

6TL0D7W16P
23-13781

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

6TL0D7W16P

Document Number Override		Primary Crash Document #		Agency Crash Number 23-13781		Investigating Officer/Deputy DEPUTY K. MUELLER	
Crash Date 12/28/2023		Crash Time 12:55 PM		Date Arrived 12/28/2023		Time Arrived 01:06 PM	
Date Notified 12/28/2023		Time Notified 12:55 PM		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>		Photos By
		Additional Information NONE

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

UNIT 1 WAS DRIVING SOUTH ON NEUHEISEL RD AND CAME TO THE STOP SIGN. UNIT 1 WAS NOT ABLE TO STOP DUE TO ITS SPEED AND THE ROAD CONDITIONS. UNIT 2 WAS DRIVING EAST AND STRUCK UNIT 1 AS IT WAS GOING THROUGH THE INTERSECTION.

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Location

ON JONES RD 4 FT E OF NEUHEISEL RD IN THE TOWN OF SPRING GREEN IN SAUK COUNTY	Latitude 43.197147881	Longitude -90.039055404
	X Coordinate 253077.578125	Y Coordinate 4787193
	Structure Type	

Crash Scene

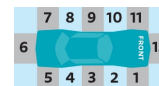
First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 01 - ANGLE	Light Condition DAYLIGHT	
Road Surface Condition(s) WET, ICE	Roadway Factor(s) NONE	
Environment Factor(s) WEATHER CONDITIONS		
Weather Condition(s) SNOW		
Animal Type	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control NO CONTROL	Special Study
Within Interchange Area YES	Junction Location INTERSECTION	Intersection Type FOUR-WAY INTERSECTION

Unit Summary

UNIT	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 SOUTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 45	Total Lanes 2
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT	Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED	Traffic Control STOP SIGN		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)	Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO				

Vehicle

UNIT	VEHICLE	License Plate Number AUJ9067	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
		Vehicle Identification Number 1LNHM87A35Y662664	Make LINCOLN	Year 2005	Model LS	
		Color DBL - BLUE, DARK	Body Style SD - SEDAN		Bus Use	
		Initial Contact Point 09 - LEFT SIDE MIDDLE	Vehicle Damage 08 - LEFT SIDE REAR, 09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT, 13 - TOP, 14 - UNDERCARRIAGE			
		Extent Of Damage DISABLING DAMAGE				



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UNIT	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By		
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions SPEED TOO FAST/COND, FAILED TO YIELD RIGHT-OF-WAY, FAILURE TO CONTROL				
01	01	Owner Name KALOB TONSTAD (608) 549-0842		Owner Address S11232 WILSON CREEK RD SPRING GREEN, WI 53588 , US	
		Sequence Of Events			
UNIT	01	Event MOTOR VEH IN TRANSPORT			
		Event			
		Event			
		Event			
UNIT	01	Policy Holder			
		Insurance Company PROGRESSIVE-CLASSIC-INS-CO	Individual KALOB TONSTAD		
UNIT	01	Individual			
		Driver KALOB TONSTAD (608) 549-0842		Citations Issued 1	Sex MALE
		Address S11232 WILSON CREEK RD SPRING GREEN, WI 53588 , US		Date of Birth	Race WHITE
				Driver License Number	
01	001	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	
		Injury		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 NOT APPLICABLE (NOT DISTRACTED)			
Distracted By Action		NOT DISTRACTED			

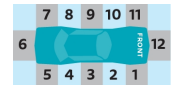
UNIT INDIVIDUAL	Non Motorist		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other			To/From School	
	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO	
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	Alcohol Test Results	
	Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results	
	Drug Type				
	Individual Condition APPEARED NORMAL				
	Violations				
01	001	UTC Number BG111478	Issue To? 001	Statute Number 346.57(2)	Description UNREASONABLE AND IMPRUDENT SPEED

Unit Summary

UNIT 02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER VAN				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 2	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

Vehicle

UNIT 02	License Plate Number 865314		Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1GTHG35K981232807		Make GENERAL MOTORS COR	Year 2008	Model SAVANA G35
	Color RED - RED		Body Style VN - VAN		Bus Use
	Initial Contact Point 12 - FRONT				



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UNIT VEHICLE	Extent Of Damage FUNCTIONAL DAMAGE		Vehicle Damage 01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT, 14 - UNDERCARRIAGE		
	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR		
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
UNIT VEHICLE	Driver Actions NO CONTRIBUTING ACTION				
	Owner Name DANIEL BINDL (608) 588-4268		Owner Address E5334 JONES RD SPRING GREEN, WI 53588 , US		
UNIT VEHICLE	Sequence Of Events				
	01	Event MOTOR VEH IN TRANSPORT			
	02	Event			
	03	Event			
	04	Event			
UNIT VEHICLE	Policy Holder				
	Insurance Company AMERICAN-FAMILY-INS-CO		Individual DANIEL BINDL		
UNIT INDIVIDUAL	Individual				
	Driver DANIEL BINDL (608) 588-4268		Citations Issued 0	Sex MALE	
	Address E5334 JONES RD SPRING GREEN, WI 53588 , US		Date of Birth	Race WHITE	
			Driver License Number		
UNIT INDIVIDUAL	Safety Equipment		On Duty Crash		
	Row 01 - FRONT ROW		Seat Position 07 - LEFT		
			SHOULDER & LAP BELT		
	Helmet Use		Helmet Compliance		
	Eye Protection		Tint Compliance		
	Injury	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	

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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									