

6TL0CTJN0C

25-06776

# 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		Investigating Officer/Deputy <b>DEPUTY T. MOSLEY</b>	
Crash Date <b>07/02/2025</b>		Crash Time <b>04:53 PM</b>		Date Arrived <b>07/02/2025</b>		Time Arrived <b>05:00 PM</b>	
Date Notified <b>07/02/2025</b>		Time Notified <b>04:57 PM</b>		Total Units <b>02</b>		Total Injured <b>00</b>	Total Killed <b>00</b>
<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 <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  
**TM 9108**

 Additional Information  
**PHOTOS**
☒ I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

UNIT 1 WAS TRAVELING SOUTH ON HIGHWAY 12 ATTEMPTING TO TURN EAST ONTO SAUK PRAIRIE ROAD. UNIT 1 WAS SLOWED/STOPPED YIELDING TO NORTH BOUND TRAFFIC. UNIT 2 DID NOT SEE THAT UNIT 1 WAS STOPPED IN THE LANE OF TRAVEL DUE TO THE GLARE OF THE SUN. UNIT 2 ATTEMPTED TO BRAKE IN TIME TO STOP FROM COLLIDING WITH UNIT 1. UNIT 2 COULD NOT STOP IN TIME, CAUSING MINOR DAMAGE TO BOTH VEHICLES. BOTH VEHICLES REMOVED BY OPERATORS FROM SCENE.

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## Location

ON USH12 EB 368 FT S OF SAUK PRAIRIE RD IN THE TOWN OF PRAIRIE DU SAC IN SAUK COUNTY	Latitude <b>43.280743367</b>	Longitude <b>-89.759053679</b>
	X Coordinate <b>276135.34375</b>	Y Coordinate <b>4795688.5</b>
	Structure Type <b>NO STRUCTURE</b>	

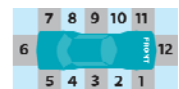
## Crash Scene

First Harmful Event <b>MOTOR VEH TRAN OTHER RDWY</b>		First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>03 - FRONT TO REAR</b>		Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>DRY</b>		Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>GLARE</b>			
Weather Condition(s) <b>CLEAR</b>			
Animal Type		Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>		Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land		Access Control <b>PARTIAL CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>INTERSECTION</b>	Intersection Type <b>FOUR-WAY INTERSECTION</b>	

## Unit Summary

UNIT 01	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>	
	Vehicle Type <b>PASSENGER CAR</b>				Operating As Endorsements	
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</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"/> <b>Pre CrashTire Mark</b>	Speed Limit <b>55</b>	Total Lanes <b>3</b>	
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</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>NO</b>					

UNIT 01 VEHICLE 01	<b>Vehicle</b>				
	License Plate Number <b>AVC3902</b>		Plate Type <b>AUT</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>1HGFA16568L017753</b>		Make <b>HOND</b>	Year <b>2008</b>	Model <b>CIVIC</b>
	Color <b>BLU - BLUE</b>		Body Style <b>SD - SEDAN</b>		Bus Use
	Initial Contact Point <b>06 - REAR</b>		Vehicle Damage  <b>06 - REAR</b>		
	Extent Of Damage <b>MINOR DAMAGE</b>				



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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>	
	What Driver Was Doing <b>SLOW/STOPPING</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
01	Owner Name <b>TIMOTHY MC INERNEY (608) 477-7552</b>		Owner Address <b>114 FOX RUN SAUK CITY, WI 53583 , US</b>	
	<b>Sequence Of Events</b>			
01	Event	<b>MOTOR VEH IN TRANSPORT</b>		
	Event			
	Event			
	Event			
04	<b>Policy Holder</b>			
	Insurance Company <b>STATE-FARM-MUTUAL-AUTOMOBILE-INS-CO</b>		INDIVIDUAL <b>TIMOTHY MC INERNEY</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	DRIVER <b>BROOKS MCINERNEY (608) 477-7552</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
	Date of Birth		Race <b>WHITE</b>	
	Address <b>114 FOX RUN SAUK CITY, WI 53583 , US</b>		Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01	<b>Safety Equipment</b>		On Duty Crash	
	Safety Equipment			
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>SHOULDER &amp; LAP BELT</b>	
	Helmet Use		Helmet Compliance	
001	Eye Protection		Tint Compliance	
	<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
<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>		
Distracted By Action <b>NOT DISTRACTED</b>				



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UNIT VEHICLE	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>LOOKED BUT DID NOT SEE</b>			
	Owner Name <b>MIDWESTERN WHEELS INC (920) 730-7560</b>		Owner Address <b>1611 E AMELIA ST PO BOX 1935 APPLETON, WI 54911 , US</b>	
02 02	<b>Sequence Of Events</b>			
	01	Event <b>MOTOR VEH IN TRANSPORT</b>		
	02	Event		
	03	Event		
	04	Event		
UNIT INDIVIDUAL	<b>Individual</b>			
	DRIVER <b>GUILHERME LINDMEYER (608) 395-4500</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
	Address <b>35 UNIVERSITY HOUSES F MADISON, WI 53705 , US</b>		Date of Birth <b>WHITE</b>	
			Driver License Number	
02 002	<b>Safety Equipment</b>		On Duty Crash	
			Safety Equipment	
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>SHOULDER &amp; LAP BELT</b>	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	<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
	<b>Distracted By</b>		Distracted By Source <b>OTHER DISTRACTION (ANIMAL, FOOD, GROOMING)</b>	
Distracted By Action <b>OTHER ACTION (LOOKING AWAY FROM TASK ETC)</b>				
<b>Non Motorist</b>		Striking Unit #	Location	
Prior Action				

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UNIT	INDIVIDUAL	Action		
		Action Other		To/From School
02	002	<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>Individual</b>		
		PASSENGER <b>GABRIELLE ROSENSTENGEL</b> <b>(608) 395-4500</b>		Citations Issued <b>0</b>
		Address <b>35 UNIVERSITY HOUSES F</b> <b>MADISON, WI 53705 , US</b>		Driver License Number
		Sex <b>FEMALE</b>		Race <b>WHITE</b>
02	003	<b>Safety Equipment</b>		
		On Duty Crash		Safety Equipment <b>SHOULDER &amp; LAP BELT</b>
		Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</b>	
		Helmet Use		Helmet Compliance
		Eye Protection		Tint Compliance
		<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
		Hospital		EMS Run #
Date of Death		Time of Death		
<b>Distracted By</b>		Distracted By Source		
Distracted By Action				
<b>Non Motorist</b>		Striking Unit #		
Location				
Prior Action				

UNIT	INDIVIDUAL	Action			
		Action Other			To/From School
		<b>Drug &amp; Alcohol</b>	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			