18-03987

# WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT BARABOO, WI 53913 (608) 356-4895

	Document Number Override		1		Agency 18-039	Crash Number	0 0	Investigating Officer/Deputy DEPUTY S. STACEY			
CD	Crash Date <b>04/20/2018</b>		0.00		Date Arrived <b>04/20/2018</b>		Time Arrived 03:18 PM				
١KR	Date Notified <b>04/20/2018</b>		Time Notified 03:12 PM		Total Units <b>02</b>		Total Injured <b>00</b>	Total Killed <b>00</b>			
09വ	On Emergency Hit		and Run	Lane Closu	ire	Work Zone			Reporting Threshold		
6TL	Government Property		Active School Zone Scho			Bus Related	Tags				
•	<b>✓</b> Reportable	Crash Type DT4000 (STA	ype D (STANDARD CRASH)			Amended			Secondary Crash		
ĺ	Description =										

# Photos By Photos By USH 12 Off Ramp CTH BD NOT TO SCALE

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

UNIT 1 WAS TRAVELING SOUTHBOUND ON CTH BD. UNIT 2 WAS EXITING USH 12 TO GO NORTH BOUND ONTO FERN DELL ROAD. UNIT 2 PROCEEDED TO GO AROUND THE ROUND ABOUT. UNIT 1 STRUCK THE LEFT SIDE OF UNIT 2. UNIT 1 STATED UNIT 2 DID NOT STOP, AND THEY ATTEMPTED TO TURN TO THE LEFT TO AVOID UNIT 2, WHICH CAUSED DAMAGE TO THE PASSENGER SIDE OF UNIT 1, AS IT SIDE SWIPED THE TRAILER UNIT 2 WAS TOWING. UNIT 1 CONTINUED UNIT 2 STATED THEY DID YIELD PRIOR TO ENTERING THE ROUND ABOUT, AND DID NOT OBSERVE UNIT 1. UNIT 1 WAS ABLE TO MOVE THEIR VEHICLE OUT OF THE ROADWAY ONTO FERN DELL ROAD. UNIT 1 CAME TO REST IN THE ROUND ABOUT.

Wisconsin Motor Vehicle Crash

Form DT4000

Crash Date **04/20/2018**Crash Time **03:10 PM** 

# 6TL09QKRCD 18-03987

Location

# **WISCONSIN MOTOR VEHICLE CRASH REPORT**

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT **BARABOO, WI 53913** (608) 356-4895

	729 OF	USH12 EB FT N CTHBD SB			Latitude 43.557808463  X Coordinate			-89.7793	34127	
		HE TOWN OF DELT AUK COUNTY	ON			5.9375		4826515		
					Structu NO ST	re Type <b>RUCTURE</b>	İ			
(	Cra	sh Scene =								
Ī		Harmful Event				armful Event	Location			
	_	FOR VEH IN TRANS	PORT			DADWAY				
		ner of Collision FRONT TO SIDE				Light Condition  DAYLIGHT				
-		d Surface Condition(s)				Roadway Factor(s)				
	DRY	. ,			, todaii	ay : doto:(0)				
-										
		ronment Factor(s)			None					
	NOI	NE			NONE					
Ī	Wea	ther Condition(s)								
	CLE	AR								
-	Anim	nal Type			Relation	n To Trafficw	ay			
					TRAF	FICWAY - (	ON ROAD			
		h Classification - Location	on				- Jurisdiction	•		
-		BLIC PROPERTY			NO SPECIAL JURIS  Access Control			RISDICTION Special Study		
	TIDE	ii Lanu				ONTROL			Special Study	
F		in Interchange Area	Junction Location		Intersection Type			<u>.                                    </u>		
L	NO		EXIT RAMP-RELATED		NOT AN INTERS	SECTION				
U		t Summary $\blacksquare$								
	·				rating As Classificat	ion	Unit Type			
-		RANSIT		D CLASS			AUTOMO	As Endorsem	nente	
5	Vehicle Type (SPORT) UTILITY VEHICLE						Operating	AS LIIUUISEIII	ienis	
-	•	Occs	Train/Bus # Injured	Total # Citat	ions Issued	Total Tra	ailers	Total HazN	Mat Types	
	3		·	0		35		0		
F	Insu	ance?	Direction Of Travel	Pre (	CrashTire			Total Lane	nes	
	YES		SOUTHBOUND		Mark			2		
		Harmful Event: Collision		Special Fund	ction IAL FUNCTION			Emergency Motor Vehicle Use NOT APPLICABLE		
-		ic Way	PURI	Traffic Contr		Traffic Control Inoperative/Miss			ve/Missing	
		D-WAY, NOT DIVIDE	D	YIELD SIG			NO		g	
-	Surfa	ace Type		Road Curva	ture		Road Grad	le		
	BLA	CKTOP (BITUMINO	US)	CURVE LE	EFT		LEVEL			
		k Bus or HazMat								
	NO									
	'	Vehicle		T = =		I a:	10			
		License Plate Number <b>722YSP</b>		Plate Type	TOMOBILE	St <b>WI</b>	Country of I			
		Vehicle Identification N	umher	Make	TOMOBILE	Year	Model	INIES		
5	2	5GZCZ23D44S8831		SATURN		2004	VUE			
		Color		Body Style		1	Bus Use			
		SIL - SILVER (ALUI	MINUM)		RT UTILITY VEH	ICLE	NOT A BU	18		
ال	쁘	Initial Contact Point		Vehicle Dai	mage					
	EHICL	12FRONT Extent Of Damage							HT SIDE MIDDLE, 10-	
∍∣	中	DISABLING DAMA	GE	-LEFT SIDE FRONT, 11LEFT FRONT CORNER, 12FRONT, UNDERCARRIA					T, UNDERCARRIAGE	
				I						
iooo	acin N	Notor Vehicle Crash	Т	his report does not	include any CJIS da	ta.		Crash Date	04/20/2018	

