

6TL0DCL4JT
23-09146

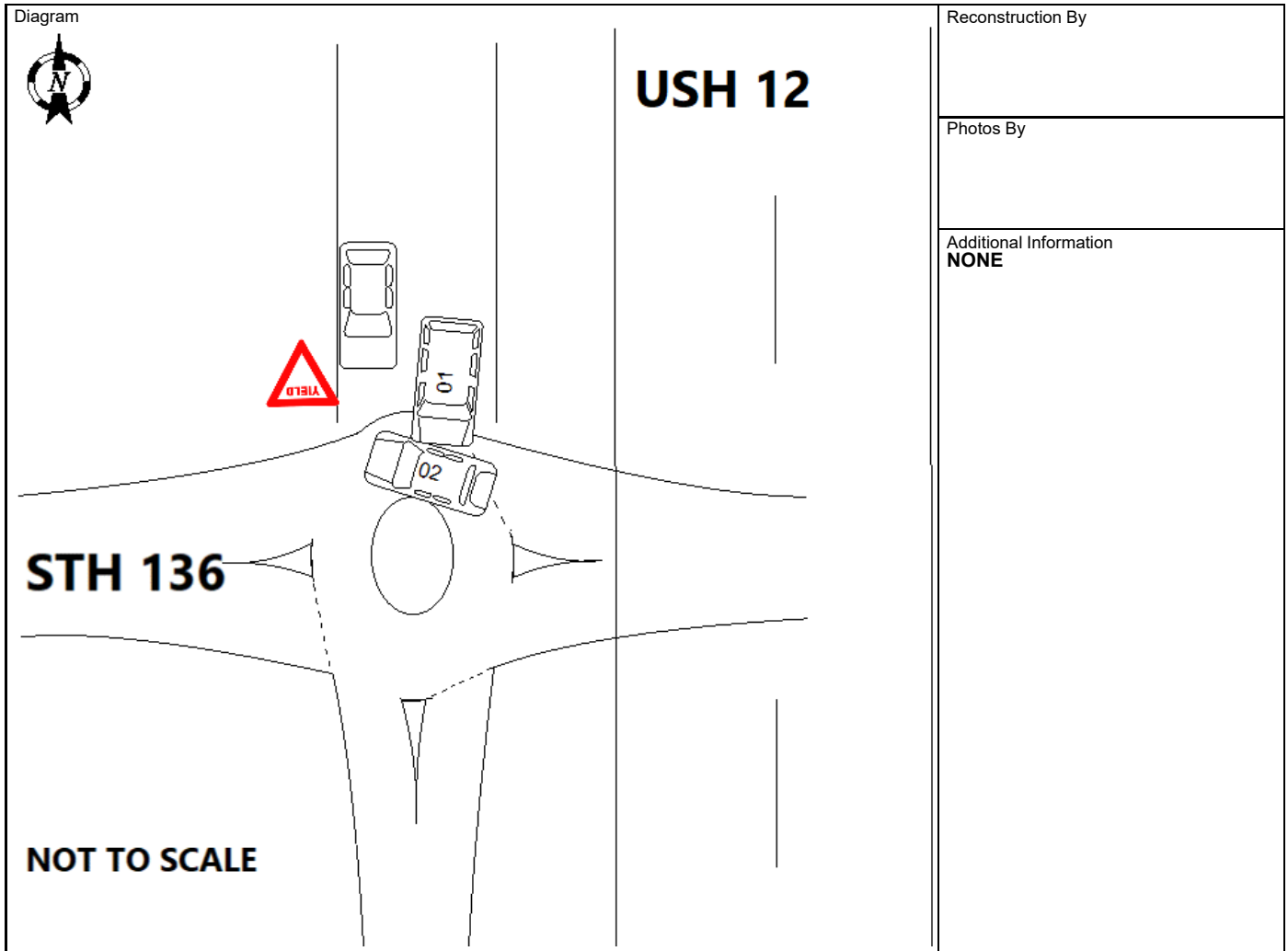
WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

