

6TL097RB25  
18-09064

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

6TL097RB25

Document Number Override		Primary Crash Document #		Agency Crash Number <b>18-09064</b>		Investigating Officer/Deputy <b>DEPUTY J. EYALIS</b>	
Crash Date <b>08/18/2018</b>		Crash Time <b>10:05 PM</b>		Date Arrived <b>08/28/2018</b>		Time Arrived <b>05:32 AM</b>	
Date Notified <b>08/18/2018</b>		Time Notified <b>10:05 PM</b>		Total Units <b>02</b>		Total Injured <b>01</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 checked="" 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 type="checkbox"/> Reportable		Crash Type <b>PRIVATE PROPERTY/PARKING LOT</b>				<input type="checkbox"/> Amended	<input checked="" type="checkbox"/> Secondary Crash

Description

<p>Diagram</p> <p><b>U2 IS TOWED VEHICLE</b>                      <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.

UNIT 1 WAS ATTEMPTING TO TOW AN UNOCCUPIED UNIT 2 ON PRIVATE PROPERTY. UNIT 1 AND UNIT 2 WERE ATTACHED WITH A TOW CHAIN. UNIT 1 ACCELERATED, GOING FORWARD, TOWING UNIT 2. THE TOW CHAIN UNATTACHED FROM UNIT 2 CAUSING UNIT 2 TO ROLL INTO UNIT 1, STRIKING THE PEDESTRIAN, AND THEN DOWNHILL INTO TREES. PEDESTRIAN WAS TRANSPORTED VIA AMBULANCE TO HOSPITAL.

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Location

<b>ON E9336 E ADAMS ST 216 FT E OF USH12 WB (HOUSE/BUILDING E9336)</b>  <b>IN THE VILLAGE OF LAKE DELTON IN SAUK COUNTY</b>	Latitude <b>43.587047897</b>	Longitude <b>-89.783427964</b>
	X Coordinate <b>275294.6875</b>	Y Coordinate <b>4829773.5</b>
	Structure Type <b>HOUSE/BUILDING</b>	

Crash Scene

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>		First Harmful Event Location <b>OFF ROADWAY, LOCATION UNKNOWN</b>	
Manner of Collision <b>02--FRONT TO REAR</b>		Light Condition <b>DARK/UNLIT</b>	
Road Surface Condition(s) <b>DRY</b>		Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>			
Weather Condition(s) <b>CLEAR</b>			
Animal Type		Relation To Trafficway <b>NON TRAFFICWAY - OTHER</b>	
Crash Classification - Location <b>PRIVATE PROPERTY</b>		Crash Classification - Jurisdiction <b>PRIVATE PROPERTY</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

<b>UNIT 01</b>	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>01</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>YES</b>	Direction Of Travel <b>NOT ON ROADWAY</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>N/A</b>	Total Lanes <b>0</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>PARKING LOT OR PRIVATE PROPERTY</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>OTHER</b>		Road Curvature <b>UNKNOWN</b>		Road Grade <b>DOWNHILL</b>	
	Truck Bus or HazMat <b>NO</b>					

<b>UNIT 01</b>	<b>Vehicle</b>					
	License Plate Number <b>EK1054</b>		Plate Type <b>LTK - LIGHT TRUCK</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
	Vehicle Identification Number <b>1GCGK24R3WZ194427</b>		Make <b>CHEVROLET</b>	Year <b>1998</b>	Model <b>UNKNOWN</b>	
	Color <b>RED - RED</b>		Body Style <b>UK - UNKNOWN</b>		Bus Use <b>NOT A BUS</b>	
	Initial Contact Point <b>6--REAR</b>		Vehicle Damage			
	Extent Of Damage <b>NO DAMAGE</b>		<b>NO DAMAGE</b>			