18-03987

# WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT BARABOO, WI 53913 (608) 356-4895

		Towed Due To Dama	age	Veł	nicle Removed By					
		TOWED DUE TO I	DISABLING DAMAGE	BIL	LS TOWING					
		What Driver Was Doi	9	Veł	nicle Factors					
		NEGOTIATING CU	URVE		T 4 DD 10 4 D 1 E					
		Driver Prior Action Ot	ther	NC	T APPLICABLE					
		Driver Actions								
	ш	NO CONTRIBUTION	NG ACTION							
$\vdash$										
LIND	$\exists$									
7	VEHICL									
		Driver Distractions	<b>D</b>							
		NOT DISTRACTE	Ь							
2	01									
		Owner Name			Owner Address					
		MARIA ZABAWA	L		1943 GROVE AVE					
		(608) 339-8991			FRIENDSHIP, WI 53934 , US					
		Sequence Of E	vents							
	7	Event LEFT TURN								
	02	Event MOTOR VEH IN T	RANSPORT							
	~	Event								
	03									
	04	Event								
١	ļ	Policy Holder								
LNO		Insurance Company	N ACCIO INC CO		ndividual					
		PROGRESSIVE-C	LASSIC-INS-CO	ľ	MARIA ZABAWA					
		Individual		1,	Ditations Issued	Lo				
		Driver MARIA ZABAWA			Citations Issued	Sex FEMALE				
	AL	(608) 339-8991			Pate of Birth	Race				
⊢│	INDIVIDUA				out of Billin	WHITE				
EN O	Ξ	Address		[	Driver License Number					
٦	9	1943 GROVE AVE			STATE: WISCONSIN COUNTRY: UN	HTED STATES				
	=	FRIENDSHIP, WI	53934 , US	`	STATE: WISCONSIN COUNTRY: UN	IIIED STATES				
		Equipment	On Duty Crash	5	Safety Equipment					
		Seat Position		۷,	SHOULDER & LAP BELT					
			LEFT SIDE (DRIVER/MOTORCY	`	MOOLDEN & LAI BEET					
		Helmet Use		ŀ	Helmet Compliance					
					•					
		Eye Protection		1	int Compliance					
2	001	Injury	Injury Severity		Airbag					
	١	Ejected	NO APPARENT INJURY		NON DEPLOYED Ejection Path	Trapped/Extricated				
		NOT EJECTED			NOT EJECTED/NOT APPLICABL	NOT TRAPPED				
						1				

18-03987

# **WISCONSIN MOTOR VEHICLE CRASH REPORT**

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT **BARABOO, WI 53913** (608) 356-4895

