6TL09PBQ8B

18-01858

WISCONSIN MOTOR VEHICLE CRASH REPORT

Document Number Overri	de Primary Crash	Document #					g Officer/Deputy B. STODDARD		
Crash Date 02/20/2018	Crash Time 06:50 PM			rived 2018	Time Arrived 09:37 PM				
Pate Notified 12/20/2018	Time Notified 06:53 PM		Total U 01	nits	Total Injured	Total Kill	Total Killed		
On Emergency	Hit and Run	it and Run Lane Clos		Work Zone	Trailer	or Towed	Reporting Threshold		
Government Property	Active So	chool Zone	School NO	Bus Related	Tags				
Reportable	Crash Type PRIVATE PR	OPERTY/PAR	KING LO	-	Ameno	led	Secondary Crash		
escription =					1		-		
	Fence	CTH W/Sou	ith Blvd - I151 Sou	th Blvd		Photos By Additional Info	ormation		
Φ				Baraboo Storag	e				
				Not to Se	cale				
I, a sworn law enfo				any CJIS data in th	nis report.				

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	Loc	ation										
	PRIVATE PROPERTY								Longitud	de		
	1151 CTHW EB (HOUSE/BUILDING 1151)						79697		-89.760	0997411		
							ate		dinate			
	IN T	HE TOWN OF BARAB	00			276636.5			481558	39		
	IN S	SAUK COUNTY	Structure HOUSE/	Type BUILDING	;							
	Cra	sh Scene										
		Harmful Event				First Harm	nful Event Lo	ocation				
	FEN							OF-WAY (TI	RAFFICW	/AY)		
	Man	ner of Collision				Light Con		`				
	NO	COLLISION W/VEHICL	E IN TRANSPORT			DARK/L						
	Road	d Surface Condition(s)				Roadway	Factor(s)					
	DRY	1										
	Envi	ronment Factor(s)										
	пои	NE				NONE						
	Wea	ther Condition(s)										
	CLE	EAR										
	Anim	nal Type					Relation To Trafficway NON TRAFFICWAY - PARKING LOT					
	Cras	h Classification - Location				_	ssification -					
	PRI	VATE PROPERTY				PRIVATE PROPERTY						
	Triba	al Land				Access Control NO CONTROL				Special Study		
	With	in Interchange Area	Junction Location			ction Type						
	NO		NON-JUNCTION		NOT AN	T AN INTERSECTION						
	Uni	t Summary 💳										
		Status		-	_	Classification Unit Type						
		IN TRANSIT D CLASS					TRUCK					
01		cle Type RAIGHT TRUCK (INSER	Operating As Endorsements									
		l Occs	Train/Bus # Injured	Total # Cita	ations Issued	d Total Trail		ilers Total Ha		zMat Types		
	1	. 0000		0	0 Speed Lin		0		71			
	Insu	rance?	Direction Of Travel	Pre CrashTi			nit	Total Lan	ies			
⊢	YES	3		Mark								
UNIT		t Harmful Event: Collision V	Vith	Special Fur		TION		Emergency Motor Vehicle Use NOT APPLICABLE				
	FEN				NO SPECIAL FUNC		711ON					
		ic Way R KING LOT OR PRIVA T	TE DDODEDTY	Traffic Cont					Traffic Control Inoperative/Missing NO			
		ace Type	IE PROPERTI		NO CONTROL Road Curvature			Road Grade LEVEL				
		NCRETE	I T									
		k Bus or HazMat										
	TRU	JCK OR TRUCK COMB	BINATION > 10,000LBS G	VWR/GCWR								
	,	Vehicle										
		License Plate Number	Plate Type	Plate Type		St		Country of Issuance				
		AG76896				AZ						
5	2	Vehicle Identification Num 1FDNF6CYXGDB0068		Make FORD			Year 2016	Model F650				
_	J	Color	Body Style			Bus Use						
		WHI - WHITE	TK - TRUCK									
	Щ	Initial Contact Point	Vehicle Damage									
╘	5	10LEFT SIDE FRON	- ·									
LIND	/EHICL	7LEFT R SIDE FRO				AR CORNER, 8LEFT SIDE REAR, 9LEFT SIDE MIDDLE, 10LEFT T						
	>	MINOR DAMAGE										

