

6TL0DJJ8WP  
23-06472


# 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 <b>23-06472</b>	Investigating Officer/Deputy <b>DEPUTY J. TROTH</b>	
Crash Date <b>06/21/2023</b>		Crash Time <b>11:30 AM</b>	Date Arrived <b>06/21/2023</b>	Time Arrived <b>05:00 PM</b>	
Date Notified <b>06/21/2023</b>		Time Notified <b>05:00 PM</b>	Total Units <b>02</b>	Total Injured <b>00</b>	Total Killed <b>00</b>
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input 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 <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

## Description

Diagram  <hr/>  <hr/>  <hr/>  <hr/>  <div style="text-align: center;">  <p>Hwy 113 South Bound at the Merrimac Ferry Crossing</p> </div> <hr/>  <hr/>	Reconstruction By
	Photos By
	Additional Information <b>NONE</b>

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

BEN OLDAKOWSKI WAS STOPPED AT THE STOP SIGN ON HWY 113 SOUTH BOUND AT THE MERRIMAC FERRY CROSSING WAITING ON THE FERRY.. BEN DECIDED TO LEAVE. BEN BACKED HIS VEHICLE UP AND STRUCK THE VEHICLE BEHIND HIM BEING DRIVEN BY SCOTT STEEL. MINOR DAMAGE. NO INJURIES REPORTED.

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Location

ON STH113 SB 259 FT S OF PALISADE ST IN THE VILLAGE OF MERRIMAC IN SAUK COUNTY	Latitude <b>43.371163784</b>	Longitude <b>-89.627261211</b>
	X Coordinate <b>287145.375</b>	Y Coordinate <b>4805386</b>
	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>PARTIAL CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>

Unit Summary

<b>UNIT</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>1</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>YES</b>	Direction Of Travel <b>SOUTHBOUND</b>	<input type="checkbox"/> <b>Pre CrashTire Mark</b>	Speed Limit <b>05</b>	Total Lanes <b>5</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>DIVIDED HWY W/TRAFFIC BARRIER</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>				

<b>UNIT</b>	<b>VEHICLE</b>	<b>Vehicle</b>			
		License Plate Number <b>ALV9327</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>2G4WE587161164473</b>	Make <b>BUICK</b>	Year <b>2006</b>	Model <b>LACROSSE</b>
		Color <b>RED - RED</b>	Body Style <b>SD - SEDAN</b>		Bus Use
		Initial Contact Point <b>06 - REAR</b>	Vehicle Damage <b>05 - RIGHT REAR CORNER, 06 - REAR, 07 - LEFT REAR CORNER</b>		
		Extent Of Damage <b>MINOR DAMAGE</b>			



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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By	
	What Driver Was Doing <b>BACKING</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>UNSAFE BACKING</b>			
01 01	Owner Name <b>BEN OLDAKOWSKI (608) 504-2325</b>		Owner Address <b>8135 CRYSTAL LAKE RD LODI, WI 53555 , US</b>	
	<b>Sequence Of Events</b>			
01 01	01	Event <b>MOTOR VEH IN TRANSPORT</b>		
	02	Event		
	03	Event		
	04	Event		
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>CENTURY-NATIONAL-INS-CO</b>		Individual <b>BEN OLDAKOWSKI</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>BEN OLDAKOWSKI (608) 504-2325</b>		Citations Issued <b>1</b>	Sex <b>MALE</b>
	Address <b>8135 CRYSTAL LAKE RD LODI, WI 53555 , US</b>		Date of Birth	Race <b>WHITE</b>
	Driver License Number		<b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01 001	<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		Airbag	
	<b>Injury</b>		Injury Severity <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	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>				

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UNIT	INDIVIDUAL	<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>					
	01	001	<b>Violations</b>			
UTC Number <b>B1588000</b>			Issue To? <b>001</b>	Statute Number <b>346.87</b>	Description <b>UNSAFE BACKING OF VEHICLE</b>	

