18-10324

### **WISCONSIN MOTOR VEHICLE CRASH REPORT**

	Document Number Override	Primary Crash	Document #	Agency 18-103	Crash Number	Investigating DEPUTY E	Officer/Deputy			
פ	Crash Date <b>09/17/2018</b>	Crash Time 07:31 AM		Date Ar 09/17/		Time Arrived 07:48 AM				
0 I LUD4A4JG	Date Notified <b>09/17/2018</b>	Time Notified 07:00 AM		Total U 02	nits	Total Injured	Total Kille	ed		
֡֝֝֝֝֝֝֝֝֝֝֝֝֝֝֝֝֝֝֡֝	On Emergency Hi	t and Run	Lane Clos	ure	Work Zone	Trailer	or Towed	Reporting Threshold		
_ _ 0	Government Property	Active So	chool Zone	School NO	Bus Related	Tags				
	Reportable	Crash Type DT4000 (STA	ANDARD CRASH	H)		Amend	ed	Secondary Crash		
	Description Diagram						Reconstruction	a Dv		
	Diagram						Reconstruction	ГБУ		
						ì				
	dı	ump truck haulir	ng gravel		*		Photos By			
	\	\			not to scale					
							Additional Info	rmation		
				sth 33						
	_									
		CKRIERGER 1885-5-1)								
	✓ I, a sworn law enforceme	ent officer, agr	ee that I have n	ot added	I any CJIS data in this	report.				
	UNIT 1 WB ON STH 33 HAULING UNIT 2 WHICH WAS EB. DAMAC	SE TO WINDSHIE	RATOR UNKNOWI ELD CAUSED BY F	NGLY LO	SING GRAVEL OUT OF BO GRAVEL FROM TRUCK. N	OX AND FALL O INJURIES F	ING GRAVEL S REPORTED. BO	TRUCK WINDSHIELD OF DTH VEHICLES		
	DEPARTED SCENE BY RESPEC	TIVE DRIVERS.								