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Document Number Override 6TL0B655WR		Primary Crash Document #	Agency Crash Number 23-09146	Investigating Officer/Deputy DEPUTY W. NEUBAUER	
Crash Date 08/17/2023		Crash Time 04:25 PM	Date Arrived 08/17/2023	Time Arrived 04:37 PM	
Date Notified 08/17/2023		Time Notified 04:30 PM	Total Units 02	Total Injured 01	Total Killed 00
<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 NO		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input checked="" type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description



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

UNIT 1 WAS TRAVELING S/B ON THE OFF RAMP OF USH 12 AT THE STH 136 EXIT. UNIT 1 DRIVER STATED HER BRAKES GAVE OUT. UNIT 1 CRASHED FRONT/REAR INTO ANOTHER VEHICLE. UNIT 1 TRAVELED INTO THE ROUNDABOUT IN AN UNCONTROLLED MANNER. UNIT 2 WAS TRAVELING W/B ON STH 136 AND ENTERED THE ROUNDABOUT. UNIT 1 CRASHED INTO UNIT 2 FRONT/SIDE. UNIT 1 DRIVER WAS CITED FOR FAILURE TO OBEY TRAFFIC SIGN IN THE CRASH REPORT FOR THE OTHER VEHICLE AND APPLIES TO THIS CRASH REPORT. -----UPDATE: ON 8-30-23 UNIT 2 DRIVER MADE CONTACT WITH 9140 AND PROVIDED INFORMATION THAT HE SUFFERED A BROKEN LEFT ARM AS A RESULT OF THE CRASH AND HAD MEDICAL ATTENTION FOR THE INJURY AT A HOSPITAL.

UPDATED INFORMATION REF UNIT 2 DRIVER INJURY

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Location

ON STH136 EB 19 FT E OF STH33 EB IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY	Latitude	Longitude
	43.474955829	-89.776006983
	X Coordinate	Y Coordinate
	275478.03125	4817304
	Structure Type	

Crash Scene

First Harmful Event	First Harmful Event Location	
MOTOR VEH IN TRANSPORT	ON ROADWAY	
Manner of Collision	Light Condition	
01 - ANGLE	DAYLIGHT	
Road Surface Condition(s)	Roadway Factor(s)	
DRY	NONE	
Environment Factor(s)		
NONE		
Weather Condition(s)		
CLEAR		
Animal Type	Relation To Trafficway	
	TRAFFICWAY - ON ROAD	
Crash Classification - Location	Crash Classification - Jurisdiction	
PUBLIC PROPERTY	NO SPECIAL JURISDICTION	
Tribal Land	Access Control	Special Study
	NO CONTROL	
Within Interchange Area	Junction Location	Intersection Type
YES	EXIT RAMP-RELATED	NOT AN INTERSECTION

Unit Summary

UNIT 01	Unit Status	Vehicle Operating As Classification	Unit Type		
	IN TRANSIT	D CLASS	AUTOMOBILE		
	Vehicle Type	Operating As Endorsements			
	(SPORT) UTILITY VEHICLE				
	Total Occs	Train/Bus # Recorded	Total # Citations Issued	Total Trailers	Total HazMat Types
	1		0	0	0
	Insurance?	Direction Of Travel	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit	Total Lanes
	YES	SOUTHBOUND		30	4
Most Harmful Event: Collision With	Special Function	Emergency Motor Vehicle Use			
MOTOR VEH IN TRANSPORT	NO SPECIAL FUNCTION	NOT APPLICABLE			
Traffic Way	Traffic Control	Traffic Control Inoperative/Missing			
DIVIDED HWY MEDIAN W/BARRIER	YIELD SIGN	NO			
Surface Type	Road Curvature	Road Grade			
BLACKTOP (BITUMINOUS)	STRAIGHT	DOWNHILL			
Truck Bus or HazMat					
NO					

Vehicle

01	License Plate Number	Plate Type	St	Country of Issuance
	ADA7632	AUT - AUTOMOBILE	WI	UNITED STATES
	Vehicle Identification Number	Make	Year	Model
1FMDK05W88GA02781	FORD	2008	TAURUS X	
Color	Body Style	Bus Use		
SIL - SILVER (ALUMINUM)	UT - SPORT UTILITY VEHICLE			

