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25-07994

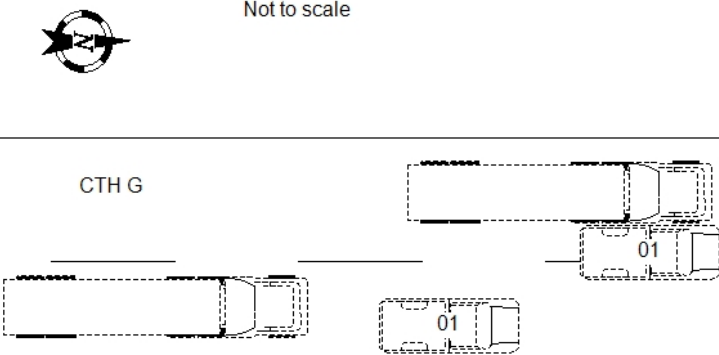
WISCONSIN MOTOR VEHICLE
CRASH REPORT

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 25-07994		Investigating Officer/Deputy DEPUTY W. VERTEIN	
Crash Date 07/31/2025		Crash Time 12:36 PM		Date Arrived 07/31/2025		Time Arrived 12:51 PM	
Date Notified 07/31/2025		Time Notified 12:40 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 checked="" 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 type="checkbox"/> Reportable	Crash Type DT4000 (STANDARD CRASH)				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

Description

Diagram		Reconstruction By
		Photos By
		Additional Information NONE

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

ON THE DESCRIBED DATE, TIME, AND LOCATION, UNITS 1 AND 2 WERE TRAVELING NORTHBOUND. UNIT 2 WAS IN THE PROCESS OF PASSING UNIT 1 WHILE UNIT 1 BEGAN TO CROSS THE CENTERLINE TO PICK UP GARBAGE. NO REPORTED INJURIES.

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Location

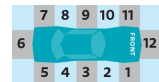
ON CTHG NB 0.39 MI S OF SUGAR MAPLE RD IN THE TOWN OF WASHINGTON IN SAUK COUNTY	Latitude 43.432963625	Longitude -90.15255255
	X Coordinate 244844.984375	Y Coordinate 4813725
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 07 - SIDESWIPE/SAME DIRECTION		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 NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION	

Unit Summary

UNIT 01	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type TRUCK	
	Vehicle Type STRAIGHT TRUCK (INSERT 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 NORTHBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	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 DOWNHILL	
	Truck Bus or HazMat TRUCK OR TRUCK COMBINATION > 10,000LBS GVWR/GCWR					
	VEHICLE 01	Vehicle				
		License Plate Number GD95181		Plate Type HTK	St WI	Country of Issuance UNITED STATES
Vehicle Identification Number 1HTEUMML5RS755719		Make INTL	Year 2024	Model MV607		
Color WHI - WHITE		Body Style TK - TRUCK		Bus Use		
Initial Contact Point 10 - LEFT SIDE FRONT		Vehicle Damage 10 - LEFT SIDE FRONT				
Extent Of Damage MINOR DAMAGE						



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UNIT	VEHICLE	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 FAILED TO KEEP IN DESIGNATED LANE			
01	VEHICLE	Owner Name TOWN & COUNTRY SANITATION INC (608) 375-5856		Owner Address 104 N PARK ST PO BOX 7 BOSCOBEL, WI 53805 , US	
		Sequence Of Events			
01	VEHICLE	Event CROSS CENTERLINE			
		Event MOTOR VEH IN TRANSPORT			
		Event			
		Event			
01	INDIVIDUAL	Policy Holder			
		Insurance Company ACE-AMERICAN-INS-CO		ORGANIZATION/COMPANY TOWN & COUNTRY SANITATION INC	
01	INDIVIDUAL	Individual			
		DRIVER ZACKERY SCHMITZ (608) 739-1357		Citations Issued 0	Sex MALE
01	INDIVIDUAL	Date of Birth		Race WHITE	
		Address 1900 E NEBRASKA ST # 5 MUSCODA, WI 53573 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
01	INDIVIDUAL	Safety Equipment		On Duty Crash	
		Safety Equipment		NONE USED - VEHICLE OCCUPANT	
01	INDIVIDUAL	Row 01 - FRONT ROW	Seat Position 07 - LEFT		
		Helmet Use		Helmet Compliance	
01	INDIVIDUAL	Eye Protection		Tint Compliance	
		Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
01	INDIVIDUAL	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED	
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #
01	INDIVIDUAL	Hospital		Date of Death	Time of Death
		Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)	
01	INDIVIDUAL	Distracted By Action NOT DISTRACTED			