### 6TL0B4X4JG 18-10324

Location

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 09/17/2018

Crash Time 07:31 AM

•	0.81	STH33 EB I MI W SAND RD			Latitude 43.517340977		Longitude -89.813620123			
	IN T	THE TOWN OF DELTON SAUK COUNTY	N		X Coordii <b>272595.</b>			Y Coord 482211		
					Structure NO STR	Type RUCTURE				
	Cra	sh Scene								
•	First	: Harmful Event			First Harr	mful Event	Location			
		RGO/EQUIPMENT LOS	S OR SHIFT		ON ROA					
		ner of Collision	E IN TRANSPORT		Light Cor					
		COLLISION W/VEHICL	E IN TRANSPORT		DAYLIG	Factor(s)				
		d Surface Condition(s)			Roadway	racior(s)				
	DR	Υ								
	Envi	ronment Factor(s)								
	NOI	NE			NONE					
	Wea	ather Condition(s)								
	CLE	EAR								
	Anim	nal Type			Deletion	To Trofficu				
	AIIII	пагтуре				To Trafficw	ON ROAD			
	Cras	sh Classification - Location	Crash Cla	assification	- Jurisdiction					
	_	BLIC PROPERTY					RISDICTION		T	
	Triba	al Land			Access C				Special Study	
	With	in Interchange Area	Junction Location	Inte	Intersection Type					
	NO	=	NON-JUNCTION		T AN INTERSE	ECTION				
	Uni	t Summary		<u> </u>						
		•								
	Unit	Status		Vehicle Operatir	g As Classification	n	Unit Type			
	IN T	RANSIT		Vehicle Operatir C CLASS	g As Classification	n	Unit Type TRUCK			
	IN T	TRANSIT icle Type		· ·	g As Classification	n ———	TRUCK	As Endorser	nents	
5	Vehi	TRANSIT icle Type RAIGHT TRUCK (INSER		C CLASS			TRUCK Operating			
5	Vehi STR	TRANSIT icle Type	RT TRUCK) Train/Bus # Injured	C CLASS  Total # Citations		Total Tra	TRUCK Operating	Total Haz	ments Mat Types	
5	Vehi STR Tota 1	TRANSIT icle Type RAIGHT TRUCK (INSER		C CLASS  Total # Citations 0	Issued		TRUCK Operating	Total Haz	Mat Types	
 [0	Vehi STR Tota 1	TRANSIT icle Type RAIGHT TRUCK (INSER	Train/Bus # Injured	C CLASS  Total # Citations	Issued	Total Tra	TRUCK Operating	Total Haz	Mat Types	
- O - O - O - O - O - O - O - O - O - O	IN T Vehi STR Tota 1 Insur YES	TRANSIT icle Type RAIGHT TRUCK (INSERTION I Occs rance? S t Harmful Event: Collision W	Train/Bus # Injured  Direction Of Travel  WESTBOUND	Total # Citations 0 Pre Cra: Mai Special Function	Issued	Total Tra  0  Speed L	TRUCK Operating ailers imit	Total Haz  0 Total Lane 2 y Motor Vehi	Mat Types	
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	IN T Vehi STF Tota 1 Insury YES Most CAR Traff TWO Surfa BLA Truc TRU	TRANSIT icle Type RAIGHT TRUCK (INSERTION OF TRANSIT) ICOCCS  TRANCE? ICOCCS  TRANCE? ICOCCS  TRANCE? ICOCCS  TRANCE? ICOCCS  TRANCE COLLISION WERE COLLISIO	Train/Bus # Injured  Direction Of Travel WESTBOUND  With S OR SHIFT  BINATION > 10,000LBS O	Total # Citations 0  Pre Cra: Mai Special Function NO SPECIAL Traffic Control NO CONTROI Road Curvature STRAIGHT  BVWR/GCWR  Plate Type HTK - HEAV Make	Issued shTire k FUNCTION	Total Tra  0 Speed L  55  St  WI Year	TRUCK Operating  ailers  imit  Emergence NOT APP Traffic Cor NO Road Grac LEVEL  Country of I UNITED S Model	Total Haz  0 Total Lane 2 y Motor Vehi PLICABLE atrol Inoperatede	Mat Types es cle Use	
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	IN T Vehi STF Tota 1 Insury YES Most CAR Traff TWO Surfa BLA Truc TRU	TRANSIT  icle Type  RAIGHT TRUCK (INSERTION OF TRANSIT)  RAIGHT TRUCK (INSERTION OF TRANSIT)  It Harmful Event: Collision WRGO/EQUIPMENT LOS  fic Way  O-WAY, NOT DIVIDED  ace Type  ACKTOP (BITUMINOUS  ICK Bus or HazMat  JCK OR TRUCK COMB  Vehicle  License Plate Number  RB22137  Vehicle Identification Num  1M2AD09C7SW00249  Color	Train/Bus # Injured  Direction Of Travel WESTBOUND  With S OR SHIFT  BINATION > 10,000LBS O	Total # Citations 0  Pre Cra: Mai Special Functior NO SPECIAL Traffic Control NO CONTROI Road Curvature STRAIGHT  GVWR/GCWR  Plate Type HTK - HEAV Make MACK Body Style	Issued ShTire k FUNCTION -	Total Tra  0 Speed L  55  St  WI Year	TRUCK Operating  ailers  imit  Emergence NOT APP Traffic Cor NO Road Grac LEVEL  Country of I UNITED S Model	Total Haz  0 Total Lane 2 y Motor Vehi PLICABLE atrol Inoperate de	Mat Types es cle Use	
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	IN T Vehi STF Tota 1 Insury YES Most CAR Traff TWO Surfa BLA Truc TRU	TRANSIT icle Type RAIGHT TRUCK (INSERTION OF TRUCK) IT OCCS  THARMFUL EVENT: COllision WRGO/EQUIPMENT LOS IT WAY, NOT DIVIDED ACKTOP (BITUMINOUS OF TRUCK COMB  Vehicle License Plate Number RB22137 Vehicle Identification Num 1M2AD09C7SW00249 Color WHI - WHITE Initial Contact Point	Train/Bus # Injured  Direction Of Travel WESTBOUND  With S OR SHIFT  BINATION > 10,000LBS O	Total # Citations 0  Pre Cra: Mai Special Functior NO SPECIAL Traffic Control NO CONTROI Road Curvature STRAIGHT  GVWR/GCWR  Plate Type HTK - HEAV Make MACK Body Style CB - CAB CH	Issued ShTire	Total Tra  0 Speed L  55  St  WI Year	TRUCK Operating  ailers  imit  Emergency NOT APF Traffic Cor NO Road Grac LEVEL  Country of I UNITED S Model NO DATA Bus Use	Total Haz  0 Total Lane 2 y Motor Vehi PLICABLE atrol Inoperate de	Mat Types es cle Use	

