

6TL0BFKDJQ

Document Number Override		Primary Crash Document #		Agency Crash Number <b>23-08624</b>		Investigating Officer/Deputy <b>DEPUTY H. VOLZ</b>	
Crash Date <b>08/10/2023</b>		Crash Time <b>09:36 AM</b>		Date Arrived <b>08/10/2023</b>		Time Arrived <b>09:45 AM</b>	
Date Notified <b>08/10/2023</b>		Time Notified <b>09:38 AM</b>		Total Units <b>02</b>		Total Injured <b>03</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		Reconstruction By	
		Photos By <b>DEPUTY H VOLZ</b>	
		Additional Information <b>PHOTOS</b>	
County Highway DL			

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

UNIT 1 WAS TRAVELING DOWN THE HILL EAST BOUND ON CTH DL. UNIT 2 WAS TRAVELING UP THE HILL EB ON CTH DL. UNIT 1 LEFT HIS LANE OF TRAVEL, CROSSED THE CENTERLINE AND WENT HEAD ON INTO THE WEST BOUND LANE OF TRAFFIC. UNIT 1 STRUCK UNIT 2.

**Location**

<b>ON CTHDL NB 193 FT W OF PRIVATE INTERIOR RD IN THE TOWN OF BARABOO IN SAUK COUNTY</b>	Latitude <b>43.434542534</b>	Longitude <b>-89.736088645</b>
	X Coordinate <b>278559.21875</b>	Y Coordinate <b>4812708.5</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>02 - FRONT TO FRONT</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>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>2</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>YES</b>	Direction Of Travel <b>EASTBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>35</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>DOWNHILL</b>	
	Truck Bus or HazMat <b>NO</b>				

**Vehicle**

<b>VEHICLE</b>	License Plate Number <b>APH8820</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>JTDKN3DU0A5199855</b>	Make <b>TOYOTA</b>	Year <b>2010</b>	Model <b>PRIUS</b>
	Color <b>WHI - WHITE</b>	Body Style <b>HB - HATCHBACK</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>			



WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>CRAIGS TOWING</b>		
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors		
	Driver Prior Action Other		<b>NOT APPLICABLE</b>		
	Driver Actions <b>WRONG SIDE OR WRONG WAY, FAILED TO KEEP IN DESIGNATED LANE, OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER</b>				
01	01	Owner Name <b>TYLER BLAKNEY (608) 215-2176</b>		Owner Address <b>426 NORTH LAWN AVE # E MADISON, WI 53704 , US</b>	
		<b>Sequence Of Events</b>			
UNIT	01	Event <b>CROSS CENTERLINE</b>			
		Event <b>MOTOR VEH IN TRANSPORT</b>			
		Event			
		Event			
UNIT	01	<b>Policy Holder</b>			
		Insurance Company <b>PROGRESSIVE-MUTUAL-INS-CO-(ATTN:-AUTO-U</b>	Individual <b>TYLER BLAKNEY</b>		
UNIT	01	<b>Individual</b>			
		Driver <b>TYLER BLAKNEY (608) 215-2176</b>	Citations Issued <b>2</b>	Sex <b>MALE</b>	
		Address <b>426 NORTH LAWN AVE # E MADISON, WI 53704 , US</b>		Date of Birth	Race <b>WHITE</b>
		Driver License Number			
01	001	<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	
		<b>Injury</b>		Injury Severity <b>SUSPECTED MINOR 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		EMS Run #	
Hospital		Date of Death		Time of Death	
<b>Distracted By</b>		Distracted By Source <b>VEHICLE-INTEGRATED DEVICE</b>			
Distracted By Action <b>OTHER ACTION (LOOKING AWAY FROM TASK ETC)</b>					

WISCONSIN MOTOR VEHICLE  
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<b>UNIT</b>	<b>INDIVIDUAL</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>					
<b>01</b>	<b>001</b>	<b>Violations</b>					
		UTC Number <b>BD759044</b>	Issue To? <b>001</b>	Statute Number <b>346.05(1)</b>	Description <b>OPERATING LEFT OF CENTER</b>		
		UTC Number <b>BD759045</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>3</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>35</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>UPHILL</b>	
		Truck Bus or HazMat <b>NO</b>						