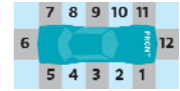
Initial Contact Point

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UNIT VEHICLE	12 - FRONT	Vehicle Damage		
	Extent Of Damage FUNCTIONAL DAMAGE	01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT		
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By CRAIGS TOWING		
	What Driver Was Doing ENTERING TRAFFIC LANE	Vehicle Factors		
UNIT VEHICLE	Driver Prior Action Other	BRAKES		
	Driver Actions FAILED TO YIELD RIGHT-OF-WAY, FAILURE TO CONTROL, DISREGARDED OTHER TRAFFIC CONTROL			
	Owner Name CAROLE BERGLUND (847) 721-5752			
	Owner Address E10872 S GASSER RD BARABOO, WI 53913 , US			
UNIT VEHICLE	Sequence Of Events			
	01	Event MOTOR VEH IN TRANSPORT		
	02	Event		
	03	Event		
	04	Event		
UNIT VEHICLE	Policy Holder			
	Insurance Company ESURANCE-INSURANCE-COMPANY		Individual CAROLE BERGLUND	
	Individual			
UNIT INDIVIDUAL	Driver CAROLE BERGLUND (847) 721-5752		Citations Issued 0	
			Sex FEMALE	
			Date of Birth	
			Race WHITE	
Address E10872 S GASSER RD BARABOO, WI 53913 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
UNIT INDIVIDUAL	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		Airbag
		NO APPARENT INJURY		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	

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UNIT	INDIVIDUAL	Distracted By Distracted By Source UNKNOWN		
		Distracted By Action UNKNOWN		
		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			

Unit Summary

UNIT	02	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE		
		Vehicle Type PASSENGER CAR	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 CrashTire Mark	Speed Limit 45	Total Lanes 4
		Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT	Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE		
		Traffic Way DIVIDED HWY MEDIAN W/BARRIER	Traffic Control NO CONTROL	Traffic Control Inoperative/Missing NO		
		Surface Type BLACKTOP (BITUMINOUS)	Road Curvature CURVE LEFT	Road Grade LEVEL		
		Truck Bus or HazMat NO				

Vehicle

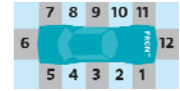
02	02	License Plate Number 874CTZ	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
		Vehicle Identification Number 2G1WX12K239217594	Make CHEVROLET	Year 2003	Model MONTE CARL	
		Color RED - RED	Body Style CP - COUPE	Bus Use		
		Initial Contact Point 03 - RIGHT SIDE MIDDLE				

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UNIT VEHICLE	Vehicle Damage		03 - RIGHT SIDE MIDDLE	
	Extent Of Damage DISABLING DAMAGE			
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE			Vehicle Removed By CRAIGS TOWING
	What Driver Was Doing NEGOTIATING CURVE			Vehicle Factors
UNIT VEHICLE	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
	Owner Name JAMES RITTMANN (414) 232-9131		Owner Address 711 S PRESTON AVE # 116 REEDSBURG, WI 53959 , US	
	Sequence Of Events			
UNIT VEHICLE	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
	Event			
UNIT VEHICLE	Policy Holder			
	Insurance Company PROGRESSIVE-CASUALTY-INS-CO		Individual JAMES RITTMANN	
UNIT INDIVIDUAL	Individual			
	Driver JAMES RITTMANN (414) 232-9131		Citations Issued 0	
	Sex MALE		Date of Birth	
	Race WHITE		Driver License Number	
Address 711 S PRESTON AVE # 116 REEDSBURG, WI 53959 , US		STATE: WISCONSIN COUNTRY: UNITED STATES		
UNIT INDIVIDUAL	Safety Equipment		On Duty Crash	
	Safety Equipment		SHOULDER & LAP BELT	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT		
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	UNIT INDIVIDUAL	Injury		Airbag
Injury Severity SUSPECTED MINOR INJURY		NON DEPLOYED		
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED	
Medical Transport NOT TRANSPORTED		EMS Agency Identifier		
Hospital		Date of Death	EMS Run #	
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UNIT	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				
02	002	Individual Condition			
		APPEARED NORMAL			