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UNIT	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>	
	What Driver Was Doing <b>LEAVING A PARKED POSITION</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
	Driver Distractions <b>NOT DISTRACTED</b>			
01	01	Owner Name <b>DALE EDWARD TOURDOT (608) 963-6250</b>		Owner Address <b>E9336 N REEDSBURG RD REEDSBURG, WI 53959 , US</b>
<b>Sequence Of Events</b>				
	01	Event <b>PEDESTRIAN</b>		
	02	Event <b>SEPARATION OF UNITS</b>		
	03	Event <b>TREE</b>		
	04	Event		
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>AMERICAN-FAMILY-INS-CO</b>		Individual <b>DALE TOURDOT</b>	
UNIT TRAILER/ TOWED	<b>Trailer/Towed</b>			
	Trailer Plate # <b>SM0KN39</b>	Plate Type <b>AUT - AUT</b>	Make <b>CHEV</b>	State <b>MT</b>
	Unit Type <b>TRUCK</b>	Individual <b>DAWN R PORTZEN (406) 539-0362</b>		Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>2282935</b>	Address <b>106 PARADISE DR LIVINGSTON, MT 59047 , US</b>		
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>DALE EDWARD TOURDOT (608) 963-6250</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
	Address <b>E9336 N REEDSBURG RD REEDSBURG, WI 53959 , US</b>		Date of Birth [REDACTED]	Race <b>WHITE</b>
	Driver License Number [REDACTED]		<b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
	<b>Equipment</b>		Safety Equipment	
Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>		<b>SHOULDER &amp; LAP BELT</b>		

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UNIT	INDIVIDUAL	01 001	Helmet Use	Helmet Compliance				
			Eye Protection	Tint Compliance				
			<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				
01 001	Drug Type							
	Individual Condition <b>APPEARED NORMAL</b>							

**Unit Summary**

UNIT	02	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>O CLASS</b>		Unit Type <b>PEDESTRIAN</b>	
		Vehicle Type <b>PEDESTRIAN</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>NO</b>	Direction Of Travel <b>NOT ON ROADWAY</b>	<input type="checkbox"/> Pre CrashTire <b>Mark</b>	Speed Limit <b>05</b>	Total Lanes <b>0</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>PARKING LOT OR PRIVATE PROPERTY</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>
		Surface Type <b>DIRT</b>		Road Curvature <b>UNKNOWN</b>		Road Grade <b>DOWNHILL</b>
		Truck Bus or HazMat <b>NO</b>				

**Sequence Of Events**

UNIT	01	Event <b>RAILWAY VEHICLE (TRAIN, ENGINE)</b>
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UNIT	02	Event					
	03	Event					
	04	Event					
UNIT	INDIVIDUAL	<b>Individual</b>					
		Pedestrian <b>PAUL R KEMMER</b> <b>(608) 415-5037</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>		
		Address <b>2333 DORIS RD</b> <b>REEDSBURG, WI 53959 , US</b>		Date of Birth [REDACTED]	Race <b>WHITE</b>		
		Driver License Number [REDACTED]		STATE: WISCONSIN COUNTRY: UNITED STATES			
		<b>Equipment</b>	On Duty Crash	Safety Equipment			
		Seat Position <b>PEDESTRIAN (NON-OCCUPANT)</b>		<b>NONE</b>			
		Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
		02	002	<b>Injury</b>	Injury Severity <b>POSSIBLE INJURY</b>	Airbag <b>NOT APPLICABLE</b>	
				Ejected <b>NOT APPLICABLE</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABL</b>	Trapped/Extricated <b>NOT APPLICABLE</b>	
				Medical Transport <b>EMS GROUND</b>	EMS Agency Identifier <b>6001024</b>	EMS Run #	
				Hospital <b>REEDSBURG AREA MED CTR</b>	Date of Death	Time of Death	
				<b>Non Motorist</b>	Striking Unit # <b>01</b>	Prior Action <b>NONE</b>	Location <b>NON-TRAFFICWAY AREA</b>
		UNIT	INDIVIDUAL	Action			
				<b>OTHER</b>			
Action Other <b>ON PRIVATE PROPERTY</b>							
<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>							