Unit Summary

UNIT	02	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>TRUCK</b>							
		Vehicle Type <b>(SPORT) UTILITY VEHICLE</b>				Operating As Endorsements							
		Total Occs <b>2</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>SOUTHBOUND</b>		<input type="checkbox"/> <b>Pre Crash Tire Mark</b>		Speed Limit <b>50</b>		Total Lanes <b>5</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>DIVIDED HWY W/TRAFFIC BARRIER</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>											

02	02	<b>Vehicle</b>							
		License Plate Number <b>50242DS</b>		Plate Type <b>DIS - DISABLED</b>		St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>		
		Vehicle Identification Number <b>2GKALUEK7D6164036</b>		Make <b>GENERAL MOTORS COR</b>		Year <b>2013</b>	Model <b>TERRAIN</b>		
		Color <b>BGE - BEIGE</b>		Body Style <b>UT - SPORT UTILITY VEHICLE</b>			Bus Use		
		Initial Contact Point <b>12 - FRONT</b>							



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UNIT VEHICLE	Vehicle Damage	
	01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT	
	Extent Of Damage <b>MINOR DAMAGE</b>	
	Towed Due To Damage <b>NOT TOWED</b>	
UNIT VEHICLE	Vehicle Removed By	
	What Driver Was Doing <b>STOP IN TRAFFIC</b>	
	Vehicle Factors	
	Driver Prior Action Other <b>NOT APPLICABLE</b>	
UNIT VEHICLE	Driver Actions <b>NO CONTRIBUTING ACTION</b>	
	Owner Name <b>JUDITH PAGENKOP (608) 354-3710</b>	Owner Address <b>5974 RIVER RD WAUNAKEE, WI 53597 , 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>STATE-FARM-GENERAL-INS-CO</b>	Individual <b>JUDITH PAGENKOP</b>
UNIT INDIVIDUAL	<b>Individual</b>	
	Driver <b>SCOTT STEEL (608) 354-3710</b>	Citations Issued <b>0</b>
		Sex <b>MALE</b>
		Date of Birth <b>WHITE</b>
UNIT INDIVIDUAL	Address <b>5974 RIVER RD WAUNAKEE, WI 53597 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>
	<b>Safety Equipment</b>	
UNIT INDIVIDUAL	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		
UNIT INDIVIDUAL	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>
	Airbag <b>NON DEPLOYED</b>	
UNIT INDIVIDUAL	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

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UNIT	INDIVIDUAL	<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	INDIVIDUAL	<b>Individual</b>	
		Passenger <b>JUDITH PAGENKOP (772) 538-3875</b>	Citations Issued <b>0</b> Sex <b>FEMALE</b>
			Date of Birth Race <b>WHITE</b>
		Address <b>5974 RIVER RD WAUNAKEE, WI 53597 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>
		<b>Safety Equipment</b>	On Duty Crash Safety Equipment <b>SHOULDER &amp; LAP BELT</b>
		Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</b>
		Helmet Use Helmet Compliance	
		Eye Protection Tint Compliance	
		<b>Injury</b>	Injury Severity <b>NO APPARENT 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		
UNIT	INDIVIDUAL	<b>Distracted By</b> Distracted By Source	

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UNIT	Distracted By Action			
	<b>Non Motorist</b>	Striking Unit #	Location	
		Prior Action		
	<b>INDIVIDUAL</b>	Action		
		Action Other		To/From School
		<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use	Suspected Drug Use
			<b>NO</b>	<b>NO</b>
	02 003	Alcohol Test Given	Alcohol Test Type	Alcohol Test Results
		<b>TEST NOT GIVEN</b>		
		Drug Test Given	Drug Test Type	Drug Test Results
<b>TEST NOT GIVEN</b>				
Drug Type				
Individual Condition				
<b>APPEARED NORMAL</b>				