

6TL0F51TK2  
23-12510

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>23-12510</b>		Investigating Officer/Deputy <b>SERGEANT E. KNULL</b>	
Crash Date <b>11/20/2023</b>		Crash Time <b>11:04 AM</b>		Date Arrived <b>11/20/2023</b>		Time Arrived <b>11:14 AM</b>	
Date Notified <b>11/20/2023</b>		Time Notified <b>11:04 AM</b>		Total Units <b>01</b>		Total Injured <b>00</b>	Total Killed <b>00</b>
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input checked="" type="checkbox"/> Lane Closure		<input type="checkbox"/> Work Zone		<input type="checkbox"/> Trailer or Towed	<input checked="" 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 SB ON STH 113 DRIVER STATED BRAKE FAILURE AND HE WENT INTO DITCH WHERE HE STRUCK TREES AND TRUCK TIPPED ONTO ITS SIDE. NO INJURIES REPORTED. DRIVER IL LICENSE SUSPENDED. CITATION ISSUED FOR OWL AND FAIL TO CONTROL VEHICLE. CRAIGS TOWING REMOVED VEHICLE AS IT SUSTAIN DISABLING DAMAGE. TOW COMPANY TESTED BRAKES AND SEEMED TO BE FUNCTIONING PROPERLY

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Location

ON STH113 SB 0.39 MI N OF S LAKE RD IN THE TOWN OF MERRIMAC IN SAUK COUNTY	Latitude <b>43.414434077</b>	Longitude <b>-89.676960925</b>
	X Coordinate <b>283273.03125</b>	Y Coordinate <b>4810319.5</b>
	Structure Type <b>NO STRUCTURE</b>	

Crash Scene

First Harmful Event <b>DITCH</b>	First Harmful Event Location <b>SHOULDER LEFT</b>		
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</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>CLOUDY</b>			
Animal Type	Relation To Trafficway <b>TRAFFICWAY - NOT 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>	
Closure Type <b>CLOSURE-ONE DIRECTION</b>	Reasons for Closure <b>TOW TRUCK</b>		
Date Initial Lane/Rd Closed <b>11/20/2023</b>	Time Initial Lane/Rd Closed <b>11:59 AM</b>		
Date All Lanes Open <b>11/20/2023</b>	Time All Lanes Open <b>02:57 PM</b>	Date Scene Cleared <b>11/20/2023</b>	Time Scene Cleared <b>02:57 PM</b>

Unit Summary

<b>UNIT</b>	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>C CLASS</b>		Unit Type <b>TRUCK</b>		
	Vehicle Type <b>STRAIGHT TRUCK (INSERT TRUCK)</b>	Operating As Endorsements				
	Total Occs <b>2</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>SOUTHBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>55</b>	Total Lanes <b>2</b>	
	Most Harmful Event: Collision With <b>OVERTURN/ROLLOVER</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>TRUCK OR TRUCK COMBINATION &gt; 10,000LBS GVWR/GCWR</b>					
	<b>01</b>	<b>Vehicle</b>				
		License Plate Number <b>140937H</b>	Plate Type <b>HTK - HEAVY TRUCK</b>	St <b>IL</b>	Country of Issuance <b>UNITED STATES</b>	
<b>01</b>	Vehicle Identification Number <b>5PVNJ8JT662S10772</b>	Make <b>HINO</b>	Year <b>2006</b>	Model <b>TRUCK</b>		

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UNIT VEHICLE	Color <b>WHI - WHITE</b>	Body Style <b>TK - TRUCK</b>	Bus Use
	Initial Contact Point <b>00 - NON-COLLISION</b>	Vehicle Damage <b>15 - ALL AREAS</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 <b>BRAKES</b>	
Driver Prior Action Other			
UNIT VEHICLE	Driver Actions <b>FAILURE TO CONTROL</b>		
	Owner Name <b>D AND AC DELIVERIES (331) 871-4056</b>	Owner Address <b>29 W523 LEE RD WEST CHICAGO, IL 60185 , US</b>	
UNIT 01	<b>Sequence Of Events</b>		
	Event <b>DITCH</b>		
	Event <b>TREE</b>		
	Event <b>OVERTURN/ROLLOVER</b>		
	Event		
UNIT 01	<b>Policy Holder</b>		
	Insurance Company <b>ERIE-INS-CO</b>	Individual <b>FRANCISCO CERVANTES</b>	
UNIT INDIVIDUAL	<b>Individual</b>		
	Driver <b>FRANCISCO CERVANTES (331) 871-4056</b>	Citations Issued <b>2</b>	Sex <b>MALE</b>
		Date of Birth	Race <b>HISPANIC</b>
	Address <b>29 W523 LEE RD WEST CHICAGO, IL 60185 , US</b>	Driver License Number	
UNIT 01	<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	
UNIT 001	<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 #

UNIT INDIVIDUAL	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>					
	<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	
UNIT INDIVIDUAL	Drug Type					
	Individual Condition <b>APPEARED NORMAL</b>					
	<b>Individual</b>					
	Passenger <b>ARTEMIO SANCHEZ (708) 312-6910</b>			Citations Issued <b>0</b>	Sex <b>MALE</b>	
	Address <b>14124 WINCHESTER AVE HARVEY, IL 60426 , US</b>			Date of Birth	Race <b>HISPANIC</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	

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	Distracted By Action				
	<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>Violations</b>					
01	UTC Number	Issue To?	Statute Number	Description	
	<b>BK261912</b>	<b>001</b>	<b>343.05(3)(a)</b>	<b>OPERATE W/O VALID LICENSE (1ST VIOLATION)</b>	
02	UTC Number	Issue To?	Statute Number	Description	
	<b>BK261913</b>	<b>001</b>	<b>346.57(2)</b>	<b>FAILURE TO KEEP VEHICLE UNDER CONTROL</b>	
<b>Carrier</b>					
01	<input checked="" type="checkbox"/> <b>Use Vehicle Owner Same as Carrier</b>		Source <b>DRIVER</b>		
	Name <b>D AND AC DELIVERIES USDOT# 2402900</b>		Address <b>29 W523 LEE RD WEST CHICAGO, IL 60185 , US</b>		
	GVWR <b>MORE THAN 26,000 LB</b>	Vehicle Configuration <b>SINGLE-UNIT TRUCK (2-AXLE AND GVWR MORE THA</b>		Cargo Body Type <b>VAN/ENCLOSED BOX</b>	
	US DOT # <b>2402900</b>	Carrier Type <b>INTERSTATE CARRIER</b>		Permitted Load <b>NOT APPLICABLE</b>	
	<input type="checkbox"/> <b>OS/OW Load</b>	WI Permit Number	<input type="checkbox"/> <b>Permitted Vehicle On Permitted Route</b>	<input type="checkbox"/> <b>Escort Vehicle Required By Permit</b>	<input type="checkbox"/> <b>Escort Vehicle Present</b>
Measured Height		Measured Length	Measured Width	Measured Weight	