

6TL0BFKDJR  
23-09026

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

6TL0BFKDJR

Document Number Override		Primary Crash Document #		Agency Crash Number <b>23-09026</b>		Investigating Officer/Deputy <b>DEPUTY H. VOLZ</b>	
Crash Date <b>08/19/2023</b>		Crash Time <b>01:20 PM</b>		Date Arrived <b>08/19/2023</b>		Time Arrived <b>01:39 PM</b>	
Date Notified <b>08/19/2023</b>		Time Notified <b>01:25 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		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.

UNIT 1 WAS TRAVELING NB ON STH 113. UNIT 2 WAS STOPPED AT THE STOP SIGN ON SOUTH LAKE ROAD AT STH 113. UNIT 2 ATTEMPTED TO TURN LEFT ONTO SOUTH LAKE ROAD FROM STH 113 AND STRUCK STOPPED UNIT 2.

**Location**

ON S LAKE RD 29 FT W OF STH113 NB IN THE TOWN OF MERRIMAC IN SAUK COUNTY	Latitude <b>43.409184713</b>	Longitude <b>-89.675063338</b>
	X Coordinate <b>283407.9375</b>	Y Coordinate <b>4809731.5</b>
	Structure Type <b>NO STRUCTURE</b>	

**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>INTERSECTION</b>	Intersection Type <b>T-INTERSECTION</b>

**Unit Summary**

<b>UNIT</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>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>NORTHBOUND</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>UPHILL</b>	
	Truck Bus or HazMat <b>NO</b>				

**Vehicle**

<b>UNIT</b>	<b>01</b>	<b>VEHICLE</b>	License Plate Number <b>635535</b>	Plate Type <b>LTK - LIGHT TRUCK</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
			Vehicle Identification Number <b>2GCVKPEC3K1106896</b>	Make <b>CHEVROLET</b>	Year <b>2019</b>	Model <b>SILVERADO</b>
			Color <b>BLU - BLUE</b>	Body Style <b>PK - PICKUP</b>		Bus Use
			Initial Contact Point <b>11 - LEFT FRONT CORNER</b>	Vehicle Damage <b>10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT</b>		
			Extent Of Damage <b>DISABLING DAMAGE</b>			



WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT VEHICLE	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>CRAIGS TOWING</b>	
	What Driver Was Doing <b>LEFT TURN</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>IMPROPER TURN</b>			
01 01	Owner Name <b>DENNIS MOLDENHAUER</b>		Owner Address <b>604 WESTERN AVE WATERTOWN, WI 53094 , US</b>	
	<b>Sequence Of Events</b>			
01 01	01	Event <b>MOTOR VEH IN TRANSPORT</b>		
	02	Event <b>LEFT TURN</b>		
	03	Event <b>PARKED MOTOR VEHICLE</b>		
	04	Event		
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>GRINNELL-MUTUAL-REINSURANCE-CO</b>		Individual <b>DENNIS MOLDENHAUER</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>DENNIS MOLDENHAUER</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
	Address <b>604 WESTERN AVE WATERTOWN, WI 53094 , US</b>		Date of Birth	Race <b>WHITE</b>
	Driver License Number			
01 001	<b>Safety Equipment</b>		On Duty Crash	
	Row <b>01 - FRONT ROW</b>		Seat Position <b>07 - LEFT</b>	
	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>		Helmet Compliance	
	Helmet Use		Tint Compliance	
Eye Protection				
<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
<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>		
<b>Distracted By Action</b>		<b>NOT DISTRACTED</b>		

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>						
		UNIT	INDIVIDUAL	<b>Individual</b>				
Passenger <b>YVONNE MOLDENHAUER</b>	Citations Issued <b>0</b>			Sex <b>FEMALE</b>				
Date of Birth				Race <b>WHITE</b>				
Address <b>604 WESTERN AVE WATERTOWN, WI 53094 , US</b>				Driver License Number				
<b>Safety Equipment</b>				On Duty Crash	Safety Equipment			
Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</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>		
		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				
		Distracted By Action						
		<b>Non Motorist</b>		Striking Unit #	Location			