		Medical Transport			EMC 4 11	fia.	EMC D #		
					EMS Agency Identi	itier	EMS Run #		
		NOT TRANSPOR	TED						
		Hospital			Date of Death		Time of Death		
			Striking Unit #	Prior Action		Location		To/From School	
		Non Motorist	Striking Onit #	PHOI ACTION	Location			10/FIOIII SCHOOL	
		Action							
	ب								
	INDIVIDUAL								
$\vdash$	$\geq$								
LIND	Ħ								
$\supset$	$\leq$								
	爿								
	=								
		Action Other							
			Suspected Alcohol U	loo	Suspected Drug Us	20			
		Orug & Alcohol	Suspected Alcohol t	Jse	NO	se			
	L	orug & Alconor	INO		INO				
		Alcohol Test Given			Alcohol Test Type		Alcohol Test Results		
		TEST NOT GIVEN	ı		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
					D T .T				
		Drug Test Given			Drug Test Type		Drug Test Results		
		TEŠT NOT GIVEN	•						
_	_	Drug Type			I				
9	901	3 71 -							
		Individual Condition							
		Individual Condition							
		APPEARED NOR	MAI						
		ALL LAKED NOK	IVIAL						
		Individual							
		Passenger			Citations Issued		Sex		
		CAIDEN LOOMIS	6		0		MALE		
	4	(608) 339-8991							
	3	l` <i>′</i>			Date of Birth		Race WHITE		
╘	INDIVIDUAL						WHILE		
	≥	Address			Driver License Nun	nber	•		
$\supset$		1943 GROVE AVE	<b>=</b>						
	Z	FRIENDSHIP, WI							
		,							
			On Duty Crash		Safety Equipment				
		Equipment			1 ' ' '				
		Seat Position			SHOULDER & L	AD DELT			
					SHOULDER & L	AF DELI			
		6SECOND SEAT	T-RIGHT SIDE						
		Helmet Use			Helmet Compliance	Э			
					Tomas Compilation				
		Eye Protection			Tint Committee				
		Eye Flotection			Tint Compliance				
_	005		Injury Severity		Airbag				
5	ŏ	Injury	NO APPARENT I	NJURY	NON DEPLOYE	D			
		Ejected			Ejection Path		Trapped/Extricated		
		· ·				NOT ADDI IOADI			
		NOT EJECTED				NOT APPLICABL	NOT TRAPPED		
	Medical Transport				EMS Agency Identi	ifier	EMS Run #		
	NOT TRANSPORTED								
					Date of Death		Time of Death		
	Hospital		Date of Death	Date of Death		Time of Death			
		Non Metaulat	Striking Unit #	Prior Action		Location		To/From School	
		Non Motorist							
				I		l .		1	

18-03987

# WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT BARABOO, WI 53913 (608) 356-4895

Crash Date 04/20/2018

		Action							
LINO	INDIVIDUAL								
		Action Other							
	E	Orug & Alcohol	Suspected Alcohol U NO	se	Suspected Drug U	se			
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type		Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN			Drug Test Type	Test Type Drug Test Results			
5	005	Drug Type			1		1		
		Individual Condition  APPEARED NORMAL							
		Individual							
		Passenger CALEB HOFFMA	N		Citations Issued  0		Sex MALE		
_	DUAL	(608) 339-8991			Date of Birth		Race WHITE		
LIND	INDIVIDUA	Address 1943 GROVE AVE FRIENDSHIP, WI 53934,US			Driver License Nur	nber			
		Equipment	On Duty Crash		Safety Equipment				
		Seat Position 4SECOND SEAT	-LEFT SIDE(MOTO	DRCYCLE/BI	SHOULDER & LAP BELT				
		Helmet Use			Helmet Compliance				
		Eye Protection			Tint Compliance				
2	003	Injury	Injury Severity NO APPARENT II	NJURY	Airbag NON DEPLOYE	:D			
		Ejected			Ejection Path	NOT ADDI ICADI	Trapped/Extricated		
		NOT EJECTED  Medical Transport			EMS Agency Ident	NOT APPLICABL	NOT TRAPPED  EMS Run #		
		NOT TRANSPORT	ED						
		Hospital			Date of Death		Time of Death		
		Non Motorist	Striking Unit #	Prior Action	<u> </u>	Location	1	To/From School	