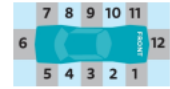
**Vehicle**

<b>02</b>	<b>02</b>	License Plate Number <b>ATF5344</b>		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>1FMCU0MN0PUA60074</b>		Make <b>FORD</b>	Year <b>2023</b>	Model <b>ECP</b>
		Color <b>GRY - GRAY</b>		Body Style <b>4H - HATCHBACK 4 DOOR</b>		Bus Use

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23-08624

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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



UNIT VEHICLE	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>CRAIGS TOWING</b>	
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
UNIT VEHICLE	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
	Owner Name <b>TRACY PELKY (715) 326-1331</b>		Owner Address <b>1832 FLOWING BROOK CT PLOVER, WI 54467 , US</b>	
UNIT 02	<b>Sequence Of Events</b>			
	01	Event <b>MOTOR VEH IN TRANSPORT</b>		
	02	Event		
	03	Event		
	04	Event		
UNIT 02	<b>Policy Holder</b>			
	Insurance Company <b>RURAL-MUTUAL-INS-CO-(ATTN:-CLAIMS-DEPT)</b>		Individual <b>TRACY PELKY</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>TRACY PELKY (715) 326-1331</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
	Address <b>1832 FLOWING BROOK CT PLOVER, WI 54467 , US</b>		Date of Birth	Race <b>WHITE</b>
			Driver License Number	
UNIT 02	<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	
	<b>Injury</b>		Airbag	
	<b>NO APPARENT INJURY</b>		<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	

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT	<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	
02	Individual Condition <b>APPEARED NORMAL</b>	
	<b>Individual</b>	
	Passenger <b>KATHLEEN PELKY</b>	Citations Issued <b>0</b> Sex <b>FEMALE</b>
		Date of Birth Race <b>WHITE</b>
	Address <b>1832 FLOWING BROOK CT PLOVER, WI 54467 , US</b>	
	Driver License Number	
	<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
02	<b>Injury</b> Injury Severity <b>SUSPECTED MINOR 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	

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT	Distracted By Action				
	<b>Non Motorist</b>	Striking Unit #	Location		
		Prior Action			
	<b>INDIVIDUAL</b>	Action			
		Action Other			
		To/From School			
		Distracted By Action			
	02	003	<b>Drug &amp; Alcohol</b>		
			Suspected Alcohol Use	Suspected Drug Use	
			Alcohol Test Given	Alcohol Test Type	Alcohol Test Results
Drug Test Given			Drug Test Type	Drug Test Results	
Drug Type					
Individual Condition					
<b>APPEARED NORMAL</b>					
<b>Individual</b>					
Passenger			Citations Issued	Sex	
BROOKE PELKY (715) 544-9179			0	FEMALE	
Address		Date of Birth	Race		
3721 PATTI DR PLOVER, WI 54467 , US			WHITE		
Driver License Number					
UNIT	INDIVIDUAL	<b>Safety Equipment</b>			
		On Duty Crash	Safety Equipment		
		Row	Seat Position	<b>SHOULDER &amp; LAP BELT</b>	
		02 - SECOND ROW	07 - LEFT		
		Helmet Use	Helmet Compliance		
		Eye Protection	Tint Compliance		
		02	004	<b>Injury</b>	
				Injury Severity	Airbag
				SUSPECTED MINOR INJURY	NON DEPLOYED
				Ejected	Ejection Path
NOT EJECTED	NOT EJECTED/NOT APPLICABLE			NOT TRAPPED	
Medical Transport	EMS Agency Identifier			EMS Run #	
NOT TRANSPORTED					
Hospital	Date of Death			Time of Death	
<b>Distracted By</b>					
Distracted By Source					
Distracted By Action					

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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>					
	02	004				