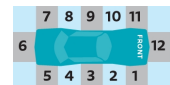
UNIT	INDIVIDUAL	Prior Action				
		Action				
		Action Other		To/From School		
	01	002	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
			Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type		Alcohol Test Results
			Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results	
			Drug Type			
			Individual Condition <b>APPEARED NORMAL</b>			

**Unit Summary**

UNIT	02	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>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>EASTBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>N/A</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>YES</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**

UNIT	VEHICLE	02	02	License Plate Number <b>236375</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
				Vehicle Identification Number <b>GAN6UH197293G</b>	Make <b>MG</b>	Year <b>1977</b>	Model <b>MIDGET</b>
				Color <b>RED - RED</b>	Body Style <b>CV - CONVERTIBLE</b>		Bus Use
				Initial Contact Point <b>11 - LEFT FRONT CORNER</b>	Vehicle Damage <b>10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT</b>		
				Extent Of Damage <b>FUNCTIONAL DAMAGE</b>			
				Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OWNER</b>		
				What Driver Was Doing <b>SLOW/STOPPING</b>			



WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT VEHICLE	Driver Prior Action Other		Vehicle Factors	
			NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
02	Owner Name GENE DALHOFF		Owner Address E12606 CLINGMANS RD BARABOO, WI 53913 , US	
	<b>Sequence Of Events</b>			
01	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
02	Event			
	Event			
03	Event			
	Event			
04	Event			
	Event			
UNIT	<b>Policy Holder</b>			
	Insurance Company AMERICAN-FAMILY-INS-CO		Individual GENE DALHOFF	
UNIT	<b>Individual</b>			
	Driver GENE DALHOFF		Citations Issued 0	Sex MALE
INDIVIDUAL	Date of Birth		Race WHITE	
	Address E12606 CLINGMANS RD BARABOO, WI 53913 , US		Driver License Number	
02	<b>Safety Equipment</b>		On Duty Crash	
	Row 01 - FRONT ROW		Seat Position 07 - LEFT	Safety Equipment SHOULDER & LAP BELT
003	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
003	<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 NOT DISTRACTED				
<b>Non Motorist</b>		Striking Unit #	Location	

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT	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>		
02	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>		
003	Drug Type		
	Individual Condition		
<b>APPEARED NORMAL</b>			
<b>Individual</b>			
UNIT	Passenger	Citations Issued	Sex
	<b>CHRISTOPHER DALHOFF</b>	<b>0</b>	<b>MALE</b>
	Address	Date of Birth	Race
	<b>S76W14851 ROGER DR MUSKEGO, WI 53150 , US</b>		<b>WHITE</b>
02	Driver License Number		
	<b>Safety Equipment</b> On Duty Crash	Safety Equipment	
	Row	Seat Position	<b>SHOULDER &amp; LAP BELT</b>
	<b>01 - FRONT ROW</b>	<b>09 - RIGHT</b>	
Helmet Use	Helmet Compliance		
Eye Protection	Tint Compliance		
004	<b>Injury</b> Injury Severity	Airbag	
	<b>NO APPARENT INJURY</b>	<b>NON DEPLOYED</b>	
	Ejected	Ejection Path	Trapped/Extricated
	<b>NOT EJECTED</b>	<b>NOT EJECTED/NOT APPLICABLE</b>	<b>NOT TRAPPED</b>
Medical Transport	EMS Agency Identifier	EMS Run #	
<b>NOT TRANSPORTED</b>			
Hospital	Date of Death	Time of Death	
<b>Distracted By</b> Distracted By Source			
Distracted By Action			
<b>Non Motorist</b> Striking Unit #	Location		
Prior Action			

UNIT	INDIVIDUAL	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				