18-03987

# WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT BARABOO, WI 53913 (608) 356-4895

LIND	INDIVIDUAL	Action  Action Other								
		Sus	pected Alcohol Use		spected Drug Use					
	L	Prug & Alcohol NO		NO						
		Alcohol Test Given TEST NOT GIVEN		Alco	ohol Test Type		Alcohol Tes	t Results		
		Drug Test Given TEST NOT GIVEN		Dru	g Test Type		Drug Test R	desults		
10	003	Drug Type								
		1 5 1 10 5								
		Individual Condition  APPEARED NORMAL								
	l l.a.:	· Cummanı								
		nit Summary Init Status			Operating As Classification	on	Unit Type			
		RANSIT		D CLA	· -		TRUCK			
02		cle Type		L			Operating A	s Endorsements		
0		LITY TRUCK/PICKUP T	RUCK Train/Bus # Injured	1=	Oit if	T-4-  T:		T-4-111-M-4 T		
	Total Occs Train/Bus # Injured 3		0	Citations Issued	Total Trail	ers	Total HazMat Types  0			
_	Insu	rance?	Direction Of Travel  EASTBOUND		Pre CrashTire Mark	Speed Lim	nit	Total Lanes 2		
ENO.		Harmful Event: Collision W			Function PECIAL FUNCTION		NOT APP	Motor Vehicle Use LICABLE		
		ic Way D-WAY, NOT DIVIDED			Traffic Control YIELD SIGN			Traffic Control Inoperative/Missing NO		
		ace Type			Road Curvature			Road Grade		
		CKTOP (BITUMINOUS	5)	CURV	CURVE LEFT			LEVEL		
	Truc <b>NO</b>	k Bus or HazMat								
	,	Vehicle								
		License Plate Number		Plate		St	Country of Is			
		MA9750  Vehicle Identification Numl	har	LTK -	LIGHT TRUCK	WI Year	Model	TATES		
05	05	3C6UR5CL9HG588960		DOD	GE	2017	RAM			
		Color RED - RED		Body S	Style PICKUP		Bus Use NOT A BUS	S		
_	쁘	Initial Contact Point			e Damage					
LIND	VEHICL	9LEFT SIDE MIDDLE Extent Of Damage		7LE	FT REAR CORNER, 8	LEFT SID	E REAR, 9	LEFT SIDE MIDDLE		
	>	Towed Due To Damage	3E	Vehicl	e Removed By					
		NOT TOWED		7011101						
		What Driver Was Doing NEGOTIATING CURVI	<b>F</b>	Vehicl	e Factors					
		Driver Prior Action Other	-	NOT	APPLICABLE					

18-03987

# WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT BARABOO, WI 53913 (608) 356-4895

LINO	VEHICLE	Driver Actions NO CONTRIBUTIN	IG ACTION								
		Driver Distractions NOT DISTRACTED	<b>1</b>								
		NOT DISTRACTED	,								
05	02										
		Owner Name					Address				
		ROBERT HILL (608) 963-0217				E10828 HATCHERY RD BARABOO, WI 53913 , US					
		(000,000 000					,	,			
		Sequence Of Ev	vents								
	01	Event LEFT TURN									
	02	Event MOTOR VEH IN TI	DANSDORT								
		Event	KANSFORT								
	03										
	04	Event	Event								
_		Policy Holder									
UNIT		Insurance Company				Individua	I				
_		QBE-INSURANCE	-CORP			III HILL					
	1	Trailer/Towed Trailer Plate #	Plate Type	<u>,                                      </u>	Make		State	I	Countr	y of Issuance	
05		RV53563	RVT - RE		HEARTLAND		WI			ED STATES	
_	:D /	Unit Type RECREATIONAL	•	Indivi	dual BERT HILL				Addres	ss 28 HATCHERY RD	
UNIT	TRAILER/ TOWED	Vehicle Identification I	Number		) 963-0217					ARABOO, WI 53913 , US	
	H L	5SFRG4025HE325	251								
	ı	Individual									
		Driver ROBERT HILL				Citations 0	Issued			Sex MALE	
	JAL	(608) 963-0217				Date of E	Birth			Race	
╘	INDIVIDUAL									WHITE	
	DIV	Address E10828 HATCHER	Y RD			Driver Lie	cense Number				
	Z	BARABOO, WI 53				STATE	WISCONSIN	I COUNTR'	Y: UNI	TED STATES	
			On Duty Cras	h		Safety E	quipment				
		Equipment									
		Seat Position 1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY					SHOULDER & LAP BELT				
		Helmet Use	LET SIDE (L	-KIVE	IVINIOIOKCI	Helmet Compliance					
		Eye Protection				Tint Com	pliance				
02	004	Injury	Injury Severity NO APPAR		N IIIDV	Airbag	EPLOYED				
-		, ,	NO AFFAR	-141 []	1001/1	I MOM DI	LILOTED				

