

6TLOBZLVN1  
18-10350

# 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>18-10350</b>	Investigating Officer/Deputy <b>SERGEANT S. SCHRAM</b>	
Crash Date <b>09/18/2018</b>		Crash Time <b>02:33 AM</b>	Date Arrived <b>09/18/2018</b>	Time Arrived <b>02:33 AM</b>	
Date Notified <b>09/18/2018</b>		Time Notified <b>02:33 AM</b>	Total Units <b>01</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 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>DT4000 (STANDARD CRASH)</b>		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

## Description

Diagram	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 EASTBOUND ON HWY 14 AT THE INTERSECTION WITH DONALD ROAD. UNIT 1 WAS PULLING A TRAILER LOADED WITH WOOD AND THE TRAILER TIRE LEFT THE ROADWAY. UNIT 1 OPERATOR OVER CORRECTED CAUSING THE TRAILER TO COME DISCONNECTED FROM THE TRUCK. THE TRAILER THEN DROVE ITSELF THROUGH THE DITCH BEFORE COMING TO A REST. NO DAMAGE TO EITHER THE TRUCK OR THE TRAILER FROM THE INCIDENT. ALL INFORMATION WAS GATHERED AND FORWARDED TO ME BY SPRING GREEN POLICE DEPARTMENT OFFICER MIKE HAVLIK.

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Location

<b>INTERSECTION ON USH14 EB AT DONALD RD IN THE TOWN OF SPRING GREEN IN SAUK COUNTY</b>	Latitude <b>43.190137298</b>	Longitude <b>-90.146577436</b>
	X Coordinate <b>244311.59375</b>	Y Coordinate <b>4786737.5</b>
	Structure Type	

Crash Scene

First Harmful Event <b>OTHER NON-COLLISION</b>	First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DAYLIGHT</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>YES</b>	Junction Location <b>INTERSECTION</b>	Intersection Type <b>T-INTERSECTION</b>

Unit Summary

<b>UNIT</b>	<b>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>01</b>	Train/Bus # Injured	Total # Citations Issued <b>00</b>	Total Trailers <b>01</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>YES</b>	Direction Of Travel <b>EASTBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>55</b>	Total Lanes <b>02</b>	
	Most Harmful Event: Collision With <b>OTHER NON-COLLISION</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</b>	<b>01</b>	<b>Vehicle</b>			
		License Plate Number <b>KP6674</b>	Plate Type <b>LTK - LIGHT TRUCK</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>1GTEK14T5YE175935</b>	Make <b>GENERAL MOTORS COR</b>	Year <b>2000</b>	Model <b>SIERRA</b>
		Color <b>RED - RED</b>	Body Style <b>TK - TRUCK</b>		Bus Use <b>NOT A BUS</b>
		Initial Contact Point <b>NON-COLLISION</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>GOING STRAIGHT</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>RAN OFF ROADWAY</b>			
01	Driver Distractions <b>UNKNOWN IF DISTRACTED</b>			
	Owner Name <b>RODNEY A SHAW (815) 904-0497</b>		Owner Address <b>2411 BARRINGTON PLACE ROCKFORD, IL 61107 , US</b>	
<b>Sequence Of Events</b>				
01	Event <b>OTHER NON-COLLISION</b>			
	Event			
	Event			
04	Event			
	Event			
	Event			
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>UNKNOWN</b>		Name <b>RODNEY SHAW</b>	
01	<b>Trailer/Towed</b>			
	Trailer Plate #	Plate Type	Make	State
	Unit Type		Individual <b>RODNEY A SHAW (815) 904-0497</b>	Address <b>2411 BARRINGTON PLACE ROCKFORD, IL 61107 , US</b>
UNIT	Vehicle Identification Number			
UNIT	<b>Individual</b>			
	Driver <b>RODNEY A SHAW (815) 904-0497</b>		Citations Issued <b>00</b>	Sex <b>MALE</b>
	Address <b>2411 BARRINGTON PLACE ROCKFORD, IL 61107 , US</b>		Date of Birth [REDACTED]	Race <b>WHITE</b>
	Equipment		Driver License Number [REDACTED] <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
On Duty Crash		Safety Equipment		
Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>		<b>SHOULDER &amp; LAP BELT</b>		

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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>					