

6TL08F2KTW  
18-07311

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 <b>18-07311</b>		Investigating Officer/Deputy <b>DEPUTY T. SUTHERLAND</b>	
Crash Date <b>07/08/2018</b>		Crash Time <b>05:23 PM</b>		Date Arrived <b>07/08/2018</b>		Time Arrived <b>05:26 PM</b>	
Date Notified <b>07/08/2018</b>		Time Notified <b>05:25 PM</b>		Total Units <b>02</b>		Total Injured <b>00</b>	Total Killed <b>00</b>
<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 <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

Description

<p>Diagram</p> <p><b>Not To Scale</b></p>	Reconstruction By
	Photos By
	Additional Information <b>NONE</b>

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

ON 07-08-18 UNIT 1 WAS TRAVELING SOUTHBOUND ON USH 12. UNIT 2 WAS ALSO TRAVELING SOUTHBOUND DIRECTLY IN FRONT OF UNIT 1. UNIT 2 BRAKED FOR A VEHICLE IN FRONT OF HIM. UNIT 1 THEN REAR-ENDED UNIT 2. NO INJURIES REPORTED.

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Location

ON USH12 EB 1.11 MI N OF SAUK PRAIRIE RD IN THE TOWN OF PRAIRIE DU SAC IN SAUK COUNTY	Latitude <b>43.297831462</b>	Longitude <b>-89.759100014</b>
	X Coordinate <b>276194.28125</b>	Y Coordinate <b>4797586.5</b>
	Structure Type <b>NO STRUCTURE</b>	

Crash Scene

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>	First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>02--FRONT TO REAR</b>	Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>DRY</b>	Roadway Factor(s)  <b>BACKUP DUE TO REGULAR CONGESTION</b>	
Environment Factor(s) <b>NONE</b>		
Weather Condition(s) <b>CLEAR</b>		
Animal Type	Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>	Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land	Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>

Unit Summary

01 UNIT	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>		
	Vehicle Type <b>PASSENGER CAR</b>	Operating As Endorsements				
	Total Occs <b>1</b>	Train/Bus # Injured	Total # Citations Issued <b>1</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>YES</b>	Direction Of Travel <b>SOUTHBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>55</b>	Total Lanes <b>2</b>	
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>		Special Function <b>NO SPECIAL FUNCTION</b>	Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>		
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>NO CONTROL</b>	Traffic Control Inoperative/Missing <b>NO</b>		
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>	Road Grade <b>LEVEL</b>		
	Truck Bus or HazMat <b>NO</b>					

01 UNIT	<b>Vehicle</b>				
	License Plate Number <b>151JNV</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
	Vehicle Identification Number <b>4T1BF30K85U108047</b>	Make <b>TOYOTA</b>	Year <b>2005</b>	Model <b>CAMRY LE/X</b>	
	Color <b>BGE - BEIGE</b>	Body Style <b>4D - 4DR</b>		Bus Use <b>NOT A BUS</b>	
	Initial Contact Point <b>12--FRONT</b>	Vehicle Damage			
	Extent Of Damage <b>DISABLING DAMAGE</b>	<b>12--FRONT</b>			

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UNIT	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>GEORGES AUTO BODY</b>		
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors  <b>NOT APPLICABLE</b>		
	Driver Prior Action Other				
	Driver Actions <b>FOLLOWING TOO CLOSE</b>				
	Driver Distractions <b>NOT DISTRACTED</b>				
01	01	Owner Name <b>KAREN SHELTON (608) 574-1798</b>		Owner Address <b>S12596 PEARL RD SPRING GREEN, WI 53588 , US</b>	
<b>Sequence Of Events</b>					
	01	Event <b>MOTOR VEH IN TRANSPORT</b>			
	02	Event			
	03	Event			
	04	Event			
UNIT	<b>Policy Holder</b>				
	Insurance Company <b>AMERICAN-FAMILY-INS-CO</b>		Individual <b>KAREN SHELTON</b>		
UNIT	INDIVIDUAL	<b>Individual</b>			
		Driver <b>KAREN SHELTON (608) 574-1798</b>		Citations Issued <b>1</b>	Sex <b>FEMALE</b>
				Date of Birth	Race <b>WHITE</b>
		Address <b>S12596 PEARL RD SPRING GREEN, WI 53588 , US</b>		Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
		<b>Equipment</b>		Safety Equipment	
		On Duty Crash		<b>SHOULDER &amp; LAP BELT</b>	
		Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>			
		Helmet Use		Helmet Compliance	
		Eye Protection		Tint Compliance	
01	001	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>	
		Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABL</b>	
				Trapped/Extricated <b>NOT TRAPPED</b>	

