

6TL0B7D6PJ
18-03757

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 18-03757	Investigating Officer/Deputy DEPUTY A. SUKOWATEY	
Crash Date 04/14/2018		Crash Time 05:55 AM	Date Arrived 04/14/2018	Time Arrived 06:02 AM	
Date Notified 04/14/2018		Time Notified 05:59 AM	Total Units 02	Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input checked="" 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 type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

Description

Diagram Not to Scale HWY 14 Unit 2 Unit 1 Unit 1	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.

THE OPERATOR OF UNIT ONE WAS TRAVELING EASTBOUND ON HWY 14 WHEN DUE TO ROAD CONDITIONS HE LOST CONTROL OF HIS MOTOR VEHICLE STRIKING THE REAR TIRE ON THE TRAILER OF A SEMI TRAVELING WESTBOUND. THE SEMI DID NOT STOP, AND THE DRIVER OF UNIT ONE DID NOT THINK THERE WAS ANY DAMAGE TO THE SEMI. IT IS POSSIBLE THE SEMI DID NOT KNOW OF THE ACCIDENT.

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Location

ON USH14 EB 487 FT E OF BIG HOLLOW RD IN THE TOWN OF SPRING GREEN IN SAUK COUNTY	Latitude 43.189809223	Longitude -90.11167311
	X Coordinate 247146.71875	Y Coordinate 4786595
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 06--SIDESWIPE/OPPOSITE DIRECTION	Light Condition DAWN	
Road Surface Condition(s) WET, SNOW, SLUSH, ICE	Roadway Factor(s) NONE	
Environment Factor(s) WEATHER CONDITIONS		
Weather Condition(s) CLOUDY, SNOW, SLEET/HAIL		
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 AUTOMOBILE			
	Vehicle Type PASSENGER CAR	Operating As Endorsements				
	Total Occs 1	Train/Bus # Injured	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 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 LEVEL		
	Truck Bus or HazMat NO					

UNIT 01	Vehicle			
	License Plate Number 198XVU	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 5TDZA22C95S387207	Make TOYOTA	Year 2005	Model SIENNA XLE
	Color WHI - WHITE	Body Style VN - VAN		Bus Use NOT A BUS
	Initial Contact Point 12--FRONT	Vehicle Damage		
Extent Of Damage FUNCTIONAL DAMAGE	1--RIGHT FRONT CORNER, 11--LEFT FRONT CORNER, 12--FRONT			

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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 SPEED TOO FAST/COND				
01	01	Driver Distractions UNKNOWN IF DISTRACTED				
		Owner Name CASEY E LIPPINCOTT (608) 459-5062		Owner Address 33173 CHAD RD LONE ROCK, WI 53556 , US		
Sequence Of Events						
UNIT	INDIVIDUAL	01	Event CROSS CENTERLINE			
		02	Event MOTOR VEH IN TRANSPORT			
		03	Event			
		04	Event			
Policy Holder						
UNIT	INDIVIDUAL	Insurance Company GEICO-GENERAL-INS-CO		Individual CASEY LIPPINCOTT		
		Driver CASEY E LIPPINCOTT (608) 459-5062		Citations Issued 0	Sex MALE	
		Address 33173 CHAD RD LONE ROCK, WI 53556 , US		Date of Birth [REDACTED]	Race WHITE	
				Driver License Number [REDACTED]		STATE: WISCONSIN COUNTRY: UNITED STATES
01	001	Equipment		On Duty Crash		
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		Safety Equipment 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

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UNIT INDIVIDUAL 01 001	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		
	Drug Type				
	Individual Condition NOT OBSERVED				

Unit Summary

UNIT 02	Unit Status HIT AND RUN	Vehicle Operating As Classification D CLASS	Unit Type TRUCK		
	Vehicle Type AGCMV (AG COMMERCIAL MOTOR VEHICLE)	Operating As Endorsements			
	Total Occs 1	Train/Bus # Injured	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? UNKNOWN	Direction Of Travel WESTBOUND	<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 LEVEL		
	Truck Bus or HazMat TRUCK OR TRUCK COMBINATION > 10,000LBS GVWR/GCWR				

UNIT VEHICLE 02 02	Vehicle			
	License Plate Number	Plate Type	St	Country of Issuance
	Vehicle Identification Number	Make	Year	Model
	Color	Body Style	Bus Use NOT A BUS	
	Initial Contact Point UNKNOWN	Vehicle Damage		
	Extent Of Damage UNKNOWN	UNKNOWN		

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		What Driver Was Doing UNKNOWN		Vehicle Factors		
		Driver Prior Action Other		UNKNOWN		
		Driver Actions UNKNOWN				
02	02	Driver Distractions UNKNOWN IF DISTRACTED				
		Owner Name		Owner Address		
Sequence Of Events						
UNIT	INDIVIDUAL	01	Event MOTOR VEH IN TRANSPORT			
		02	Event			
		03	Event			
		04	Event			
02	002	Individual				
		Driver UNKNOWN UNKNOWN		Citations Issued 0	Sex	
				Date of Birth	Race	
		Address UNKNOW UNKNOWN, ,		Driver License Number		
		Equipment		On Duty Crash	Safety Equipment	
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		NONE USED - VEHICLE OCCUPANT		
		Helmet Use		Helmet Compliance		
		Eye Protection		Tint Compliance		
		Injury		Injury Severity NO APPARENT INJURY	Airbag NOT APPLICABLE	
		Ejected NOT APPLICABLE		Ejection Path NOT EJECTED/NOT APPLICABL	Trapped/Extricated NOT APPLICABLE	
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	Non Motorist		Striking Unit #	Prior Action	Location	To/From School	
	Action						
	Action Other						
	Drug & Alcohol		Suspected Alcohol Use		Suspected Drug Use		
	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 NOT OBSERVED						
	02	002	Carrier				
<input type="checkbox"/> Use Vehicle Owner Same as Carrier			Source				
Name			Address				
GVWR			Vehicle Configuration		Cargo Body Type		
US DOT #			Carrier Type		Permitted Load		
<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	TRUCK BUS	01					