

6TL0BMQKT4
18-02536

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 6TL09QKRC6		Primary Crash Document #	Agency Crash Number 18-02536	Investigating Officer/Deputy DEPUTY S. STACEY	
Crash Date 03/10/2018		Crash Time 03:15 PM	Date Arrived 03/10/2018	Time Arrived 03:38 PM	
Date Notified 03/10/2018		Time Notified 03:24 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 checked="" type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

Description

<p>Diagram</p>	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.

UNIT 2 WAS TRAVELING SOUTHBOUND ON HWY 23. UNIT 1 WAS BEHIND UNIT 2 TRAVELING SOUTHBOUND ON HWY 23. UNIT 2 TURNED RIGHT, BUT THEN TURNED LEFT TOWARDS WALNUT ST. TO MAKE A U-TURN. UNIT 1 DID NOT OBSERVE UNIT 2'S TURN SIGNAL INDICATING HE WAS TURNING IN EITHER DIRECTION. UNIT 1 ATTEMPTED TO AVOID A COLLISION BY TRAVELING IN THE NORTH BOUND LANE. THE LEFT FRONT OF UNIT 2 STRUCK THE RIGHT SIDE OF UNIT 1. UNIT 1 CAME TO REST EAST BOUND ON WALNUT STREET. UNIT 2 CAME TO REST NORTH BOUND ON HWY 23.

NEW INFORMATION GIVEN

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Location

ON S MAIN ST/ STH23 EB 53 FT N OF WALNUT ST/ STH154 EB IN THE VILLAGE OF LOGANVILLE IN SAUK COUNTY	Latitude 43.440535445	Longitude -90.036728222
	X Coordinate 254250.515625	Y Coordinate 4814217.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 08--FRONT TO SIDE	Light Condition DAYLIGHT	
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 INTERSECTION-RELATED	Intersection Type FOUR-WAY INTERSECTION

Unit Summary

UNIT	01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE
		Vehicle Type PASSENGER CAR	Operating As Endorsements		
	Total Occs 2	Train/Bus # Injured	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel SOUTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 25	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				
01	01	Vehicle			
		License Plate Number AAB4591	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 2G2FS22K0V2228119	Make PONTIAC	Year 1997	Model FIREBIRD
		Color BLK - BLACK	Body Style 2H - HATCHBACK 2 DOOR	Bus Use NOT A BUS	
		Initial Contact Point 1--RIGHT FRONT CORNER			

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UNIT	VEHICLE	Vehicle Damage		
		Extent Of Damage FUNCTIONAL DAMAGE	1--RIGHT FRONT CORNER, 2--RIGHT SIDE FRONT, 3--RIGHT SIDE MIDDLE	
		Towed Due To Damage NOT TOWED	Vehicle Removed By ARNESON SERVICE	
		What Driver Was Doing GOING STRAIGHT	Vehicle Factors	
UNIT	VEHICLE	Driver Prior Action Other	NOT APPLICABLE	
		Driver Actions NO CONTRIBUTING ACTION		
		Driver Distractions NOT DISTRACTED		
		Owner Name THEODORE MOELLERS (608) 987-2893	Owner Address 4229 E BARRELTOWN RD MINERAL POINT, WI 53565 , US	
UNIT	VEHICLE	Sequence Of Events		
		01	Event MOTOR VEH IN TRANSPORT	
		02	Event	
		03	Event	
		04	Event	
UNIT	INDIVIDUAL	Policy Holder		
		Insurance Company WADENA-INSURANCE-CO	Individual THEODORE MOELLERS	
		Individual		
UNIT	INDIVIDUAL	Driver JACOB MOELLERS (608) 987-2893	Citations Issued 0	Sex MALE
			Date of Birth	Race WHITE
		Address 4229 E BARRELTOWN RD MINERAL POINT, WI 53565 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
UNIT	INDIVIDUAL	Equipment	On Duty Crash	Safety Equipment
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		SHOULDER & LAP BELT
		Helmet Use		Helmet Compliance
		Eye Protection		Tint Compliance

WISCONSIN MOTOR VEHICLE
CRASH REPORT

01	UNIT	INDIVIDUAL	001	Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED		
			Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABL	Trapped/Extricated NOT TRAPPED			
			Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #			
			Hospital	Date of Death	Time of Death			
			Non Motorist	Striking Unit #	Prior Action	Location	To/From School	
			Action					
			Action Other					
			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			
001	Drug Type							
Individual Condition	APPEARED NORMAL							
01	UNIT	INDIVIDUAL	Individual					
			Passenger COLTON WILSON (608) 206-6990	Citations Issued 0	Sex MALE			
				Date of Birth	Race WHITE			
			Address 610 S WISCONSIN ST MINERAL POINT, WI 53565 , US	Driver License Number	STATE: WISCONSIN COUNTRY: UNITED STATES			
			Equipment	On Duty Crash	Safety Equipment			
			Seat Position 3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER	SHOULDER & LAP BELT				
			Helmet Use	Helmet Compliance				
			Eye Protection	Tint Compliance				
			002	Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED		
			Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABL	Trapped/Extricated NOT TRAPPED			
Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #						

WISCONSIN MOTOR VEHICLE CRASH REPORT

UNIT INDIVIDUAL	Hospital	Date of Death	Time of Death		
	Non Motorist	Striking Unit #	Prior Action	Location	To/From School
	Action				
	Action Other				
	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				
	01	002			

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 # Injured	Total # Citations Issued 1	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 25	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	Plate Type	St	Country of Issuance	
		Vehicle Identification Number 2G2WS522241276758	Make PONTIAC	Year 2005	Model GRAND PRIX	
		Color WHI - WHITE	Body Style 4D - 4DR		Bus Use NOT A BUS	
		Initial Contact Point 10--LEFT SIDE FRONT	Vehicle Damage			
		Extent Of Damage FUNCTIONAL DAMAGE	10--LEFT SIDE FRONT, 11--LEFT FRONT CORNER, 12--FRONT			
		Towed Due To Damage NOT TOWED	Vehicle Removed By			

WISCONSIN MOTOR VEHICLE
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UNIT	VEHICLE	What Driver Was Doing LEFT TURN	Vehicle Factors			
		Driver Prior Action Other	NOT APPLICABLE			
		Driver Actions NO CONTRIBUTING ACTION				
		Driver Distractions NOT DISTRACTED				
02	02	Owner Name TARA GORDON	Owner Address 512 10TH ST BARABOO, WI 53913 , US			
		Sequence Of Events				
UNIT	INDIVIDUAL	01	Event LEFT TURN			
		02	Event MOTOR VEH IN TRANSPORT			
		03	Event			
		04	Event			
UNIT	INDIVIDUAL	Policy Holder				
		Insurance Company DAIRYLAND-INS-CO	Individual MARK MEDEN			
UNIT	INDIVIDUAL	Individual				
		Driver MARK MEDEN (608) 393-5481	Citations Issued 1	Sex MALE		
UNIT	INDIVIDUAL	Date of Birth	Race WHITE			
		Address S3071 DEER TRL BARABOO, WI 53913 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
02	003	Equipment	On Duty Crash	Safety Equipment		
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY	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 APPLICABL	Trapped/Extricated NOT TRAPPED		
Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #				

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UNIT	Hospital		Date of Death		Time of Death	
	Non Motorist		Striking Unit #	Prior Action	Location	To/From School
	Action					
	Action Other					
	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	UTC Number AE754418	Issue To? 003	Statute Number 344.62(2)	Seq Num 001	Description OPERATE MOTOR VEHICLE W/O PROOF OF INSURANCE	