

6TL0BMQKTF
18-04970

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 18-04970		Investigating Officer/Deputy DEPUTY W. NEUBAUER	
Crash Date 05/16/2018		Crash Time 12:20 PM		Date Arrived 05/16/2018		Time Arrived 12:29 PM	
Date Notified 05/16/2018		Time Notified 12:22 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 checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

Description

<p>Diagram</p> <p>not to scale</p> <p>units moved prior to arrival</p> <p>off ramp ush12 to sth 136</p> <p>cinder blocks</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.

UNITS 1 AND 2 WERE BOTH TRAVELING WESTBOUND ON USH 12 OFF RAMP WHEN UNIT 1 LOST CINDER BLOCK CARGO CAUSING UNIT 2 TO STRIKE THEM WITH RIGHT FRONT TIRE CAUSING FUNCTIONAL DAMAGE.

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Location

ON RAMP USH12 WB 1000 FT S OF STH136 EB IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY	Latitude	Longitude
	X Coordinate	Y Coordinate
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTIO		First Harmful Event Location ON ROADWAY	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT		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 FULL CONTROL	Special Study
Within Interchange Area NO	Junction Location EXIT RAMP	Intersection Type NOT AN INTERSECTION	

Unit Summary

UNIT 01	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type TRUCK	
	Vehicle Type UTILITY TRUCK/PICKUP TRUCK				Operating As Endorsements	
	Total Occs 1	Train/Bus # Injured	Total # Citations Issued 0	Total Trailers 1	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 65	Total Lanes 4	
	Most Harmful Event: Collision With CARGO/EQUIPMENT LOSS OR SHIFT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way ENTRANCE/EXIT RAMP		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type CONCRETE		Road Curvature STRAIGHT		Road Grade DOWNHILL	
	Truck Bus or HazMat NO					

UNIT 01 VEHICLE	Vehicle				
	License Plate Number EB3209		Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1GCHK23DX6F265988		Make CHEVROLET	Year 2006	Model SILVERADO
	Color GRY - GRAY		Body Style PK - PICKUP		Bus Use NOT A BUS
	Initial Contact Point NON-COLLISION		Vehicle Damage		
	Extent Of Damage NO DAMAGE		NO DAMAGE		

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UNIT	Towed Due To Damage NOT TOWED		Vehicle Removed By	
	What Driver Was Doing LEAVING TRAVEL LANE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
	Driver Distractions NOT DISTRACTED			
01	01	Owner Name MICHAEL D CORWITH		Owner Address E5699 OLD IRTON RD REEDSBURG, WI 53959 , US
Sequence Of Events				
01	Event CARGO/EQUIPMENT LOSS OR SHIFT			
02	Event			
03	Event			
04	Event			
UNIT	Policy Holder			
	Insurance Company SECURA-INS-A-MUTUAL-CO		Individual MICHAEL CORWITH	
UNIT TRAILER/ TOWED	Trailer/Towed			
	Trailer Plate #	Plate Type	Make UNKNOWN	State
	Unit Type UTILITY TRAILER		Individual MICHAEL D CORWITH	Address E5699 OLD IRTON RD REEDSBURG, WI 53959 , US
Vehicle Identification Number				
UNIT INDIVIDUAL	Individual			
	Driver RYAN C GRUBER (608) 393-1113		Citations Issued 0	Sex MALE
	Address 92 BINDL DR REEDSBURG, WI 53959 , US		Date of Birth [REDACTED]	Race WHITE
			Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
	Equipment		On Duty Crash	
Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		Safety Equipment SHOULDER & LAP BELT		

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UNIT	INDIVIDUAL	01 001		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 #	
				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	
UNIT	INDIVIDUAL	01 001		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 Summary

UNIT	INDIVIDUAL	02 001		Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type TRUCK			
				Vehicle Type UTILITY TRUCK/PICKUP TRUCK				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 WESTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 65	Total Lanes 4		
				Most Harmful Event: Collision With STRUCK BY FALLING, SHIFTING CARGO OR ANYT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE		
				Traffic Way ENTRANCE/EXIT RAMP		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO		
				Surface Type CONCRETE		Road Curvature STRAIGHT		Road Grade DOWNHILL		
				Truck Bus or HazMat NO						
				Vehicle						
				License Plate Number MK6825			Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES	

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02	UNIT	02	Vehicle Identification Number 1C6RR7GTGS213911	Make DODGE	Year 2016	Model RAM
			Color BLU - BLUE	Body Style PK - PICKUP	Bus Use NOT A BUS	
02	UNIT	VEHICLE	Initial Contact Point CARGO LOSS	Vehicle Damage		
			Extent Of Damage FUNCTIONAL DAMAGE	2--RIGHT SIDE FRONT, UNDERCARRIAGE		
02	UNIT	VEHICLE	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR		
			What Driver Was Doing GOING STRAIGHT	Vehicle Factors		
02	UNIT	VEHICLE	Driver Prior Action Other	NOT APPLICABLE		
			Driver Actions NO CONTRIBUTING ACTION			
02	UNIT	VEHICLE	Driver Distractions NOT DISTRACTED			
			Owner Name DANIEL J UNIEWSKI (608) 548-3344	Owner Address 1045 CZECH AVE FRIENDSHIP, WI 53934 , US		
Sequence Of Events						
01	UNIT	01	Event STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY MOTOR VEHICLE			
			Event			
			Event			
			Event			
04	UNIT	04	Policy Holder			
			Insurance Company STATE-FARM-MUTUAL-AUTOMOBILE-INS-CO	Individual CAROL UNIEWSKI		
04	UNIT	INDIVIDUAL	Individual			
			Driver DANIEL J UNIEWSKI (608) 548-3344	Citations Issued 0	Sex MALE	
04	UNIT	INDIVIDUAL	Date of Birth [REDACTED]	Race WHITE		
			Address 1045 CZECH AVE FRIENDSHIP, WI 53934 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES		
04	UNIT	INDIVIDUAL	Equipment	On Duty Crash		
			Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY	Safety Equipment SHOULDER & LAP BELT		

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02 002	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 #	
	Hospital		Date of Death		Time of Death	
	Non Motorist		Striking Unit #	Prior Action	Location	To/From School
	Action					
	Action Other					
	02 002	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 INDIVIDUAL	Individual					
	Passenger CYNTHIA BODOH (608) 548-4251		Citations Issued 0		Sex FEMALE	
			Date of Birth [REDACTED]		Race WHITE	
	Address , ,		Driver License Number			
	Equipment		On Duty Crash		Safety Equipment SHOULDER & LAP BELT	
Seat Position 3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER		Helmet Compliance				
Helmet Use						

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02	003	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 #		
		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				
02	003	Drug Type						
		Individual Condition APPEARED NORMAL						