

6TL09N3P55
18-05345

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 18-05345	Investigating Officer/Deputy DEPUTY C. FRANK	
Crash Date 05/25/2018		Crash Time 09:14 AM	Date Arrived 05/25/2018	Time Arrived 09:26 AM	
Date Notified 05/25/2018		Time Notified 09:19 AM	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>	Reconstruction By
	Photos By 9198
	Additional Information PHOTOS

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

ON THE ABOVE DATE AND TIME UNIT 1 AND UNIT 2 WERE SOUTHBOUND ON CR BD AT TIMOTHY LN. UNITS WERE GOING THROUGH THE ROUNDABOUTS. UNIT 1 OPERATOR STATED SHE WAS IN THE RIGHT LANE AND UNIT 2 WAS IN LEFT LANE. SHE ATTEMPTED TO PASS UNIT 2 WHERE THE 2 LANES MERGE TO 1 LANE. UNIT 1 STATED UNIT 2 ACCELERATED NOT ALLOWING HER TO PASS AND THE UNITS SIDESWIPE EACH OTHER IN SAME DIRECTION. UNIT 2 OPERATOR STATES UNIT 1 ATTEMPTED TO PASS ON THE RIGHT AND SHOULD HAVE WAITED TO MERGE BEHIND HER. UNIT 2 WAS UNAWARE UNITS MADE CONTACT. UNIT 2S PASSENGER MIRROR MADE CONTACT WITH UNIT 1S DRIVER SLIDING DOOR. AFTER CRASH I RECDV A PHONE CALL FROM UNIT 2 OPERATOR WHO BELIEVED MORE CONTACT WAS MADE. I TOOK PHOTOS OF DAMAGE TO REAR DRIVER SIDE BUMPER. POSSIBLE DAMAGE TO UNIT 1 FRONT PASSENGER SIDE BUMPER. UNKNOWN IF CONTACT WAS MADE BETWEEN THE TWO IN THE CRASH BEFORE SIDESWIPE.

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Location

ON CTHBD SB 112 FT S OF USH12 EB IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude 43.555873085	Longitude -89.778428393
	X Coordinate 275582.5	Y Coordinate 4826297.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 05--SIDESWIPE/SAME DIRECTION	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 NO CONTROL	Special Study
Within Interchange Area YES	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 SOUTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 35	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 TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL	Traffic Control Inoperative/Missing NO		
	Surface Type CONCRETE		Road Curvature CURVE - UNKNOWN DIRECTION	Road Grade LEVEL		
	Truck Bus or HazMat NO					

UNIT 01 VEHICLE 01	Vehicle			
	License Plate Number 248YCR	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 2A8HR54P78R636924	Make CHRYSLER	Year 2008	Model TOWN & AMP
	Color BLU - BLUE	Body Style VN - VAN		Bus Use NOT A BUS
	Initial Contact Point 9--LEFT SIDE MIDDLE	Vehicle Damage 9--LEFT SIDE MIDDLE		
Extent Of Damage MINOR DAMAGE				

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UNIT	VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By		
		What Driver Was Doing OVERTAKE RIGHT		Vehicle Factors		
		Driver Prior Action Other		NOT APPLICABLE		
		Driver Actions OPERATED MOTOR VEHICLE IN AGGRESSIVE/RECKLESS MANNER				
01	01	Driver Distractions NOT DISTRACTED				
		Owner Name ELIZABETH JEA BA DONATO (608) 434-3919		Owner Address 613 BADGER DR BARABOO, WI 53913 , US		
Sequence Of Events						
UNIT	INDIVIDUAL	01	Event MOTOR VEH IN TRANSPORT			
		02	Event			
		03	Event			
		04	Event			
Policy Holder						
Insurance Company GENERAL-AGENTS-INS-CO-OF-AMERICA-INC		Individual ELIZABETH JEA DONATO				
Individual						
UNIT	INDIVIDUAL	Driver ELIZABETH JEA BA DONATO (608) 434-3919		Citations Issued 0	Sex FEMALE	
		Date of Birth [REDACTED]		Race WHITE		
Address 613 BADGER DR BARABOO, WI 53913 , US		Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES				
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				
01	001	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 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 2	Train/Bus # Injured	Total # Citations Issued 1	Total Trailers 0	Total HazMat Types 0		
	Insurance? NO	Direction Of Travel SOUTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 35	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 TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO		
	Surface Type CONCRETE		Road Curvature CURVE - UNKNOWN DIRECTION		Road Grade LEVEL		
	Truck Bus or HazMat NO						
	UNIT VEHICLE 02	Vehicle					
		License Plate Number 893ZMK		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
Vehicle Identification Number 3FADP0L33BR202732		Make FORD	Year 2011	Model NO DATA FO			
Color SIL - SILVER (ALUMINUM)		Body Style 4D - 4DR		Bus Use NOT A BUS			
Initial Contact Point 3--RIGHT SIDE MIDDLE		Vehicle Damage					
Extent Of Damage MINOR DAMAGE		3--RIGHT SIDE MIDDLE					

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UNIT	VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By		
		What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors		
		Driver Prior Action Other		NOT APPLICABLE		
		Driver Actions FAILED TO YIELD RIGHT-OF-WAY, OPERATED MOTOR VEHICLE IN AGGRESSIVE/RECKLESS MANNER				
02	02	Driver Distractions NOT DISTRACTED				
		Owner Name ROBIN LEE YELLOW THUNDER (608) 397-9736		Owner Address 1350 WALNUT ST APT 5 BARABOO, WI 53913 , US		
Sequence Of Events						
UNIT	INDIVIDUAL	01	Event MOTOR VEH IN TRANSPORT			
		02	Event			
		03	Event			
		04	Event			
02	002	Individual				
		Driver ROBIN LEE YELLOW THUNDER (608) 397-9736		Citations Issued 1	Sex FEMALE	
		Address 1350 WALNUT ST APT 5 BARABOO, WI 53913 , US		Date of Birth [REDACTED]	Race INDIAN	
		Driver License Number [REDACTED]		STATE: WISCONSIN COUNTRY: UNITED STATES		
		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 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					
	UNIT INDIVIDUAL	Individual				
Passenger NICHOLAS K YELLOW THUNDER (608) 397-9736			Citations Issued 0		Sex MALE	
			Date of Birth [REDACTED]		Race INDIAN	
Address 1350 WALNUT ST APT 5 BARABOO, WI 53913 , US			Driver License Number			
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	003	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	Violations					
		UTC Number AI389964	Issue To? 002	Statute Number 344.62(1)	Seq Num 001	Description OPERATE MOTOR VEHICLE W/O INSURANCE	