18-08351

WISCONSIN MOTOR VEHICLE CRASH REPORT

	Document Number Override	Primary Crash	Document #	Agency 18-08:	Crash Number 351		Investigating Officer/Deputy DEPUTY E. KNULL			
4	Crash Date 08/01/2018	Crash Time 09:15 AM	09:15 AM Time Notified 09:15 AM		rrived 2018	Time Arrived 09:24 AM				
01 LUD4A474	Date Notified 08/01/2018				nits	Total Injured Total Killed 01 00		ed		
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- -	Government Property		chool Zone	School NO	Bus Related	Tags	Tags			
	Reportable Crash Type DT4000 (STANDARD			SH)		Amende	d	Secondary Crash		
	Description Diagram					T c	Reconstruction	n Rv		
	not to scale utility tractor s yellowthunder	1 STOP	whiteeagle rd	1	ACLS STOP	 	Photos By Additional Info	ormation		
	a sworn law enforcem	nent officer sar	oo that I have	not addo	l any C IIS data in th	nis renort				
	I, a sworn law enforcen OPERATOR OF UNIT 1HAD ST MOTORCYCLE OPERATOR LA REQUIRE MEDICAL TRANSPO	OPPED AT THE S	TOP SIGN AND I	DID NOT S	EE MOTORCYCLE. UN COLLISION. OPERAT	IT 1 PULLED INTO OR OF CYCLE HAI	MINOR INJ	URIES AND DID NOT		

6TL0B4X4J4 18-08351

Location

WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT **BARABOO, WI 53913** (608) 356-4895

Crash Time 09:15 AM

	TERSECTION I WHITEEAGLE RD			Latitude 43.5425301			Longitude -89.76644	777
ΑT	DECORAH RD		X Coordinate Y Coordinate					
	THE TOWN OF DELT SAUK COUNTY	ON		/ Coordinate	•		T Coordinat	
	OAON OOONTT			Structure Typ				
				NO STRUC	CTURE			
Cra	ash Scene 💻							
Fire	st Harmful Event			First Harmful	l Event L	ocation.		
	HER NON-COLLISIO	N		ON ROADV	WAY			
	nner of Collision	CLE IN TRANSPORT		Light Condition DAYLIGHT				
	ad Surface Condition(s)	CLE IN TRANSPORT		Roadway Fac				
DR	. ,			Roddwdy i do	0.01(3)			
Enν	vironment Factor(s)							
NC	ONE			NONE				
We	ather Condition(s)							
CL	EAR							
Ani	mal Type			Relation To T	Trafficwa	ıy		
				TRAFFICW		=		
	sh Classification - Location	on		Crash Classif				-
	IBAL LAND					ATION/TRUS		
	oal Land D-CHUNK NATION			Access Contr			S	pecial Study
<u></u>	hin Interchange Area	Junction Location	Interse	ction Type				
	-	INTERSECTION		R-WAY INTERSECTION				
NC		INTERSECTION	1 001	-WAY INTERS	ECTIO	N		
	it Summary =	INTERSECTION	1 001	-WAY INTERS	ECTIO	N		
Un	it Summary • t Status	INTERGEOTION	Vehicle Operating A		ECTIO	Unit Type		
Uni Uni	t Status ON-CONTACT	INTERGEGION	L		ECTIO	Unit Type AUTOMO		
Uni NO	t Status ON-CONTACT nicle Type		Vehicle Operating A		ECTIO	Unit Type AUTOMO	BILE As Endorsemer	its
Uni NC Veh	t Status ON-CONTACT nicle Type PORT) UTILITY VEHIC	CLE	Vehicle Operating A D CLASS	s Classification		Unit Type AUTOMO Operating A	As Endorsemer	
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18-08351

