

6TL0F3SSFJ

Document Number Override		Primary Crash Document #		Agency Crash Number SC23-10112		Investigating Officer/Deputy DEPUTY A. KING	
Crash Date 09/15/2023		Crash Time 09:38 AM		Date Arrived 09/15/2023		Time Arrived 09:39 AM	
Date Notified 09/15/2023		Time Notified 09:39 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 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

Diagram		Reconstruction By	
<p>Not to scale</p>		<p>Photos By A. KING</p>	
		<p>Additional Information PHOTOS</p>	

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

U1 WAS TRAVELING EASTBOUND ON HY136 IN THE RIGHT HAND LANE AND U2 WAS TRAVELING IN THE SAME DIRECTION IN THE LEFT HAND LANE. OPERATOR OF U2 SAID SHE GOING THROUGH THE ROUNDABOUT AND CONTINUING TOWARDS BARABOO WHEN U1 WAS IN THE RIGHT LANE AND CUT IN FRONT OF HER AND SHE STRUCK HER. OPERATOR OF U1 SAID SHE WAS UNINJURED AND BELIEVED THE VEHICLE TO BE DRIVEABLE. I SPOKE WITH THE OPERATOR OF U1. OPERATOR SAID SHE WAS COMING FROM ROCK SPRINGS AND WAS GOING TO WORK IN LAKE DELTON. OPERATOR SAID SHE WAS IN THE RIGHT HAND LANE AND AT AN UNKNOWN TIME, SHE CHANGED LANES. OPERATOR WAS UNABLE TO TELL ME IF IT WAS BEFORE, DURING, OR AT THE END OF THE ROUNDABOUT. BASED ON THE STATEMENTS GIVEN, I ISSUED A CITATION TO OPERATOR OF U1 FOR UNSAFE LANE DEVIATION. OPERATOR OF U1 SAID SHE WAS NOT INJURED. CRAIG'S TOWING RESPONDED TO REMOVE U1. OPERATOR OF U2 REMOVED THE VEHICLE FROM THE SCENE.

Location

INTERSECTION ON STH33 EB AT RAMP USH12 EB IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY	Latitude 43.474663601	Longitude -89.774008903
	X Coordinate 275638.5625	Y Coordinate 4817266
	Structure Type	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 01 - ANGLE	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
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 PARTIAL CONTROL	Special Study
Within Interchange Area YES	Junction Location INTERSECTION-RELATED	Intersection Type ROUNDBOUT

Unit Summary

UNIT 01	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 1	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre Crash Tire 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 W/O TRAFFIC BARRIER		Traffic Control YIELD SIGN		Traffic Control Inoperative/Missing NO	
	Surface Type CONCRETE		Road Curvature CURVE LEFT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

Vehicle

UNIT 01 VEHICLE	License Plate Number ACP6710	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number 6G3F15RW2EL950588	Make CHEVROLET	Year 2014	Model SS	
	Color RED - RED	Body Style SD - SEDAN		Bus Use	
	Initial Contact Point 08 - LEFT SIDE REAR	Vehicle Damage 08 - LEFT SIDE REAR, 09 - LEFT SIDE MIDDLE			
	Extent Of Damage DISABLING DAMAGE				



UNIT	VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By CRAIGS TOWING		
		What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors		
		Driver Prior Action Other		NOT APPLICABLE		
		Driver Actions FAILED TO KEEP IN DESIGNATED LANE				
01	01	Owner Name ANDRE HERRITZ (608) 963-7895		Owner Address S6079 KLEIN RD ROCK SPRINGS, WI 53961 , US		
		Sequence Of Events				
UNIT	INDIVIDUAL	01	Event MOTOR VEH IN TRANSPORT			
		02	Event			
		03	Event			
		04	Event			
UNIT	INDIVIDUAL	Policy Holder				
		Insurance Company PROGRESSIVE-CASUALTY-INS-CO		Individual ANDRE HERRITZ		
UNIT	INDIVIDUAL	Individual				
		Driver KUAN CHEN (608) 393-7003		Citations Issued 1	Sex FEMALE	
		Date of Birth		Race ASIAN OR NATIVE HAWAIIAN OR OTHER PACIFIC ISLA		
		Address S6079 KLEIN RD ROCK SPRINGS, WI 53961 , US		Driver License Number		
01	001	Safety Equipment		On Duty Crash		
		Row 01 - FRONT ROW		Seat Position 07 - LEFT		
		Safety Equipment SHOULDER & LAP BELT		Helmet Use		
		Helmet Compliance		Eye Protection		
		Tint Compliance		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		
Distracted By		Distracted By Source UNKNOWN				
Distracted By Action UNKNOWN						

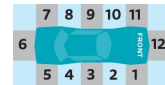
UNIT INDIVIDUAL	Non Motorist		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other			To/From School	
	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO	
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	Alcohol Test Results	
	Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results	
	Drug Type				
	Individual Condition APPEARED NORMAL				
	Violations				
01	001	UTC Number BK261416	Issue To? 001	Statute Number 346.13(1)	Description UNSAFE LANE DEVIATION

Unit Summary

UNIT 02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type TRUCK	
	Vehicle Type UTILITY TRUCK/PICKUP 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 EASTBOUND	<input type="checkbox"/> Pre Crash Tire 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 W/O TRAFFIC BARRIER		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type CONCRETE		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

Vehicle

UNIT 02	License Plate Number RA8361		Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1FTEW1EG3GKE77813		Make FORD	Year 2016	Model F150
	Color BLU - BLUE		Body Style PK - PICKUP		Bus Use
	Initial Contact Point 12 - FRONT				



WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT VEHICLE	Vehicle Damage			
	Extent Of Damage FUNCTIONAL DAMAGE	12 - FRONT		
	Towed Due To Damage NOT TOWED	Vehicle Removed By OWNER		
	What Driver Was Doing NEGOTIATING CURVE	Vehicle Factors NOT APPLICABLE		
UNIT VEHICLE	Driver Actions NO CONTRIBUTING ACTION			
	Owner Name LEANN ACCOLA (608) 370-1004	Owner Address S8265A DENZER RD NORTH FREEDOM, WI 53951 , US		
Sequence Of Events				
UNIT VEHICLE	01	Event MOTOR VEH IN TRANSPORT		
	02	Event		
	03	Event		
	04	Event		
Policy Holder				
UNIT INDIVIDUAL	Insurance Company PROGRESSIVE-CASUALTY-INS-CO	Individual LEANN ACCOLA		
	Individual			
UNIT INDIVIDUAL	Driver LEANN ACCOLA (608) 370-1004	Citations Issued 0	Sex FEMALE	
	Address S8265A DENZER RD NORTH FREEDOM, WI 53951 , US		Date of Birth	Race WHITE
UNIT INDIVIDUAL	Driver License Number			
	Safety Equipment			
UNIT INDIVIDUAL	On Duty Crash		Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	Injury		Airbag	
UNIT INDIVIDUAL	Injury Severity 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

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT	INDIVIDUAL	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			
		02	002	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									