

6TL08F2KV7  
18-10754

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>18-10754</b>	Investigating Officer/Deputy <b>DEPUTY T. SUTHERLAND</b>	
Crash Date <b>09/28/2018</b>		Crash Time <b>07:50 AM</b>	Date Arrived <b>09/28/2018</b>	Time Arrived <b>07:54 AM</b>	
Date Notified <b>09/28/2018</b>		Time Notified <b>07:52 AM</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>Not To Scale</p> <p>STH 136</p> <p>Festival Foods</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.

ON 09-28-18 UNIT 1 WAS PULLING OUT OF THE FESTIVAL FOODS PARKING LOT TURNING LEFT ONTO STH 136. UNIT 2 WAS TRAVELING WEST ON STH 136. UNIT 1 HIT UNIT 2 WHILE TURNING LEFT. BOTH VEHICLES THEN PULLED INTO HWY SHOP ENTRANCE. NO INJURIES REPORTED.

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Location

ON LINN ST/ STH136 WB 519 FT W OF LINN ST/ STH33 EB IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY	Latitude <b>43.474761524</b>	Longitude <b>-89.770867266</b>
	X Coordinate <b>275893.03125</b>	Y Coordinate <b>4817268.5</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>05--SIDESWIPE/SAME DIRECTION</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>CLOUDY</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</b>	<b>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>1</b>		Train/Bus # Injured		Total # Citations Issued <b>1</b>		Total Trailers <b>0</b>	
	Insurance? <b>YES</b>		Direction Of Travel <b>WESTBOUND</b>		<input type="checkbox"/> Pre Crash Tire Mark		Speed Limit <b>35</b>	
	Total HazMat Types <b>0</b>		Total Lanes <b>2</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>			
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>				Special Function <b>NO SPECIAL FUNCTION</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>				Traffic Control <b>NO CONTROL</b>		Road Grade <b>LEVEL</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>				Road Curvature <b>STRAIGHT</b>		Truck Bus or HazMat <b>NO</b>	

<b>UNIT</b>	<b>VEHICLE</b>	<b>Vehicle</b>				
		License Plate Number <b>5M00NS</b>		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>1GNKRGEDXBJ11906</b>		Make <b>CHEVROLET</b>	Year <b>2011</b>	Model <b>TRAVERSE L</b>
		Color <b>BLK - BLACK</b>		Body Style <b>UT - SPORT UTILITY VEHICLE</b>		Bus Use <b>NOT A BUS</b>
		Initial Contact Point <b>1--RIGHT FRONT CORNER</b>		Vehicle Damage <b>1--RIGHT FRONT CORNER</b>		
Extent Of Damage <b>MINOR DAMAGE</b>						

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UNIT	VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>	
		What Driver Was Doing <b>LEFT TURN</b>		Vehicle Factors	
		Driver Prior Action Other		<b>NOT APPLICABLE</b>	
		Driver Actions <b>OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER</b>			
01	01	Driver Distractions <b>NOT DISTRACTED</b>			
		Owner Name <b>ANDREW A MOON (608) 393-8630</b>		Owner Address <b>E12090 COUNTY ROAD T BARABOO, WI 53913 , US</b>	
<b>Sequence Of Events</b>					
UNIT	01	Event <b>MOTOR VEH IN TRANSPORT</b>			
		Event			
		Event			
		Event			
UNIT	04	<b>Policy Holder</b>			
		Insurance Company <b>WISCONSIN-MUTUAL-INS-CO</b>		Individual <b>ANDREW MOON</b>	
UNIT	INDIVIDUAL	Driver <b>CARLY JOYCE MOON (608) 393-8630</b>		Citations Issued <b>1</b>	Sex <b>FEMALE</b>
		Address <b>E12090 COUNTY ROAD T BARABOO, WI 53913 , US</b>		Date of Birth [REDACTED]	Race <b>WHITE</b>
		Driver License Number [REDACTED]		STATE: WISCONSIN COUNTRY: UNITED STATES	
		<b>Equipment</b>		On Duty Crash	
01	001	Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</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>	
Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABL</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>				
01	001	<b>Violations</b>				
		UTC Number <b>BB336945</b>	Issue To? <b>001</b>	Statute Number <b>346.89(1)</b>	Seq Num <b>001</b>	Description <b>INATTENTIVE DRIVING</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 VAN</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 type="checkbox"/> <b>Pre CrashTire Mark</b>	Speed Limit <b>35</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>Vehicle</b>				
		02	02	License Plate Number <b>HD2866</b>	Plate Type <b>LTK - LIGHT TRUCK</b>	St <b>WI</b>
Vehicle Identification Number <b>1GCFG15X191114288</b>	Make <b>CHEVROLET</b>			Year <b>2009</b>	Model <b>NO DATA FO</b>	
Color <b>WHI - WHITE</b>	Body Style <b>VN - VAN</b>			Bus Use <b>NOT A BUS</b>		

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UNIT	VEHICLE	Initial Contact Point <b>8--LEFT SIDE REAR</b>	Vehicle Damage	
		Extent Of Damage <b>MINOR DAMAGE</b>	<b>8--LEFT SIDE REAR</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>	
UNIT	VEHICLE	Driver Actions <b>NO CONTRIBUTING ACTION</b>		
		Driver Distractions <b>NOT DISTRACTED</b>		
		Owner Name <b>BAND BOX TRUCKING INC</b>	Owner Address <b>1207 SUPERIOR AVE PO BOX 826 TOMAH, WI 54660 0826, US</b>	
02	02	<b>Sequence Of Events</b>		
		01	Event <b>MOTOR VEH IN TRANSPORT</b>	
		02	Event	
		03	Event	
		04	Event	
UNIT	VEHICLE	<b>Policy Holder</b>		
		Insurance Company <b>ACUITY,-A-MUTUAL-INSURANCE-CO</b>	Organization/Company <b>BAND BOX TRUCKING INC</b>	
UNIT	INDIVIDUAL	<b>Individual</b>		
		Driver <b>MARTIN L BLAKE (608) 343-6149</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>
		Address <b>E10460C HANGER CT BARABOO, WI 53913 , 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 <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				

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02	UNIT	INDIVIDUAL	002	<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	
				Drug Type				
				Individual Condition <b>APPEARED NORMAL</b>				