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Towed Due To Dama	ge	Vehicle Removed By						
		NOT TOWED		OPERATOR Vehicle Factors						
		What Driver Was Doi ENTERING TRAF		Volitore i dotoro						
		Driver Prior Action Ot		NOT APPLICABLE						
		Driver Actions	DICHT OF WAY HINKNOWN							
_	쁘	FAILED TO TIELL	RIGHT-OF-WAY, UNKNOWN							
LIND	VEHICL									
⊃	迪									
		Driver Distractions NOT DISTRACTE	n							
		NOT DISTRACTE	5							
6	6									
				12						
		Owner Name GAIL FUNMAKER	?	Owner Address S2838 DECORAH RD						
		(608) 963-3999		BARABOO, WI 53913 , US						
	,	Sequence Of Events								
	2	Event OTHER NON-COL	LISION							
		Event								
	02									
	03	Event								
		Event								
	0									
╘	- 1	Policy Holder								
L		Insurance Company AMERICAN-AUTO	MODILE INO OO	Individual GAIL FUNMAKER						
_			DMORITE-IN2-CO	GAIL FUNMAKER						
		Individual		Citations Issued	Cov					
		Driver GAIL FUNMAKER (608) 963-3999		0	Sex FEMALE					
	Ι			Date of Birth	Race					
╘	INDIVIDUA				INDIAN					
EN I	\geq	Address S2838 DECORAH RD BARABOO, WI 53913 , US		Driver License Number						
	Ĭ			STATE: WISCONSIN COUNTRY: UNITED STATES						
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			On Duty Crash	Safety Equipment						
		Equipment		× 100 - 100						
		Seat Position		RESTRAINT USE UNKNOWN						
		1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY Helmet Use		Helmet Compliance						
		Eye Protection		Tint Compliance						
2	90	Injury	Injury Severity NO APPARENT INJURY	Airbag NOT APPLICABLE						
		Ejected		Ejection Path Trapped/Extricated						
		NOT APPLICABL	E	NOT EJECTED/NOT APPLICABL	NOT APPLICABLE					