18-10324

# WISCONSIN MOTOR VEHICLE CRASH REPORT

		Towed Due To Dama	age		icle Removed By					
		NOT TOWED		OP	ERATOR					
		What Driver Was Doing		Vehicle Factors						
		GOING STRAIGHT								
		Driver Prior Action Ot	ther	ОТ	HER					
		D : A ::								
		Driver Actions NO CONTRIBUTION	NG ACTION							
	Щ	NO CONTRIBUTII	NG ACTION							
	IC									
5	VEHICL									
	>									
		Driver Distractions NOT DISTRACTE	D							
		NOT DIOTRACTE								
5	01									
_	)									
		0 1		-	0 11					
		Owner Name PRESTIGE LAND	SCAPING LLC		Owner Address 2567 E MAIN ST					
		(608) 524-1818	337 II II I I I I I I I I I I I I I I I		REEDSBURG, WI 53959, US					
		,								
		0								
		Sequence Of E	vents							
	01		ENT LOSS OR SHIFT							
		Event								
	02	270.11								
	•	Event								
	03									
	04	Event								
╘	I	Policy Holder								
		Insurance Company		C	organization/Company					
_		HARMS		F	RESTIGE LANDSCAPING LLC					
	ı	Individual								
		Driver	<b>/</b> F		itations Issued	Sex				
	Ļ	TED RAY DRIEFKE (608) 393-0267		0		MALE				
	U				ate of Birth	Race WHITE				
	INDIVIDUA					Willie				
5	$\leq$	Address 405 FRANKLIN S	т	D	river License Number					
	Z	LA VALLE, WI 539		STATE: WISCONSIN COUNTRY: UNITED STATES						
		,	, , , , , , , , , , , , , , , , , , , ,							
			On Duty Crash		ofoty Favings at					
		Equipment	On Duty Clasii	٥	afety Equipment					
		Seat Position	l	<b>⊢</b> ,	HOULDER & LAP BELT					
		Seat Position  1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY			MOOLDER & EAT BEET					
		Helmet Use		-	lelmet Compliance					
				'						
		Eye Protection		Т	int Compliance					
					·					
_	Ξ		Injury Severity	А	irbag					
5	00	Injury	NO APPARENT INJURY	N	ION DEPLOYED					
		Ejected			jection Path	Trapped/Extricated				
		NOT EJECTED		N	IOT EJECTED/NOT APPLICABL	NOT TRAPPED				

18-10324

# WISCONSIN MOTOR VEHICLE CRASH REPORT

		Medical Transport				EMS A	gency Identific	er		EMS Run #		
		NOT TRANSPORTED										
		Hospital				Date o	Date of Death			Time of Death		
		Non Motorist	Striking L	Jnit #	Prior Action			_ocation				To/From School
		Action			I		<u> </u>					
LIND	INDIVIDUAL											
	IND											
		Action Other										
	Ľ	rug & Alcohol	Suspecte NO	d Alcohol U	se	NO Suspe	cted Drug Use					
		Alcohol Test Given TEST NOT GIVEN				Alcoho	l Test Type			Alcohol Tes	t Results	
		Drug Test Given TEST NOT GIVEN				Drug T	est Type			Drug Test R	Results	
5	001	Drug Type				•						
		Individual Condition										
		APPEARED NORMAL										
		Carrier										
		<b>✓</b> Use V	ehicle O	wner San	ne as Carrier		Source DRIVER					
5	01	Name				Address 2567 E MAIN ST						
		USDOT# 1354				REEDSBURG, WI 53959 , US						
_	BUS	GVWR Vehicle Configuration MORE THAN 26,000 LB SINGLE UNIT TRUCK			(3 OR MO	3 OR MORE AXLES) Cargo			o Body Type			
		US DOT#		Carrier Ty		`	Permi			nitted Load		
ر	CK	1354916				R NOT			T PERMITTED			
	TRUC	OS/OW Load	WI Permit							icle Required Escort Vehicle Present		
		Measured Height		Measu	red Length		Measured W	idth		Measured W	/eight	
	Unit	Summary •		,								
		Status				Vehicle Op	perating As Cla	assification		Unit Type		
		RANSIT				D CLASS	S			AUTOMO		
05		cle Type								Operating A	s Endorsem	ents
J		SENGER VAN	Trai	in/Rue # Inii	ırod	Total # Cit	ations leaved		Total Traile	re	Total HazM	Ant Types
	10ta	al Occs Train/Bus # Injured		Total # Citations Issued  0			0	513	0	iat Types		
		ance?	Dire	ection Of Tra	avel	Pre CrashTire			Speed Lim	it	Total Lanes	S
⊢		}	FΔ	CTDOLINI	_	l 🖂 🕻	Mark		55		2	
=	YES	Most Harmful Event: Collision With Spec								Emergency Motor Vehicle Use NOT APPLICABLE		
LNO	Most	Harmful Event: Collision	on With			Special Fu NO SPE	inction CIAL FUNC	ΓΙΟΝ		NOT APP	Motor Vehic	

