On Duty Crash	Safety Equipment
		Row	Seat Position	SHOULDER & LAP BELT	
		01 - FRONT ROW	07 - LEFT		
		Helmet Use		Helmet Compliance	
		Eye Protection		Tint Compliance	
		Injury		Injury Severity	Airbag
				NO APPARENT INJURY	NON DEPLOYED
		Ejected	Ejection Path	Trapped/Extricated	
		NOT EJECTED	NOT EJECTED/NOT APPLICABLE	NOT TRAPPED	
		Medical Transport		EMS Agency Identifier	EMS Run #
NOT TRANSPORTED					
Hospital		Date of Death	Time of Death		
Distracted By		Distracted By Source			
		NOT APPLICABLE (NOT DISTRACTED)			
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		
		NO	NO		
Alcohol Test Given	Alcohol Test Type	Alcohol Test Results			
TEST NOT GIVEN					
Drug Test Given	Drug Test Type	Drug Test Results			
TEST NOT GIVEN					
Drug Type					
Individual Condition					
APPEARED NORMAL					
Individual					
02	002	Passenger	Citations Issued	Sex	
		MARLA DAWN FEINER	0	FEMALE	
		(608) 546-2414	Date of Birth	Race	
Address		Driver License Number			
1645 HONEY CREEK DR		STATE: WISCONSIN COUNTRY: UNITED STATES			
PLAIN, WI 53577 , US					
Safety Equipment		On Duty Crash			

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02	003	Safety Equipment		SHOULDER & LAP BELT		
		Row	Seat Position			
		01 - FRONT ROW	09 - RIGHT			
		Helmet Use		Helmet Compliance		
		Eye Protection		Tint Compliance		
		Injury		Injury Severity	Airbag	
				NO APPARENT INJURY	NON DEPLOYED	
		Ejected		Ejection Path	Trapped/Extricated	
		NOT EJECTED		NOT EJECTED/NOT APPLICABLE	NOT TRAPPED	
		Medical Transport		EMS Agency Identifier	EMS Run #	
		NOT TRANSPORTED				
		Hospital		Date of Death	Time of Death	
		Distracted By		Distracted By Source		
Distracted By Action						
Non Motorist		Striking Unit #	Location			
Prior Action						
Action						
Action Other				To/From School		
Drug & Alcohol		Suspected Alcohol Use	Suspected Drug Use			
		NO	NO			
Alcohol Test Given		Alcohol Test Type		Alcohol Test Results		
TEST NOT GIVEN						
Drug Test Given		Drug Test Type	Drug Test Results			
TEST NOT GIVEN						
Drug Type						
Individual Condition						
		APPEARED NORMAL				