

6TL08F2KV5
18-10286

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 18-10286		Investigating Officer/Deputy DEPUTY T. SUTHERLAND	
Crash Date 09/16/2018		Crash Time 11:10 AM		Date Arrived 09/16/2018		Time Arrived 11:37 AM	
Date Notified 09/16/2018		Time Notified 11:12 AM		Total Units 02		Total Injured 00	Total Killed 00
<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 NO		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

Description

<p>Diagram</p> <p>Not To Scale</p>	Reconstruction By
	Photos By
	Additional Information NONE

I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

ON 09-16-18 UNIT 1 WAS STOPPED AT THE STOP SIGN ON CTH DL AT STH 78. UNIT 1 STARTED TO TURN LEFT ONTO STH 78 AND THEN DECIDED TO TURN RIGHT. UNIT 1 BACKED UP TO MAKE ROOM FOR THE RIGHT TURN AND BACKED INTO UNIT 2 WHICH WAS DIRECTLY BEHIND UNIT 1 AT THE STOP SIGN. NO INJURIES REPORTED.

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Location

ON CTHDL WB 65 FT W OF STH78 NB IN THE TOWN OF MERRIMAC IN SAUK COUNTY	Latitude 43.418477014	Longitude -89.600971704
	X Coordinate 289439.375	Y Coordinate 4810573.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 02--FRONT TO REAR	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLOUDY		
Animal Type	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control PARTIAL CONTROL	Special Study
Within Interchange Area NO	Junction Location INTERSECTION	Intersection Type T-INTERSECTION

Unit Summary

01 UNIT	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type MOTOR HOME	Operating As Endorsements			
	Total Occs 5	Train/Bus # Injured	Total # Citations Issued 1	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control STOP SIGN		Traffic Control Inoperative/Missing NO
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL
	Truck Bus or HazMat NO				

01 UNIT	Vehicle			
	License Plate Number F8717	Plate Type MTM - MOTOR HOME	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 3FCMF53G3TJA05637	Make HOLIDAY RAMBLLETTE	Year 1996	Model NO DATA FO
	Color WHI - WHITE	Body Style MH - MOTORIZED HOME		Bus Use NOT A BUS
	Initial Contact Point 6--REAR	Vehicle Damage 6--REAR		
Extent Of Damage MINOR DAMAGE				

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UNIT	Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER		
	What Driver Was Doing BACKING		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions UNSAFE BACKING				
01	01	Driver Distractions PASSENGER			
		Owner Name MICHAEL E DILLON (414) 587-0402		Owner Address S38W33893 COUNTY ROAD D DOUSMAN, WI 53118 , US	
Sequence Of Events					
UNIT	01	Event MOTOR VEH IN TRANSPORT			
		Event			
		Event			
		Event			
UNIT	04	Policy Holder			
		Insurance Company WEST-BEND-MUTUAL-INS-CO		Individual MICHAEL DILLON	
UNIT	001	Individual			
		Driver MICHAEL E DILLON (414) 587-0402		Citations Issued 1	
		Date of Birth [REDACTED]		Sex MALE	
		Address S38W33893 COUNTY ROAD D DOUSMAN, WI 53118 , US		Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
01	001	Equipment		Safety Equipment	
		On Duty Crash		SHOULDER & LAP BELT	
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		Helmet Compliance	
		Helmet Use		Tint Compliance	
		Eye Protection		Airbag NON DEPLOYED	
Injury		Injury Severity NO APPARENT INJURY		Ejection Path NOT EJECTED/NOT APPLICABL	
Ejected NOT EJECTED		Trapped/Extricated NOT TRAPPED			

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UNIT	INDIVIDUAL	Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #		
		Hospital		Date of Death	Time of Death		
		Non Motorist		Striking Unit #	Prior Action	Location	To/From School
		Action					
		Action Other					
		Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO		
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results		
		Drug Type					
		Individual Condition APPEARED NORMAL					
UNIT	INDIVIDUAL	Individual					
		Passenger BARBARA ANN DILLON (414) 587-4586		Citations Issued 0	Sex FEMALE		
		Address S38W33893 COUNTY ROAD D DOUSMAN, WI 53118 , US		Date of Birth [REDACTED]	Race WHITE		
				Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES			
		Equipment		On Duty Crash	Safety Equipment		
		Seat Position 6--SECOND SEAT-RIGHT SIDE		SHOULDER & LAP BELT			
		Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
		Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED		
		Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABL	Trapped/Extricated NOT TRAPPED		
Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #				
Hospital		Date of Death	Time of Death				
Non Motorist		Striking Unit #	Prior Action	Location	To/From School		

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UNIT 01	INDIVIDUAL	Action					
		Action Other					
		Drug & Alcohol	Suspected Alcohol Use NO		Suspected Drug Use NO		
			Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results		
		Drug Type					
		Individual Condition APPEARED NORMAL					
		UNIT 01	INDIVIDUAL	Individual			
				Passenger EMMA A EBERT (414) 587-0402		Citations Issued 0	Sex FEMALE
				Address S38W33893 COUNTY ROAD D DOUSMAN, WI 53118 , US		Date of Birth [REDACTED]	Race WHITE
				Driver License Number			
Equipment	On Duty Crash			Safety Equipment			
	Seat Position 9--THIRD SEAT-RIGHT SIDE			SHOULDER & LAP BELT			
Helmet Use				Helmet Compliance			
Eye Protection				Tint Compliance			
Injury	Injury Severity NO APPARENT INJURY			Airbag NON DEPLOYED			
	Ejected NOT EJECTED			Ejection Path NOT EJECTED/NOT APPLICABL	Trapped/Extricated NOT TRAPPED		
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #			
	Hospital		Date of Death	Time of Death			
	Non Motorist		Striking Unit #	Prior Action	Location	To/From School	

