6TL09PBQ96 18-09499

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Override			Primary Crash Document #					Investigating Officer/Deputy DEPUTY B. STODDARD				
9	08/28/2018 1 Date Notified 08/28/2018 1		Crash Time 10:20 AM		Date Arrived 08/28/2018			Time Arrived 10:56 AM				
			Time Notified 10:22 AM t and Run		Total Units 01 Work Zone			Total Injured 00 Total Killed 00 Trailer or Towed			Reporting Threshold	
PILUUR							,			owed		
ا و	Government Property	Active So	chool Zone	School NO	School Bus Related NO		Tags					
	Reportable		Crash Type DT4000 (STA	ANDARD CRASH	1)			Amend	ded		Secondary Crash	
	Description Diagram									construction		
				Strawbridge			Not to S	Scale	Pho	otos By		
	, a sworn law enfo	orceme	nt officer, agr	ee that I have no	t added	d any CJIS data i	in this re	eport.				
	UNIT 1 WAS NORTHBOU THE BARABOO RIVER. U	IND ON JNIT 1 C	STRAWBRIDGE PERATOR THO	RD. STRAWBRIDG	GE WAS DRIVE T	COVERED BY WA	TER DUE	TO RAINFA				

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Crash Time 10:20 AM

ı	Loc	ation ====									
Ī	ON STRAWBRIDGE RD					Latitude			Longitude		
	1186 FT N						43.635073257		-90.211899465		
	OF MEFFERT RD IN THE TOWN OF WOODLAND IN SAUK COUNTY						X Coordinate 240909.078125		Y Coordinate 4836356.5		
		7.0.1.000.11.1		Structure Type							
					NO STRUCTURE						
	Cra	sh Scene									
Ī	First	Harmful Event				First Harm	ful Event L	ocation			
		ERSION, FULL OR PA	ARTIAL			ON ROADWAY Light Condition DAYLIGHT					
		ner of Collision									
		COLLISION W/VEHIC	LE IN TRANSPORT								
		d Surface Condition(s)				Roadway I	Factor(s)				
	WA ⁻	TER (STANDING/MOV	'ING)								
	Envir	ronment Factor(s)									
	NON	NE				ROAD SI	URFACE	CONDITION	I (WET, IC	CY, SNOW, SLUSH,	
	Wea	ther Condition(s)				L10)					
	CLE										
	Anim	al Type				Relation T	o Trafficwa CWAY - O	=			
	Cras	h Classification - Location									
	PUBLIC PROPERTY Tribal Land					Crash Classification - Jurisdiction NO SPECIAL JURISDICTION					
						Access Control				Special Study	
					NC			NO CONTROL			
	_					ection Type AN INTERSECTION					
	NO		NON-JUNCTION		NOT AN	INTERSE	CHON				
- (Summary =				12		1			
	-	Status		D CLASS	erating As C	Classification Unit Type TRUCK					
	IN TRANSIT D CLASS Vehicle Type								s Endorse	s Endorsements	
5	UTILITY TRUCK/PICKUP TRUCK					- Franky 12 - 12 - 12 - 12 - 12 - 12 - 12 - 12			monto		
	Total Occs Train/Bus # Injured			Total # Cita	Total Trail		lers	Total Haz	Mat Types		
	1 Insurance? Direction Of Tra			0 Pre CrashTire					0		
			Direction Of Travel							es	
╘╽	YES				Mark 45			-		2	
LINO	Most Harmful Event: Collision With				Special Function NO SPECIAL FUNCTION			Emergency Motor Vehicle Use NOT APPLICABLE			
	IMMERSION, FULL OR PARTIAL Traffic Way Traffic Con							Traffic Control Inoperative/Missing			
					NO CONTROL			NO			
•		асе Туре	Road Curva	Road Curvature			Road Grade				
		CKTOP (BITUMINOU	S)	STRAIGH	STRAIGHT			LEVEL			
		k Bus or HazMat									
	NO										
	1	Vehicle									
		License Plate Number 211350F Vehicle Identification Number			Plate Type		K St WI		Country of Issuance		
					LTK - LIGHT TRUCK		Year	UNITED STATES Model			
5	01	1FTWW31R18EA695		Make FORD Body Style		2008	Model F350 SUPER				
		Color					Bus Use				
		BRO - BROWN		PK - PICKUP NOT A BUS							
					Vehicle Damage						
	щ	Initial Contact Point		Vehicle Da	mage						
≒	ICLE	UNDERCARRIAGE									
LIND	/EHICLE		-	Vehicle Da							

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		Towed Due To Dama	ge DISABLING DAMAGE	Vehicle Removed By							
		What Driver Was Doing		Vehicle Factors							
		GOING STRAIGH		NOT ARRUSARIE							
		Driver Prior Action Ot	her	NOT APPLICABLE							
		Driver Actions									
.	Щ	OTHER CONTRIB	SUTING ACTION								
LIND	VEHICL										
5	픕										
	>										
		Driver Distractions NOT DISTRACTED									
6	9										
		Owner Name KENT LEROY WC	DLF	Owner Address S396 MEFFERT RD							
		(608) 553-1136		WONEWOC, WI 53968 , US							
	;	Sequence Of Events									
	۶	Event IMMERSION, FULL OR PARTIAL									
	02	Event									
		Event									
	03										
	9	Event									
\vdash	١	Policy Holder									
L		Insurance Company		Individual							
١			-INS-CO-(ATTN:-CLAIMS-DEPT)	KENT WOLF							
	- 1	Individual									
		Driver KENT LEROY WC	DLF	Citations Issued 0	Sex MALE						
	A	(608) 553-1136	· - ·	Date of Birth	Race						
_	INDIVIDUA			Bate of Birth	WHITE						
EN	₹	Address		Driver License Number							
_	9	S396 MEFFERT R		STATE: WISCONSIN COUNTRY: UNITED STATES							
	=	WONEWOC, WI 5	3968 , US								
		Equipment On Duty Crash Seat Position 1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY									
		Helmet Use		Helmet Compliance							
		Eye Protection		Tint Compliance							
2	00	Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED							
		Ejected	NO ALLANENT MOOK!	Ejection Path	Trapped/Extricated						
		NOT EJECTED		NOT EJECTED/NOT APPLICABL	NOT TRAPPED						

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Ì		Medical Transport			EMS Agency Identi	fior	EMS Run #				
		NOT TRANSPOR	TED		Livio Agency Identi	illoi	LIVIS Kull #				
			160		Date of Death		Time of Death				
		Hospital			Date of Death		Time of Death				
			Christian at Linch #	Deiter Antine		1		T-/F O-bI			
		Non Motorist Striking Unit #		Prior Action		Location		To/From School			
		Action		<u> </u>							
	7										
-	Ž										
UNIT	9										
_	INDIVIDUAL										
	Z										
		Action Other									
					10 , 10 , 11						
	L	Drug & Alcohol	NO	use	Suspected Drug Use NO						
		Alcohol Test Given			Alcohol Test Type		Alcohol Test Results				
		TEST NOT GIVEN									
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Results				
10	00	Drug Type									
0	0										
		Individual Condition									
		APPEARED NOR	MAL								