

6TL09QKRCW
18-10782

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 18-10782	Investigating Officer/Deputy DEPUTY S. STACEY	
Crash Date 09/28/2018		Crash Time 05:55 PM	Date Arrived 09/28/2018	Time Arrived 06:07 PM	
Date Notified 09/28/2018		Time Notified 06:03 PM	Total Units 01	Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input checked="" 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 NO	Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram	Reconstruction By
 <p style="text-align: center;">NOT TO SCALE</p>	Photos By
	Additional Information NONE

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

UNIT 1 WAS TRAVELING SOUTHBOUND ON USH 12. UNIT 1 WAS PULLING A TRAILER WITH WOOD ON IT. UNIT 1 STATED THE TRAILER JACK KNIFED, STRIKING THE FRONT LEFT CORNER OF THE VEHICLE, AND PULLING HIS VEHICLE TO THE EAST SIDE OF THE ROAD. UNIT 1 CAME TO REST FACING WEST BOUND, IN THE DITCH, PARTIALLY BLOCKING THE LANE OF TRAFFIC. UNIT 1 WAS REMOVED BY THE OPERATOR.

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Location

ON USH12 EB 0.32 MI N OF MINE RD IN THE CITY OF BARABOO IN SAUK COUNTY	Latitude 43.457640428	Longitude -89.768915727
	X Coordinate 275987.625	Y Coordinate 4815361.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event JACKKNIFE		First Harmful Event Location ON ROADWAY	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT		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 NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION	
Closure Type LANE CLOSURE		Reasons for Closure LAW ENFORCEMENT	
Date Initial Lane/Rd Closed 09/28/2018	Time Initial Lane/Rd Closed 05:55 PM		
Date All Lanes Open 09/28/2018	Time All Lanes Open 06:15 PM	Date Scene Cleared 09/28/2018	Time Scene Cleared 06:21 PM

Unit Summary

UNIT	01	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type TRUCK			
		Vehicle Type UTILITY TRUCK/PICKUP TRUCK					Operating As Endorsements		
		Total Occs 2	Train/Bus # Injured	Total # Citations Issued 0	Total Trailers 1	Total HazMat Types 0			
		Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 65	Total Lanes 4			
		Most Harmful Event: Collision With JACKKNIFE		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE			
		Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO			
		Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL			
		Truck Bus or HazMat NO							
		01	01	Vehicle					
				License Plate Number AF9335		Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES	
Vehicle Identification Number 1GTV2UEC3EZ214168				Make GENERAL MOTORS COR	Year 2014	Model SIERRA K15			

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UNIT	VEHICLE	Color RED - RED	Body Style PK - PICKUP	Bus Use NOT A BUS
		Initial Contact Point NON-COLLISION	Vehicle Damage	
		Extent Of Damage FUNCTIONAL DAMAGE	7--LEFT REAR CORNER, 8--LEFT SIDE REAR	
		Towed Due To Damage NOT TOWED	Vehicle Removed By OWNER	
		What Driver Was Doing GOING STRAIGHT	Vehicle Factors	
UNIT	VEHICLE	Driver Prior Action Other	NOT APPLICABLE	
		Driver Actions NO CONTRIBUTING ACTION		
		Driver Distractions NOT DISTRACTED		
01	01	Owner Name ROBERT L DEEVER (608) 692-2535	Owner Address E9778 COUNTY ROAD O PRAIRIE DU SAC, WI 53578 , US	
		Sequence Of Events		
01	01	Event JACKKNIFE		
	02	Event		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company ERIE-INS-CO	Individual ROBERT DEEVER		
UNIT	Trailer/Towed			
	Trailer Plate #	Plate Type	Make UNKNOWN	State
	Country of Issuance			
TRAILER/ TOWED	Unit Type UTILITY TRAILER	Individual ROBERT L DEEVER (608) 692-2535		Address E9778 COUNTY ROAD O PRAIRIE DU SAC, WI 53578 , US
	Vehicle Identification Number			
IT	IDUAL	Individual		
		Driver ROBERT L DEEVER (608) 692-2535	Citations Issued 0	Sex MALE
		Date of Birth [REDACTED]	Race WHITE	

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UN	INDIV	Address E9778 COUNTY ROAD O PRAIRIE DU SAC, WI 53578 , US		Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES				
		Equipment On Duty Crash		Safety Equipment				
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		SHOULDER & LAP BELT				
		Helmet Use		Helmet Compliance				
		Eye Protection		Tint Compliance				
		01	001	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
UNIT	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			
		01	001	Drug Type				
				Individual Condition APPEARED NORMAL				
				Individual				
		UNIT	INDIVIDUAL	Passenger CHRISTINE L DEAVER (608) 332-2553		Citations Issued 0	Sex FEMALE	
				Date of Birth [REDACTED]		Race WHITE		
Address E9778 COUNTY ROAD O PRAIRIE DU SAC, WI 53578 , US				Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES				
		Equipment On Duty Crash						

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01	002	Safety Equipment		SHOULDER & LAP BELT				
		Seat Position 3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER		Helmet Compliance				
		Helmet Use		Tint Compliance				
		Eye Protection		Airbag NON DEPLOYED				
		Injury		Injury Severity NO APPARENT INJURY		Ejection Path NOT EJECTED/NOT APPLICABL		Trapped/Extricated NOT TRAPPED
		Ejected NOT EJECTED		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						
01	002	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						