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UNIT 01	INDIVIDUAL 003	Action				
		Action Other				
		Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use NO		
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results		
		Drug Type				
		Individual Condition APPEARED NORMAL				
		Individual				
		Passenger ANDY C EBERT (414) 587-0402	Citations Issued 0	Sex MALE		
		Address S38W33893 COUNTY ROAD D DOUSMAN, WI 53118 , US	Date of Birth [REDACTED]	Race WHITE		
Driver License Number						
UNIT 01	INDIVIDUAL 004	Equipment	On Duty Crash	Safety Equipment		
		Seat Position 12--FOURTH SEAT-RIGHT SIDE	SHOULDER & LAP BELT			
		Helmet Use	Helmet Compliance			
		Eye Protection	Tint Compliance			
		Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED		
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABL	Trapped/Extricated NOT TRAPPED		
		Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #		
		Hospital	Date of Death	Time of Death		
		Non Motorist	Striking Unit #	Prior Action	Location	To/From School

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UNIT 01	INDIVIDUAL 004	Action				
		Action Other				
		Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use NO		
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results		
		Drug Type				
		Individual Condition APPEARED NORMAL				
		Individual				
		Passenger LUKE O REISH	Citations Issued 0	Sex MALE		
		Address S35W31732 PERKINS ROAD WAUKESHA, WI 53189 , US	Date of Birth [REDACTED]	Race WHITE		
	Driver License Number					
UNIT 01	INDIVIDUAL 005	Equipment	On Duty Crash	Safety Equipment		
		Seat Position 3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER	SHOULDER & LAP BELT			
		Helmet Use	Helmet Compliance			
		Eye Protection	Tint Compliance			
		Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED		
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABL	Trapped/Extricated NOT TRAPPED		
		Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #		
		Hospital	Date of Death	Time of Death		
		Non Motorist	Striking Unit #	Prior Action	Location	To/From School

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UNIT	INDIVIDUAL	Action				
		Action Other				
	01	005	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO
			Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	Alcohol Test Results
			Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results
			Drug Type			
			Individual Condition APPEARED NORMAL			
	01	Violations				
		UTC Number BB336943	Issue To? 001	Statute Number 346.87	Seq Num 001	Description UNSAFE BACKING OF VEHICLE

Unit Summary

UNIT	02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE			
		Vehicle Type PASSENGER CAR					Operating As Endorsements		
		Total Occs 1		Train/Bus # Injured		Total # Citations Issued 0		Total Trailers 0	Total HazMat Types 0
		Insurance? YES		Direction Of Travel EASTBOUND		<input type="checkbox"/> Pre CrashTire Mark		Speed Limit 55	Total Lanes 2
		Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT			Special Function NO SPECIAL FUNCTION			Emergency Motor Vehicle Use NOT APPLICABLE	
		Traffic Way TWO-WAY, NOT DIVIDED			Traffic Control STOP SIGN			Traffic Control Inoperative/Missing NO	
		Surface Type BLACKTOP (BITUMINOUS)			Road Curvature STRAIGHT			Road Grade LEVEL	
		Truck Bus or HazMat NO							

UNIT	02	Vehicle				
		License Plate Number 458PJL		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number JF2GPADC3F8321708		Make SUBARU	Year 2015	Model XV CROSSTR
		Color BLU - BLUE		Body Style UT - SPORT UTILITY VEHICLE		Bus Use NOT A BUS
		Initial Contact Point 12--FRONT		Vehicle Damage		
		Extent Of Damage MINOR DAMAGE		12--FRONT		
Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER				

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UNIT VEHICLE	What Driver Was Doing GOING STRAIGHT	Vehicle Factors		
	Driver Prior Action Other	NOT APPLICABLE		
	Driver Actions NO CONTRIBUTING ACTION			
	Driver Distractions NOT DISTRACTED			
02	02	Owner Name AARON STEVEN ZSCHERNITZ (608) 558-8472	Owner Address 3 SONORA CT MADISON, WI 53719 , US	
Sequence Of Events				
01	01	Event MOTOR VEH IN TRANSPORT		
02	02	Event		
03	03	Event		
04	04	Event		
UNIT	Policy Holder			
	Insurance Company PROGRESSIVE-UNIVERSAL-INSURANCE-COMP	Individual AARON ZSCHERNITZ		
UNIT INDIVIDUAL	Individual			
	Driver AARON STEVEN ZSCHERNITZ (608) 558-8472	Citations Issued 0	Sex MALE	
		Date of Birth [REDACTED]	Race WHITE	
	Address 3 SONORA CT MADISON, WI 53719 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES		
02 006	Equipment	On Duty Crash	Safety Equipment SHOULDER & LAP BELT	
	Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY			
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED	
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABL	Trapped/Extricated NOT TRAPPED	
	Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #	

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UNIT INDIVIDUAL 02 006	Hospital	Date of Death		Time of Death		
	Non Motorist	Striking Unit #	Prior Action	Location	To/From School	
	Action					
	Action Other					
	Drug & Alcohol	Suspected Alcohol Use NO		Suspected Drug Use NO		
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type		Alcohol Test Results	
	Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	
	Drug Type					
	Individual Condition APPEARED NORMAL					