

6TL0B7D6PQ
18-05094

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 18-05094	Investigating Officer/Deputy DEPUTY A. SUKOWATEY	
Crash Date 05/18/2018		Crash Time 10:35 PM	Date Arrived 05/18/2018	Time Arrived 10:46 PM	
Date Notified 05/18/2018		Time Notified 10:40 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 type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

<p>Diagram</p> <p>US HWY 12</p> <p>Dirt and Grass Median with curbs on both sides dividing HWY 12</p> <p>US HWY 12</p> <p>Unit One</p> <p>Unit Two</p> <p>Not to Scale</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.

THE OPERATOR OF UNIT ONE STATED HE WAS LOST AND ATTEMPTING A U-TURN ACROSS HWY 12. THE LOCATION HE WAS ATTEMPTING A U-TURN WAS A DIRT AND GRASS MEDIAN WITH CURBS ON BOTH SIDES JUST AFTER A CONCRETE TRAFFIC DIVIDER. THIS WAS AN UNSAFE AND ILLEGAL PLACE TO CONDUCT A U-TURN ON A US HWY. THE OPERATOR OF UNIT 2 ALSO STATED THE VEHICLE IN FRONT OF HIM HAD THE TURN SIGNAL ON SINCE LEAVING THE VILLAGE OF LAKE DELTON AND ABRUPTLY STOPPED. BOTH VEHICLES WERE ACCELERATING INTO THE 65 MPH SPEED ZONE. THE OPERATOR OF UNIT TWO WAS UNABLE TO STOP IN TIME AND STRUCK UNIT ONE.

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Location

ON USH12 EB 796 FT N OF MOON RD (1) IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude 43.563472793	Longitude -89.778507839
	X Coordinate 275604.3125	Y Coordinate 4827142
	Structure Type	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 02--FRONT TO REAR	Light Condition DARK/LIGHTED	
Road Surface Condition(s) WET	Roadway Factor(s) NONE	
Environment Factor(s) WEATHER CONDITIONS		
Weather Condition(s) RAIN		
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

01 UNIT	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR	Operating As Endorsements			
	Total Occs 4	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 65	Total Lanes 4
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE
	Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO
	Surface Type CONCRETE		Road Curvature STRAIGHT		Road Grade UPHILL
	Truck Bus or HazMat NO				

01 UNIT	Vehicle					
	01	License Plate Number 469TVP	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
		Vehicle Identification Number 1G1ZC5E0XCF352663	Make CHEVROLET	Year 2012	Model MALIBU 1LT	
	VEHICLE	Color GRY - GRAY	Body Style 4D - 4DR		Bus Use NOT A BUS	
		Initial Contact Point 6--REAR	Vehicle Damage			
		Extent Of Damage MINOR DAMAGE	5--RIGHT REAR CORNER, 6--REAR, 7--LEFT REAR CORNER			

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UNIT	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
	What Driver Was Doing U TURN		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions IMPROPER TURN			
01	01	Driver Distractions UNKNOWN IF DISTRACTED		
		Owner Name BRIAN WILLIAMS	Owner Address 3900 LABRADOR DRIVE JANESVILLE, WI 53546 , US	
Sequence Of Events				
UNIT	01	Event LEFT TURN		
	02	Event CROSS MEDIAN		
	03	Event		
	04	Event		
Policy Holder				
UNIT	Insurance Company ERIE-INS-CO		Individual BRIAN WILLIAMS	
	Individual			
UNIT	INDIVIDUAL	Driver KALEB DICKERSON	Citations Issued 0	Sex MALE
		Date of Birth		Race WHITE
01	001	Address 1750 TOWNLINE AVE BELOIT, WI 53511 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES
		Equipment	On Duty Crash	Safety Equipment SHOULDER & LAP BELT
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		Helmet Compliance
		Helmet Use		Tint Compliance
		Eye Protection		
		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	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 APPEARED NORMAL					
UNIT	INDIVIDUAL	Individual					
		Passenger KELSEY WILLIAMS		Citations Issued 0	Sex FEMALE		
				Date of Birth	Race WHITE		
		Address 2621 HARVARD DR # 11 JANESVILLE, WI 53548 , 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			
		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		

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UNIT 01	INDIVIDUAL	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				
		Individual				
		Passenger NATHANIEL KOREVAAR	Citations Issued 0	Sex MALE		
			Date of Birth	Race WHITE		
UNIT 01	INDIVIDUAL	Address 6108 E COUNTY ROAD J CLINTON, WI 53525 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
		Equipment	On Duty Crash	Safety Equipment SHOULDER & LAP BELT		
		Seat Position 4--SECOND SEAT-LEFT SIDE(MOTORCYCLE/BI				
		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

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UNIT	INDIVIDUAL	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					
		UNIT	INDIVIDUAL	Individual			
				Passenger ANNE SCHLENDER		Citations Issued 0	Sex FEMALE
				Address 7101 N STURTEVANT RD WHITEWATER, WI 53190 , US		Date of Birth	Race WHITE
Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES							
Equipment	On Duty Crash			Safety Equipment			
	Seat Position 6--SECOND SEAT-RIGHT SIDE			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 #			
	Hospital		Date of Death	Time of Death			
	Non Motorist		Striking Unit #	Prior Action	Location		
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UNIT	INDIVIDUAL	Action			
		Action Other			
	01	004	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 Summary

UNIT	02	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 SOUTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 65	Total Lanes 4
		Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE	
		Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER		Traffic Control NO CONTROL	Traffic Control Inoperative/Missing NO	
		Surface Type CONCRETE		Road Curvature STRAIGHT	Road Grade UPHILL	
		Truck Bus or HazMat NO				

UNIT	VEHICLE	Vehicle			
		License Plate Number CPREYES	Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1C6RR7GT8DS653683	Make DODGE	Year 2013	Model RAM
		Color RED - RED	Body Style PK - PICKUP		Bus Use NOT A BUS
		Initial Contact Point 12--FRONT	Vehicle Damage		
		Extent Of Damage MINOR DAMAGE	12--FRONT		
		Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR		
		What Driver Was Doing GOING STRAIGHT	Vehicle Factors		
		Driver Prior Action Other	NOT APPLICABLE		

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UNIT 02	VEHICLE 02	Driver Actions NO CONTRIBUTING ACTION		
		Driver Distractions UNKNOWN IF DISTRACTED		
		Owner Name GARCIA REYES	Owner Address 320 RUSSELL ST BARABOO, WI 53913 , US	
Sequence Of Events				
UNIT 01	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
	Event			
UNIT 04	Policy Holder			
	Insurance Company ERIE-INS-CO	Individual GARCIA REYES		
	Individual			
UNIT INDIVIDUAL 02	Driver GARCIA REYES	Citations Issued 0	Sex MALE	
		Date of Birth	Race HISPANIC	
	Address 320 RUSSELL ST BARABOO, WI 53913 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
	Equipment	On Duty Crash	Safety Equipment SHOULDER & LAP BELT	
	Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY			
	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	
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UNIT INDIVIDUAL	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				
	Individual				
	Passenger PATRICIA REYES	Citations Issued 0	Sex FEMALE		
	Address 320 RUSSELL ST BARABOO, WI 53913 , US	Date of Birth			
	Race INDIAN				
	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES				
UNIT INDIVIDUAL	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			
	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

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UNIT	INDIVIDUAL	Action			
		Action Other			
	02	006	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		