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		Towed Due To Dama	age		e Removed By						
		NOT TOWED		OPE	RATOR						
		What Driver Was Doing			Vehicle Factors						
		GOING STRAIGHT			NOT APPLICABLE						
		Driver Prior Action Other									
		Driver Actions									
		Driver Actions NO CONTRIBUTION	NG ACTION								
_	LE	NO CONTRIBOTII	NG ACTION								
UNIT	VEHICL										
5	표										
	7										
		Driver Distractions NOT DISTRACTE	n								
		NOT DIGITAGIE									
7	01										
J	0										
		Owner Name U-HAUL CO OF A	ARIZONA	0	Owner Address						
		0 11/102 00 01 71		Р	O BOX 21508						
				P	HOENIX, AZ 85036 1508, US						
		0 0/ 5									
	•	Sequence Of E	vents								
	10	FENCE									
		Event									
	02	Event									
		Event									
	03	LVOIR									
	_	Event									
	04										
⊨	i	Policy Holder									
UNIT	Insurance Company				ividual						
_		U-HAUL		TH	OMAS MCGRATH						
	ı	Individual									
		Driver	- A-T-1	Cita 0	ations Issued	Sex					
	Ļ	THOMAS J MCGRATH (779) 703-1317				MALE					
	۸U				e of Birth	Race WHITE					
	INDIVIDUA					WHILE					
5	\leq	Address 16854 S IVY LN		Driver License Number							
	Z	LOCKPORT, IL 60	0441 .US	STATE: ILLINOIS COUNTRY: UNITED STATES							
		200111 01(1,12 00441 , 00									
			On Duty Crash	Cof	ety Equipment						
		Equipment	On Duty Clash	Said	ety Equipment						
		Seat Position		СН	OULDER & LAP BELT						
		1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY			SHOULDER & LAF BELT						
		Helmet Use			Helmet Compliance						
		Troumot 000			Tomos Compilario						
		Eye Protection			Tint Compliance						
_	Ξ		Injury Severity	Airb	pag						
7	00	Injury	NO APPARENT INJURY	NO	N DEPLOYED						
		Ejected			ction Path	Trapped/Extricated					
		NOT EJECTED		NO	T EJECTED/NOT APPLICABL	NOT TRAPPED					

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		Medical Transport NOT TRANSPORTED				EMS Agency Identifier			EMS Run #				
		Hospital				Date of Death				Time of Death			
		, roopha							Time of Bodin				
	,	Non Motorist Striking Unit # Prior Action			Location		·			To/From School			
		Action			l								
	۲												
—	INDIVIDUAL												
LIND	VIC												
_	N												
	=												
		Action Other											
		Action Other											
		rug & Alcohol	Suspected	Alcohol U	se	Suspe NO	cted Drug Us	se					
	<i></i>	Drug & Alcohol No					J Toot Turns			TALLET OF B			
		Alcohol Test Given TEST NOT GIVEN				Alcohol Test Type				Alcohol Test Results			
		Drug Test Given				Drug T	est Type			Drug Test Results			
	_	TEST NOT GIVEN											
5	001	Drug Type											
		Individual Condition											
		APPEARED NORMAL											
	Ċ	Carrier											
			/ehicle O	wner Sam	ne as Carrier		Source						
		Nama					DRIVER Address						
2	01	Name					Address						
							, ,						
	S	GVWR		onfiguration	Caro				rgo Body Type				
╘	BUS	_							_	VAN/ENCLOSED BOX			
LNO	χ	¥ US DOT # Carrier Type						Pern	rmitted Load				
	TRUC	OS/OW Load WI Permit Nu		Number			itted Vehicle On Escort		Vehicle Required By Permit			scort Vehicle Present	
	·	Measured Height Measured Length				Measured Width			Measured Weight				
	D												
	Orga	perty Owner				Address							
2	REN	Organization/Company REMS				Address 1151 SOUTH BLVD BARABOO, WI 53913, US							
PROP OWNER	(000	608) 356-5050					DAIABOO, WI 33313 , 03						
	Fixe	d Objects Stru	ck										
		Striking Unit Str	uck Object							Structure Number	er C	Damage Tag Number	
	5	01 FE	NCE										