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UNIT INDIVIDUAL 01	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				
UNIT TRUCK BUS 01	Carrier				
	<input checked="" type="checkbox"/> Use Vehicle Owner Same as Carrier		Source VEHICLE-SIDE		
	Name TOWN & COUNTRY SANITATION INC USDOT# 495587		Address 104 N PARK ST PO BOX 7 BOSCOBEL, WI 53805 , US		
	GVWR 10,001-26,000 LBS		Vehicle Configuration SINGLE UNIT TRUCK (3 OR MORE AXLES)		Cargo Body Type GARBAGE/REFUSE
	US DOT # 495587		Carrier Type INTRASTATE CARRIER		Permitted Load NOT APPLICABLE
	<input type="checkbox"/> OS/OW Load	WI Permit Number	<input type="checkbox"/> Permitted Vehicle On Permitted Route	<input type="checkbox"/> Escort Vehicle Required By Permit	<input type="checkbox"/> Escort Vehicle Present
	Measured Height		Measured Length		Measured Width
					Measured Weight

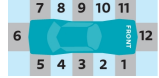
Unit Summary

UNIT 02	Unit Status IN TRANSIT		Vehicle Operating As Classification A CLASS		Unit Type TRUCK
	Vehicle Type TRUCK TRACTOR (SEMI ATTACHED)				Operating As Endorsements
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 1	Total HazMat Types 0
	Insurance? YES	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	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 DOWNHILL

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Truck Bus or HazMat TRUCK OR TRUCK COMBINATION > 10,000LBS GVWR/GCWR					
UNIT	VEHICLE	Vehicle			
		License Plate Number 3433320	Plate Type APO	St IN	Country of Issuance UNITED STATES
		Vehicle Identification Number 3AKJHHDR4JSJW7379	Make FRHT	Year 2018	Model
		Color WHI - WHITE	Body Style TC - TRACTOR	Bus Use	
		Initial Contact Point 02 - RIGHT SIDE FRONT	Vehicle Damage 02 - RIGHT SIDE FRONT		
		Extent Of Damage MINOR DAMAGE			
		Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR		
		What Driver Was Doing OVERTAKE LEFT	Vehicle Factors		
		Driver Prior Action Other	NOT APPLICABLE		
		Driver Actions NO CONTRIBUTING ACTION			
UNIT	VEHICLE	Owner Name PIGGY BACK LEASING INC		Owner Address 411 BLAINE ST GARY, IN 46406 , US	
		Sequence Of Events			
		Event CARGO/EQUIPMENT LOSS OR SHIFT			
		Event MOTOR VEH IN TRANSPORT			
		Event			
		Event			
		Policy Holder			
		Insurance Company HUDSON-INS-CO		ORGANIZATION/COMPANY PIGGY BACK LEASING INC	
		Trailer/Towed			
		Trailer Plate # 397099ST	Plate Type STL	Make HYTR	State IL
Unit Type SEMI TRAILER	ORGANIZATION/COMPANY PIGGY BACK LEASING INC			Address 411 BLAINE ST GARY, IN 46406 , US	
Vehicle Identification Number 3H3V532CXAT262020					
IT	IDUAL	Individual			
		DRIVER JAWAD AL ZUBAIDI (919) 433-7675		Citations Issued 0	Sex MALE
		Date of Birth		Race	

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UN	INDIV	Address 10821 S KEATING AVE APT 2NW OAK LAWN, IL 60453 , US		Driver License Number STATE: ILLINOIS COUNTRY: UNITED STATES		
		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	
02	002	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				
		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	
02	002	Drug Type				
		Individual Condition APPEARED NORMAL				
		Carrier				
		<input checked="" type="checkbox"/> Use Vehicle Owner Same as Carrier		Source VEHICLE-SIDE		
		Name PIGGY BACK LEASING INC USDOT# 128493		Address 411 BLAINE ST GARY, IN 46406 , US		

Wisconsin Motor Vehicle Crash
Form DT4000

This report does not include any CJIS data.
6 of 7

Crash Date 07/31/2025
Crash Time 12:36 PM

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UNIT	TRUCK BUS	GVWR MORE THAN 26,000 LB		Vehicle Configuration TRUCK TRACTOR/SEMI-TRAILER		Cargo Body Type VAN/ENCLOSED BOX		
		US DOT # 128493		Carrier Type INTERSTATE CARRIER		Permitted Load NOT APPLICABLE		
		<input type="checkbox"/> OS/OW Load	WI Permit Number	<input type="checkbox"/> Permitted Vehicle On Permitted Route	<input type="checkbox"/> Escort Vehicle Required By Permit	<input type="checkbox"/> Escort Vehicle Present		
		Measured Height		Measured Length		Measured Width		Measured Weight