18-08351

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Medical Transport			EMS Agency Identi	fier	EMS Run #		
		NOT TRANSPORTED							
		Hospital			Date of Death		Time of Death		
		Non Motorist	Striking Unit #	Prior Action		Location		To/From School	ol
		Action							
	A								
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	=								
		Action Other							
	,	Orug & Alcohol	Suspected Alcohol I	Jse	Suspected Drug Us	se			
		Alcohol Test Given TEST NOT GIVEN	1		Alcohol Test Type		Alcohol Test	Results	
		Drug Test Given			Drug Test Type		Drug Test Re	aculta	
		TEST NOT GIVEN			Diug rest Type		Diug rest Ke	ssuits	
_	_	Drug Type							
5	001	,							
		1 1 10 10							
		Individual Condition							
		NOT OBSERVED							
		t Summary		IN					
	Unit	Status			ehicle Operating As C	Classification	Unit Type	VCI E	
	Unit	Status RANSIT			ehicle Operating As O	Classification	MOTORCY		
02	Unit IN T Vehi	Status RANSIT cle Type				Classification	MOTORCY	CLE Endorsements	
	Unit IN T Vehi MO	Status RANSIT	Train/Bus # Inj	N			MOTORCY Operating As		
	Unit IN T Vehi MO	Status FRANSIT cle Type TORCYCLE	Train/Bus # Inj	N	otal # Citations Issued		MOTORCY Operating As	s Endorsements	
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02	Unit IN T Vehi MO' Tota 1 Insur YES Mosi OTH Traff TWO Surfa BLA	Status RANSIT cle Type TORCYCLE I Occs rance? St Harmful Event: Collisi HER NON-COLLISI Cic Way D-WAY, NOT DIVID ACKTOP (BITUMIN) K Bus or HazMat Vehicle License Plate Numbe 3595S Vehicle Identification JYASH03YXCA00	Direction Of Ti SOUTHBOU on With ON ED OUS)	jured T 0 ravel IND S N R S	Pre CrashTire Mark pecial Function IO SPECIAL FUNC raffic Control IO CONTROL oad Curvature TRAIGHT Plate Type CYC - CYCLE Make YAMAHA	d Total Trai 0 9 Speed Lii 15 CTION	MOTORCY Operating As illers mit Emergency NOT APPL Traffic Contro NO Road Grade LEVEL Country of Iss UNITED ST Model YP400	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use ICABLE ol Inoperative/Missing	
UNIT 02	Unit IN T Vehi MO Tota 1 Insury YES OTH Traff TWO Suffat NO	Status RANSIT cle Type TORCYCLE I Occs rance? St Harmful Event: Collisi HER NON-COLLISI Cic Way D-WAY, NOT DIVID Cace Type ACKTOP (BITUMIN) K Bus or HazMat Vehicle License Plate Number 3595S Vehicle Identification JYASH03YXCA00 Color	Direction Of Ti SOUTHBOU on With ON ED OUS)	jured T 0 ravel IND S N R S	Pre CrashTire Mark pecial Function IO SPECIAL FUNC raffic Control IO CONTROL oad Curvature TRAIGHT Plate Type CYC - CYCLE Make	d Total Train 0 Speed Line 15 CTION St WI Year 2012	MOTORCY Operating As illers mit Emergency M NOT APPL Traffic Contro NO Road Grade LEVEL Country of Iss UNITED ST Model	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use IICABLE ol Inoperative/Missing	
UNIT 02	Unit IN T Vehi MO' Tota 1 InsuryES Most OTH Traff TWG Surfa BLA Truc NO	Status RANSIT cle Type TORCYCLE I Occs rance? St Harmful Event: Collisi HER NON-COLLISI Cic Way D-WAY, NOT DIVID ACKTOP (BITUMIN) K Bus or HazMat Vehicle License Plate Numbe 3595S Vehicle Identification JYASH03YXCA00	Direction Of Ti SOUTHBOU on With ON ED OUS)	jured T 0 ravel IND S N R S	Pre CrashTire Mark pecial Function IO SPECIAL FUNC raffic Control IO CONTROL oad Curvature TRAIGHT Plate Type CYC - CYCLE Make YAMAHA Body Style	d Total Train 0 Speed Line 15 CTION St WI Year 2012	MOTORCY Operating As liters mit Emergency Mot Appl Traffic Contro NO Road Grade LEVEL Country of Iss UNITED ST Model YP400 Bus Use	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use IICABLE ol Inoperative/Missing	
02 UNIT 02	Unit IN T Vehi MO' Tota 1 InsuryES Most OTH Traff TWG Surfa BLA Truc NO	Status RANSIT cle Type TORCYCLE I Occs rance? St Harmful Event: Collisi HER NON-COLLISI Cic Way D-WAY, NOT DIVID ace Type ACKTOP (BITUMIN) k Bus or HazMat Vehicle License Plate Number 3595S Vehicle Identification JYASH03YXCA00 Color BLK - BLACK	Direction Of Ti SOUTHBOU on With ON ED OUS)	jured T 0 ravel JND S N R S	Pre CrashTire Mark pecial Function IO SPECIAL FUNC raffic Control IO CONTROL oad Curvature TRAIGHT Plate Type CYC - CYCLE Make YAMAHA Body Style MB - MOTORBIKE Vehicle Damage	Total Trai 0 Speed Lii 15 CTION St WI Year 2012	MOTORCY Operating As liters mit Emergency Mot Appl Traffic Contro NO Road Grade LEVEL Country of Iss UNITED ST Model YP400 Bus Use	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use IICABLE ol Inoperative/Missing	
UNIT 02	Unit IN T Vehi MO Tota 1 Insur YES Mosi OTH Trafff TWO Surfac NO	Status RANSIT cle Type TORCYCLE I Occs rance? St Harmful Event: Collisi HER NON-COLLISI Cic Way D-WAY, NOT DIVID Cace Type ACKTOP (BITUMIN) K Bus or HazMat Vehicle License Plate Number 3595S Vehicle Identification JYASH03YXCA00 Color BLK - BLACK Initial Contact Point	Direction Of To SOUTHBOUT ON With ON ED OUS)	jured T 0 ravel JND S N R S	Pre CrashTire Mark pecial Function IO SPECIAL FUNC raffic Control O CONTROL oad Curvature TRAIGHT Plate Type CYC - CYCLE Make YAMAHA Body Style MB - MOTORBIKE	Total Trai 0 Speed Lii 15 CTION St WI Year 2012	MOTORCY Operating As liters mit Emergency Mot Appl Traffic Contro NO Road Grade LEVEL Country of Iss UNITED ST Model YP400 Bus Use	Total HazMat Types 0 Total Lanes 2 Motor Vehicle Use IICABLE ol Inoperative/Missing	

