

6TL0CVRP57
24-01383

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

6TL0CVRP57

Document Number Override		Primary Crash Document #		Agency Crash Number 24-01383		Investigating Officer/Deputy SERGEANT B. LUBER	
Crash Date 02/07/2024		Crash Time 05:25 PM		Date Arrived 02/07/2024		Time Arrived 05:43 PM	
Date Notified 02/07/2024		Time Notified 05:25 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"/> 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	
<input type="checkbox"/> Trailer or Towed		<input type="checkbox"/> Reporting Threshold					

Description

Diagram		Reconstruction By	
		Photos By SGT. B. LUBER #11	
		Additional Information PHOTOS	

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

U1 WAS EB ON USH 14. U2 PULLED OUT OF CULVERS TO MAKE A LEFT HAND TURN ONTO USH 14. OPERATOR OF U2 SAID HE LOOKED RIGHT, BUT NOT LEFT. U2 STRUCK U1 CAUSING MINOR DAMAGE. NO INJURIES AND VEHICLES REMOVED BY OPERATOR.

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Location

ON E4919 USH14 EB 268 FT E OF PRAIRIE VIEW RD/ STH23 EB (FIRE E4919) IN THE TOWN OF SPRING GREEN IN SAUK COUNTY	Latitude 43.189672325	Longitude -90.072853298
	X Coordinate 250300.84375	Y Coordinate 4786463
	Structure Type FIRE	

Crash Scene

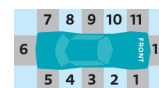
First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 01 - ANGLE	Light Condition DARK/UNLIT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLOUDY		
Animal Type	Relation To Trafficway TRAFFICWAY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

Unit Summary

UNIT	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 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

VEHICLE	License Plate Number TP6862	Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number 1FTEW1EP1MFA28828	Make FORD	Year 2021	Model F150	
	Color SIL - SILVER (ALUMINUM)	Body Style PK - PICKUP		Bus Use	
	Initial Contact Point 02 - RIGHT SIDE FRONT	Vehicle Damage 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 04 - RIGHT SIDE REAR			
	Extent Of Damage MINOR DAMAGE				



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CRASH REPORT

UNIT	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR		
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions NO CONTRIBUTING ACTION				
01	01	Owner Name JAMES SHEAHAN (608) 504-8795		Owner Address 3837 LAUDON RD COTTAGE GROVE, WI 53527 , US	
		Sequence Of Events			
UNIT	01	Event MOTOR VEH IN TRANSPORT			
		Event			
		Event			
		Event			
UNIT	01	Policy Holder			
		Insurance Company AMERICAN-FAMILY-INS-CO	Individual JAMES SHEAHAN		
UNIT	01	Individual			
		Driver JAMES SHEAHAN (608) 504-8795		Citations Issued 0	Sex MALE
		Address 3837 LAUDON RD COTTAGE GROVE, WI 53527 , US		Date of Birth	Race WHITE
		Driver License Number			
UNIT	01	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	
		Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
UNIT	001	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	

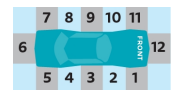
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CRASH REPORT

UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
	Action Other					To/From School	
	01	001	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 1	Total Trailers 0	Total HazMat Types 0		
		Insurance? YES	Direction Of Travel WESTBOUND	<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						

UNIT	VEHICLE	Vehicle					
		License Plate Number APW2035	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES		
		Vehicle Identification Number 3A8FY48949T532308	Make CHRYSLER	Year 2009	Model PT CRUISER		
		Color BLU - BLUE	Body Style VN - VAN		Bus Use		
		Initial Contact Point 12 - FRONT	Vehicle Damage				
		Extent Of Damage MINOR DAMAGE	12 - FRONT				
		Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR				



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UNIT VEHICLE	What Driver Was Doing LEFT TURN		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions FAILED TO YIELD RIGHT-OF-WAY, LOOKED BUT DID NOT SEE			
	Owner Name ELIZABETH ACCOLA (608) 495-5192		Owner Address S7290 SKY VIEW DR LOGANVILLE, WI 53943 , US	
UNIT 02	Sequence Of Events			
	01	Event LEFT TURN		
	02	Event MOTOR VEH IN TRANSPORT		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company PROGRESSIVE-CASUALTY-INS-CO		Individual ELIZABETH ACCOLA	
UNIT INDIVIDUAL	Individual			
	Driver AUSTIN ACCOLA (608) 495-5192		Citations Issued 1	Sex MALE
	Address S7290 SKY VIEW DR LOGANVILLE, WI 53943 , US		Date of Birth	Race WHITE
			Driver License Number	
UNIT 002	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	
	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 EXTERNAL (TO VEHICLE/NON-MOTORIST AREA)		
Distracted By Action OTHER ACTION (LOOKING AWAY FROM TASK ETC)				
Non Motorist		Striking Unit #	Location	

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT	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							
	02	002	01	<table border="1"> <tr> <td>UTC Number BG022092</td> <td>Issue To? 002</td> <td>Statute Number 346.18(2)</td> <td>Description FAIL/YIELD WHILE MAKING LEFT TURN</td> </tr> </table>		UTC Number BG022092	Issue To? 002	Statute Number 346.18(2)
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