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UNIT	INDIVIDUAL	Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier	EMS Run #		
		Hospital	Date of Death	Time of Death		
		<b>Non Motorist</b>	Striking Unit #	Prior Action	Location	To/From School
		Action				
		Action Other				
		<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>		
		Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results		
		Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results		
		Drug Type				
		Individual Condition <b>APPEARED NORMAL</b>				
01	001	<b>Violations</b>				
		UTC Number <b>BB336926</b>	Issue To? <b>001</b>	Statute Number <b>346.14(1m)</b>	Seq Num <b>001</b>	Description <b>AUTOMOBILE FOLLOWING TOO CLOSELY</b>

**Unit Summary**

UNIT	02	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>TRUCK</b>		
		Vehicle Type <b>UTILITY TRUCK/PICKUP TRUCK</b>	Operating As Endorsements			
		Total Occs <b>1</b>	Train/Bus # Injured	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
		Insurance? <b>YES</b>	Direction Of Travel <b>SOUTHBOUND</b>	<input type="checkbox"/> <b>Pre CrashTire Mark</b>	Speed Limit <b>55</b>	Total Lanes <b>2</b>
		Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>	Special Function <b>NO SPECIAL FUNCTION</b>	Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>		
		Traffic Way <b>TWO-WAY, NOT DIVIDED</b>	Traffic Control <b>NO CONTROL</b>	Traffic Control Inoperative/Missing <b>NO</b>		
		Surface Type <b>BLACKTOP (BITUMINOUS)</b>	Road Curvature <b>STRAIGHT</b>	Road Grade <b>LEVEL</b>		
		Truck Bus or HazMat <b>NO</b>				
		<b>Vehicle</b>				
		02	02	License Plate Number <b>KV9868</b>	Plate Type <b>LTK - LIGHT TRUCK</b>	St <b>WI</b>
Vehicle Identification Number <b>1GTG6EEN6J1225453</b>	Make <b>GENERAL MOTORS COR</b>			Year <b>2018</b>	Model <b>CANYON</b>	
Color <b>RED - RED</b>	Body Style <b>PK - PICKUP</b>			Bus Use <b>NOT A BUS</b>		

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UNIT	VEHICLE	Initial Contact Point <b>6--REAR</b>	Vehicle Damage	
		Extent Of Damage <b>MINOR DAMAGE</b>	<b>6--REAR</b>	
		Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By	
		What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors	
		Driver Prior Action Other	<b>NOT APPLICABLE</b>	
UNIT	VEHICLE	Driver Actions <b>NO CONTRIBUTING ACTION</b>		
		Driver Distractions <b>NOT DISTRACTED</b>		
		Owner Name <b>HAROLD WEISS (608) 963-4020</b>	Owner Address <b>2804 MICKELSON PKWY # 103 FITCHBURG, WI 53711 , US</b>	
02	02	<b>Sequence Of Events</b>		
		01	Event <b>MOTOR VEH IN TRANSPORT</b>	
		02	Event	
		03	Event	
		04	Event	
UNIT	INDIVIDUAL	<b>Policy Holder</b>		
		Insurance Company <b>ANSAY + ASSOCIATES LLC</b>	Individual <b>HAROLD WEISS</b>	
UNIT	INDIVIDUAL	<b>Individual</b>		
		Driver <b>HAROLD WEISS (608) 963-4020</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>
		Date of Birth	Race <b>WHITE</b>	
		Address <b>2804 MICKELSON PKWY # 103 FITCHBURG, WI 53711 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
		<b>Equipment</b> On Duty Crash	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
		Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>	Helmet Compliance	
		Helmet Use	Tint Compliance	
		Eye Protection		

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02          02	002          002	<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>		Airbag <b>NON DEPLOYED</b>		
		Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABL</b>		Trapped/Extricated <b>NOT TRAPPED</b>		
		Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier		EMS Run #		
		Hospital		Date of Death		Time of Death		
		<b>Non Motorist</b>		Striking Unit #	Prior Action		Location	To/From School
		Action						
		Action Other						
		<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>		Suspected Drug Use <b>NO</b>		
		Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type		Alcohol Test Results		
		Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type		Drug Test Results		
Drug Type								
Individual Condition <b>APPEARED NORMAL</b>								