18-08351

WISCONSIN MOTOR VEHICLE CRASH REPORT

				Vehicle Removed By						
		NOT TOWED		OPERATOR						
		What Driver Was Doing		Vehicle Factors						
		GOING STRAIGHT								
		Driver Prior Action Other			NOT APPLICABLE					
		Driver Actions								
		Driver Actions NO CONTRIBUTION	NG ACTION							
_	Щ	NO CONTRIBOTII	16 ACTION							
LINO	VEHICL									
5	프									
	7									
		Driver Distractions NOT DISTRACTE	B							
		NOT DISTRACTED	5							
05	05									
0	0									
		Owner Name DANIEL HOVLAN	ID.		r Address 31 DEER RUN RD					
		(608) 963-8325	טו							
		(000) 000 0020			ABOO, WI 53913 , US					
	;	Sequence Of E	vents							
	2	Event OTHER NON-COL	LISION							
	05	Event								
	03	Event								
		Event								
	9	LVCIII								
_		Policy Holder								
LIND	•	Insurance Company		Individual						
5		WEST-BEND-MUT	TUAL-INS-CO		DANIEL HOVLAND					
	ı	Individual								
		Driver		Citation	s Issued	Sex				
	_	DANIEL HOVLAND (608) 963-8325		0		MALE				
	¥			Date of	Birth	Race				
⊢	INDIVIDUA					WHITE				
	≥	Address E10831 DEER RUN RD BARABOO, WI 53913 , US		Driver L	icense Number	1				
ر ر	9			STATE: WISCONSIN COUNTRY: UNITED STATES						
	=									
			On Duty Crash	Protecti	ve Gear					
		Equipment								
		Seat Position		NONE						
		1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY								
		Helmet Use			Helmet Compliance					
		HALF		APPROVED						
		Eye Protection			Tint Compliance					
		YES: WORN AND		NO						
05	002	Injury	Injury Severity	Airbag	EDI OVED					
٦	0		SUSPECTED MINOR INJURY		EPLOYED	I Tanana di Catalanta				
		Ejected	E	Ejection Path Trapped/Extricated NOT EJECTED/NOT APPLICABL NOT TRAPPED						
		NOT APPLICABLI	E	NOIE	JECTED/NOT APPLICABL	NOT TRAPPED				

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WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT BARABOO, WI 53913 (608) 356-4895

Crash Date 08/01/2018

Crash Time 09:15 AM

		Medical Transport NOT TRANSPORTED			EMS Agency Identifier		EMS Run #	
		Hospital			Date of Death		Time of Death	
		Non Motorist	Striking Unit #	Prior Action	l	Location		To/From School
		Action		l .				
	JAL							
LNO	INDIVIDUAL							
ر	N							
	Action Other							
	L	Drug & Alcohol	Suspected Alcohol NO	Use	Suspected Drug Us	se		
		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	005	Drug Type						
		Individual Condition						
		APPEARED NOR	MAL					
		ALL EARLY NORMAL						