18-10324

# WISCONSIN MOTOR VEHICLE CRASH REPORT

		ACKTOP (BITUMINOUS)		RAIGHT		LEVEL				
		k Bus or HazMat	<b>O</b>							
	NO									
	,	Vehicle								
		License Plate Number		te Type	St <b>WI</b>	Country of Issuance UNITED STATES				
		569WGA	Ma	T - AUTOMOBILE	Year					
05	05	Vehicle Identification Number 2C4RC1BG1GR288092		RYSLER	2016	Model TOWN &				
		Color		dy Style	1-0.0	Bus Use				
		GRY - GRAY		- VAN		NOT A BUS				
	Щ	Initial Contact Point	Vel	nicle Damage	•					
LNO	2	NON-COLLISION	12	-FRONT						
<b>–</b>	VEHICLE	Extent Of Damage MINOR DAMAGE	12	FRONT						
	>	Towed Due To Damage	Vel	nicle Removed By						
		NOT TOWED		ERATOR						
		What Driver Was Doing	Vel	nicle Factors						
		GOING STRAIGHT	NC	T APPLICABLE						
		Driver Prior Action Other	140	A A I LIOADEL						
		Driver Actions								
	щ	NO CONTRIBUTING ACTION								
LINO	걸									
5	VEHICL									
	>									
		Driver Distractions								
		NOT DISTRACTED								
07	02									
		Owner Name CELIA J ZEMAN		Owner Address 2324 RUFUS RD						
		(608) 604-0019		REEDSBURG, WI 5395	9 , US					
		Sequence Of Events								
	2	Event   STRUCK BY FALLING, SHIFTING CARGO OR AN	YTH	NG SET IN MOTION BY	MOTOR VE	EHICLE				
		Event								
	02									
	03	Event								
	0									
	9	Event								
		Deliev Helder								
LNO		Policy Holder Insurance Company	-	ndividual						
5		IMT-INS-CO		CELIA ZEMAN						
		Individual								
		Driver	10	Citations Issued		Sex				
		CELIA J ZEMAN		)		FEMALE				
	IDUAI	(608) 604-0019	1	Date of Birth		Race WHITE				
╘	9					WINIE				

18-10324

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 09/17/2018

Crash Time 07:31 AM

NO	Address 2324 RUFUS RD REEDSBURG, WI 53959 , US			Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES						
		Equipment	On Duty Crash		Safety Equipment					
		Seat Position 1FRONT SEAT-I	LEFT SIDE (DRIVE	R/MOTORCY	SHOULDER & L	AP BELT				
		Helmet Use			Helmet Compliance	)				
		Eye Protection			Tint Compliance					
02	005	Injury	Injury Severity NO APPARENT INJURY		Airbag NON DEPLOYE	D				
		Ejected NOT EJECTED			Ejection Path  NOT EJECTED/	NOT APPLICABL	Trapped/Extricated NOT TRAPPED			
		Medical Transport NOT TRANSPOR	TED		EMS Agency Identi	fier	EMS Run #			
		Hospital			Date of Death		Time of Death			
		Non Motorist	Striking Unit #	Prior Action		Location	ı	To/From School		
LINO	INDIVIDUAL	Action								
		Action Other			Consented David Un-					
	E	Drug & Alcohol	Suspected Alcohol L NO	Jse	Suspected Drug Use NO					
		Alcohol Test Given TEST NOT GIVEN	I		Alcohol Test Type		Alcohol Test Results			
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Results			
05	005	Drug Type								
		Individual Condition  APPEARED NOR	MAL							