

6TL09426RM  
18-10263



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>18-10263</b>		Investigating Officer/Deputy <b>DEPUTY A. KULAS</b>	
Crash Date <b>09/15/2018</b>		Crash Time <b>08:43 PM</b>		Date Arrived <b>09/15/2018</b>		Time Arrived <b>08:53 PM</b>	
Date Notified <b>09/15/2018</b>		Time Notified <b>08:45 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 style="text-align: center;">Not to Scale </p>  <p style="text-align: center;">Hy 33</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 WESTBOUND ON HY 33. A DEER ENTERED THE ROADWAY AND UNIT 1 HAD TO BREAK HARD TO AVOID THE DEER. UNIT 2 WAS ALSO WESTBOUND AND WAS BEHIND UNIT 1. THE OPERATOR OF UNIT 2 ADVISED HE WAS 1 TO 1 1/2 CAR LENGTHS BEHIND UNIT 1. WHEN UNIT 1 BROKE TO AVOID THE DEER UNIT 2 WAS UNABLE TO AVOID UNIT 1. THE FRONT END OF UNIT 2 COLLIDED THE REAR END OF UNIT 1. THE OPERATOR OF UNIT 2 WAS WARNED FOR FOLLOWING TO CLOSE.

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Location

ON STH33 WB 0.30 MI W OF COON BLUFF RD IN THE TOWN OF EXCELSIOR IN SAUK COUNTY	Latitude <b>43.52909469</b>	Longitude <b>-89.873005266</b>
	X Coordinate <b>267840.25</b>	Y Coordinate <b>4823583</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>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>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

<b>UNIT 01</b>	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>AUTOMOBILE</b>		
	Vehicle Type <b>(SPORT) UTILITY VEHICLE</b>	Operating As Endorsements			
	Total Occs <b>2</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>WESTBOUND</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>				

<b>UNIT 01</b>	<b>Vehicle</b>			
	License Plate Number <b>588ZUU</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>ZACCJBBB0HPF93479</b>	Make <b>JEEP</b>	Year <b>2017</b>	Model <b>RENEGADE</b>
	Color <b>AME - AMETHYST</b>	Body Style <b>UT - SPORT UTILITY VEHICLE</b>		Bus Use <b>NOT A BUS</b>
	Initial Contact Point <b>6--REAR</b>	Vehicle Damage		
	Extent Of Damage <b>FUNCTIONAL DAMAGE</b>	<b>6--REAR</b>		

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UNIT	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OWNER</b>		
	What Driver Was Doing <b>SLOW/STOPPING</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>JOHN A BALDWIN (608) 963-7639</b>		Owner Address <b>738 N WALNUT ST REEDSBURG, WI 53959 , 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>GENERAL-INS-CO-OF-AMERICA-(C/O-SAFECO-I</b>		Individual <b>JOHN BALDWIN</b>		
UNIT	INDIVIDUAL	<b>Individual</b>			
		Driver <b>CHLOE NOREANE BALDWIN (608) 963-0193</b>	Citations Issued <b>0</b>	Sex <b>FEMALE</b>	
			Date of Birth [REDACTED]	Race <b>WHITE</b>	
		Address <b>738 N WALNUT ST REEDSBURG, WI 53959 , US</b>		Driver License Number [REDACTED] <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 Compliance			
	Helmet Use	Tint Compliance			
	Eye Protection	Airbag <b>NON DEPLOYED</b>			
01	001	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABL</b>	
		Ejected <b>NOT EJECTED</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>					
UNIT	INDIVIDUAL	<b>Individual</b>					
		Passenger <b>SYDNEY MORGAN PARCE</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>		
		Address <b>1047 3RD ST 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>		On Duty Crash	Safety Equipment		
		Seat Position <b>3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER</b>		<b>SHOULDER &amp; LAP BELT</b>			
		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		

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UNIT	INDIVIDUAL	Action			
		Action Other			
	01	002	<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>		

**Unit Summary**

UNIT	02	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>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
		Insurance? <b>YES</b>	Direction Of Travel <b>WESTBOUND</b>	<input checked="" type="checkbox"/> <b>Pre Crash Tire 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>				

UNIT	02	<b>Vehicle</b>			
		License Plate Number <b>706YGN</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>2G2WP552681108124</b>	Make <b>PONTIAC</b>	Year <b>2008</b>	Model <b>GRAND PRIX</b>
		Color <b>RED - RED</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>FUNCTIONAL DAMAGE</b>	<b>12--FRONT</b>		
		Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OPERATOR</b>		
		What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors		
		Driver Prior Action Other	<b>NOT APPLICABLE</b>		

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UNIT 02	VEHICLE 02	Driver Actions <b>FOLLOWING TOO CLOSE</b>			
		Driver Distractions <b>UNKNOWN IF DISTRACTED</b>			
		Owner Name <b>RANDALL SCOTT FLOYD (608) 963-3606</b>		Owner Address <b>S2859HY 12 REEDSBURG, WI 53959 , US</b>	
<b>Sequence Of Events</b>					
UNIT 04	INDIVIDUAL 01	Event <b>MOTOR VEH IN TRANSPORT</b>			02
		Event			
		Event			
		Event			
<b>Policy Holder</b>					
UNIT 02	INDIVIDUAL 003	Insurance Company <b>EASTEN MOTORS</b>		Individual <b>RANDALL FLOYD</b>	
		<b>Individual</b>			
UNIT 02	INDIVIDUAL 003	Driver <b>RANDALL SCOTT FLOYD (608) 963-3606</b>		Citations Issued <b>0</b>	
		Address <b>S2859HY 12 REEDSBURG, WI 53959 , US</b>		Date of Birth [REDACTED]	
UNIT 02	INDIVIDUAL 003	Sex <b>MALE</b>		Race <b>WHITE</b>	
		Driver License Number <b>[REDACTED]</b>		STATE: WISCONSIN COUNTRY: UNITED STATES	
UNIT 02	INDIVIDUAL 003	<b>Equipment</b>		Safety Equipment	
		On Duty Crash		<b>SHOULDER &amp; LAP BELT</b>	
UNIT 02	INDIVIDUAL 003	Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>		Helmet Compliance	
		Helmet Use		Tint Compliance	
UNIT 02	INDIVIDUAL 003	Eye Protection		Airbag <b>NON DEPLOYED</b>	
		<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	
UNIT 02	INDIVIDUAL 003	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>	
UNIT 02	INDIVIDUAL 003	EMS Agency Identifier		EMS Run #	
		Hospital		Date of Death	
UNIT 02	INDIVIDUAL 003	Time of Death		Striking Unit #	
		<b>Non Motorist</b>		Prior Action	
		Location		To/From School	

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UNIT	INDIVIDUAL	Action		
		Action Other		
02	003	<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>		