18-03987

# WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT BARABOO, WI 53913 (608) 356-4895

	Ejected				Ejection Path		Trapped/Extricated				
		NOT EJECTED			NOT EJECTED/	NOT APPLICABL	NOT TRAPPED				
		Medical Transport			EMS Agency Identi	ifier	EMS Run#				
		NOT TRANSPORT	TED								
		Hospital			Date of Death		Time of Death				
		Non Motorist	Striking Unit #	Prior Action		Location		To/From School			
		Action									
	AL										
⊟ا	$\mathbf{Z}$										
L N D	=										
٦	INDIVIDUAL										
	Z										
		Action Other									
					10						
	Г	Prug & Alcohol	Suspected Alcohol U	se	Suspected Drug Us	se					
	_	_	10				T				
		Alcohol Test Given	-		Alcohol Test Type		Alcohol Test Results				
		TEST NOT GIVEN									
		Drug Test Given TEST NOT GIVEN	i		Drug Test Type		Drug Test Results				
05	004	Drug Type									
	0										
		Individual Condition									
		marviadar Condition									
		APPEARED NORMAL									
	Į.	ndividual									
		Passenger			Citations Issued		Sex				
	ᆜ	GAGE HILL (608) 963-0217			0 MALE						
	N I	(000) 903-0217			Date of Birth		Race				
╘	INDIVIDUAL						WHITE				
	$\geq$	Address	3V BB		Driver License Number						
_	닐	E10828 HATCHER BARABOO, WI 53			STATE: WISCONSIN COUNTRY: UNITED STATES						
	_	BANABOO, WI 33	1913,03		OTATE: WIGOO		WILD CIAILO				
		Equipment	On Duty Crash		Safety Equipment						
		Seat Position			SHOULDER & L	AP BELT					
			RIGHT SIDE (TRAI	N ENGINEER							
		Helmet Use			Helmet Compliance	Э					
		Eye Protection			Tint Compliance						
05	900	Injury	Injury Severity	LUDY	Airbag	<b>5</b>					
	0		NO APPARENT I	NJUKY	NON DEPLOYE	ע	l = ve · · · ·				
		Ejected			Ejection Path	NOT APPLIES.	Trapped/Extricated				
		NOT EJECTED				NOT APPLICABL	NOT TRAPPED				
		Medical Transport			EMS Agency Identi	itier	EMS Run #				
		NOT TRANSPORT	IED								
		Hospital			Date of Death		Time of Death				
					1						

18-03987

# WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT BARABOO, WI 53913 (608) 356-4895

Crash Date 04/20/2018

		Non Motorist	Striking Unit #	Prior Action		Location		To/From School	
LIND	INDIVIDUAL	Action							
		Action Other							
	E	Drug & Alcohol	Suspected Alcohol NO	Jse	Suspected Drug Us	se			
		Alcohol Test Given TEST NOT GIVEN	1		Alcohol Test Type		Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN			Drug Test Type	Type Drug Test Results			
05	002	Drug Type			•				
		Individual Condition  APPEARED NORMAL							
		Individual							
		Passenger ROBERT HILL			Citations Issued		Sex		
ا	JAN	(608) 434-7570			Date of Birth		Race WHITE		
LIND	INDIVIDUAL	Address E11070 S GASSER RD BARABOO, WI 53913 , US			Driver License Number  STATE: WISCONSIN COUNTRY: UNITED STATES				
		Equipment	On Duty Crash		Safety Equipment				
		Seat Position 6SECOND SEAT	I r-RIGHT SIDE		SHOULDER & LAP BELT				
		Helmet Use			Helmet Compliance				
		Eye Protection			Tint Compliance				
05	900	Injury	Injury Severity NO APPARENT	INJURY	Airbag NON DEPLOYE	D			
		Ejected NOT EJECTED	<u> </u>		Ejection Path	NOT APPLICABL	Trapped/Extricated NOT TRAPPED		
		Medical Transport NOT TRANSPOR	TED		EMS Agency Identi	ifier	EMS Run #		
		Hospital			Date of Death		Time of Death		
		Non Motorist	Striking Unit #	Prior Action	l	Location	ı	To/From School	

18-03987

# WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT BARABOO, WI 53913 (608) 356-4895

Crash Date **04/20/2018** 

					-
UNIT	INDIVIDUAL	Action			<u>, , , , , , , , , , , , , , , , , , , </u>
	<b>=</b>				
		A stient Other			
		Action Other			
	E	Orug & Alcohol Suspected Alcohol Use	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	900	Drug Type			
		Individual Condition			
		APPEARED NORMAL			