

6TL0B4X4J1
18-07801

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 18-7801 | Investigating Officer/Deputy DEPUTY E. KNULL | |
| Crash Date 07/19/2018 | | Crash Time 01:12 PM | Date Arrived 07/19/2018 | Time Arrived 01:25 PM | |
| Date Notified 07/19/2018 | | Time Notified 01:12 PM | Total Units 01 | Total Injured 02 | 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 KNULL |
| | Additional Information PHOTOS |

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

OPERATOR WAS SB ON STH 136 AND WENT THROUGH THE INTERSECTION AND LOST CONTROL OF THE VEHICLE. OPERATOR STATED HIS VEHICLE STARTED TO SWERVE AND HE LOST CONTROL AND WENT INTO THE DITCH ROLLING THE VEHICLE OVER. BOTH OCCUPANTS SUSTAINED INJURIES AND HAD TO BE EXTRICATED FROM THE VEHICLE. VEHICLE SUSTAINED DISABLING DAMAGE AND HAD TO BE TOWED BY MIKES TOWING.

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Location

| | | |
|--|---------------------------------------|-----------------------------------|
| ON POINT OF ROCKS RD 171 FT S OF STH136 EB IN THE TOWN OF BARABOO IN SAUK COUNTY | Latitude 43.437825312 | Longitude -89.769355507 |
| | X Coordinate | Y Coordinate |
| | Structure Type NO STRUCTURE | |

Crash Scene

| | | |
|---|---|---|
| First Harmful Event OVERTURN/ROLLOVER | First Harmful Event Location SHOULDER RIGHT | |
| 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) CLOUDY | | |
| Animal Type | Relation To Trafficway TRAFFICWAY - NOT 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

| | | | | | |
|------------|--|---|---|--|--------------------------------|
| UNIT 01 | Unit Status IN TRANSIT | Vehicle Operating As Classification D CLASS | Unit Type AUTOMOBILE | | |
| | Vehicle Type (SPORT) UTILITY VEHICLE | | 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 checked="" type="checkbox"/> Pre Crash Tire Mark | Speed Limit 55 | Total Lanes 2 |
| | Most Harmful Event: Collision With OVERTURN/ROLLOVER | | 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 BLACKTOP (BITUMINOUS) | | Road Curvature CURVE RIGHT | Road Grade LEVEL | |
| | Truck Bus or HazMat NO | | | | |

| | | | | |
|-----------------------------|---|---|---------------------|---|
| UNIT 01 VEHICLE 01 | Vehicle | | | |
| | License Plate Number V495219 | Plate Type AUT - AUTOMOBILE | St IL | Country of Issuance UNITED STATES |
| | Vehicle Identification Number 1GNDT13S032267263 | Make CHEVROLET | Year 2003 | Model TRAIL BLAZ |
| | Color BRZ - BRONZE | Body Style UT - SPORT UTILITY VEHICLE | | Bus Use NOT A BUS |
| | Initial Contact Point NON-COLLISION | Vehicle Damage | | |
| | Extent Of Damage DISABLING DAMAGE | ALL AREAS | | |

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|---------------------------|------------|--|-----------------------------------|--|-------------------------------|---|--|
| UNIT | VEHICLE | Towed Due To Damage TOWED DUE TO DISABLING DAMAGE | | Vehicle Removed By MIKES TOWING | | | |
| | | What Driver Was Doing GOING STRAIGHT | | Vehicle Factors NOT APPLICABLE | | | |
| | | Driver Prior Action Other | | | | | |
| | | Driver Actions FAILURE TO CONTROL, DISREGARDED STOP SIGN | | | | | |
| 01 | 01 | Driver Distractions NOT DISTRACTED | | | | | |
| | | Owner Name HOWARD KUZELKA (708) 614-2588 | | Owner Address 16800 82ND AVE TINLEY PARK, IL 60477 , US | | | |
| Sequence Of Events | | | | | | | |
| UNIT | INDIVIDUAL | 01 | Event OVERTURN/ROLLOVER | | | | |
| | | 02 | Event | | | | |
| | | 03 | Event | | | | |
| | | 04 | Event | | | | |
| Policy Holder | | | | | | | |
| UNIT | INDIVIDUAL | Insurance Company COUNTRY FINANCIAL | | Individual HOWARD KUZELKA | | | |
| | | Driver HOWARD KUZELKA (708) 614-2588 | | Citations Issued 0 | Sex MALE | | |
| UNIT | INDIVIDUAL | Date of Birth | | Race WHITE | | | |
| | | Address 16800 82ND AVE TINLEY PARK, IL 60477 , US | | Driver License Number STATE: ILLINOIS COUNTRY: UNITED STATES | | | |
| 01 | 001 | Equipment | | On Duty Crash | | | |
| | | Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY | | Safety Equipment SHOULDER & LAP BELT | | | |
| | | Helmet Use | | Helmet Compliance | | | |
| | | Eye Protection | | Tint Compliance | | | |
| | | Injury | | Injury Severity SUSPECTED MINOR INJURY | Airbag NON DEPLOYED | | |
| | | Ejected NOT EJECTED | | Ejection Path NOT EJECTED/NOT APPLICABL | | Trapped/Extricated TRAPPED/EXTRICATED | |

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| UNIT | INDIVIDUAL | Medical Transport EMS GROUND | | EMS Agency Identifier 6000368 | EMS Run # | | |
| | | Hospital ST CLARE HOSP | | 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 DOROTHY KUZELKA (708) 614-2588 | | Citations Issued 0 | Sex FEMALE | | |
| | | | | Date of Birth | Race WHITE | | |
| | | Address 16800 82ND AVE TINLEY PARK, IL 60477 , US | | Driver License Number STATE: ILLINOIS 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 SUSPECTED MINOR INJURY | | Airbag NON DEPLOYED | |
| | | Ejected NOT EJECTED | | Ejection Path NOT EJECTED/NOT APPLICABL | Trapped/Extricated TRAPPED/EXTRICATED | | |
| Medical Transport EMS GROUND | | EMS Agency Identifier 6000368 | EMS Run # | | | | |
| Hospital ST CLARE HOSP | | 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 | | |
| 01 | 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 | | |