6TL0B3P3DD

18-10734

WISCONSIN MOTOR VEHICLE CRASH REPORT

Document Number Override							gating Officer/Deputy ITY S. PARKHURST			
Crash Date			Date Ar			d				
09/27/2018	04:50 PM		09/27/2018			05:15 PM				
Date Notified 09/27/2018	Time Notified 04:55 PM		Total Ur 02	nits		Total Injured Total Killed 00		led		
On Emergency	and Run	✓ Lane Clos	ure Work Zone			Trailer	or Towed	Reporting Threshold		
On Emergency Government Property	Active So	chool Zone	School NO	School Bus Related NO						
▼ Reportable	Crash Type DT4000 (STA	ANDARD CRASH	H)			Amended Second				
Description	•				•			•		
Diagram			(#2			Photos By Additional Inf			
стнх		[#1]	#2							
Not to Scale				стн w	STOR					
I, a sworn law enforceme	nt officer, agre	ee that I have no	ot added	any CJIS data	in this r	eport.				
UNIT 2 WAS EASTBOUND ON CT EASTBOUND ON CTH X. UNIT 1 INTERSECTION.	TH X AND SLOW	ING TO TURN SO	UTH ONT	O CTH W. UNIT 1	1 WAS TRA	AVELING EA				

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Loc	ation										
ON	CTHW SB					Latitude			Longitud	de	
	TS					43.481341743 -89.634502297					
_	CTHX SB					X Coordin	ate		Y Coord	linate	
	HE TOWN OF GREEN	IFIELD				286945.75 4817641					
IN S	SAUK COUNTY					Structure					
						Oliuciuic	турс				
Cra	sh Scene										
First	Harmful Event					First Harm	ıful Event L	ocation			
	TOR VEH IN TRANSPO		ON ROA								
Manner of Collision 02FRONT TO REAR						Light Condition					
			DAYLIGHT Roadway Factor(s)								
	d Surface Condition(s)					Roadway	racior(s)				
WE.											
Envi	ronment Factor(s)										
NOI	NE					NONE					
Wea	ther Condition(s)										
CLC	DUDY										
Anim	nal Type					Relation T	o Trafficwa	av			
	· /F -							N ROAD			
Cras	h Classification - Location							- Jurisdiction			
PUBLIC PROPERTY						NO SPE	CIAL JUF	RISDICTION			
Triba	al Land					Access Control Special Study					
Within Interchange Area Junction Location					T -	NO CONTROL					
With NO	in Interchange Area		Intersection T-INTER								
Clos	ure Type			Reasons for Clos							
LAN	IE CLOSURE										
	Initial Lane/Rd Closed	Time Initial Lane/Rd Clo 04:50 PM	LAW ENFORC Date Scene Clear			EMENT, TOW TRUCK					
Date	All Lanes Open	Time All Lanes Open				ared Tim		me Scene Cleared			
09/2	7/2018	05:56 PM		09/27	7/2018		05	5:56 PM			
	t Summary 💻										
	Status				U	lassification	lassification		Unit Type		
	RANSIT		DС	LASS				AUTOMOBILE Operating As Endorsements			
	cle Type SSENGER CAR				Operating As Endorsements					HIGHI?	
	I Occs	Tota	otal # Citations Issued			Total Tra	ilers	Total HazMat Types			
1		Train/Bus # Injured	2				0		0		
Insu	rance?	Direction Of Travel		Pre	CrashTire)	Speed Li	mit Total Lanes		es	
NO		EASTBOUND			Mark		55		2		
					iction	TION		Emergency Motor Vehicle Use NOT APPLICABLE			
	OTOK VEITIN TRANSFORT				rol			Traffic Control Inoperative/Missing NO			
	WO-WAY, NOT DIVIDED urface Type Road LACKTOP (BITUMINOUS) STR				ROL						
					ature			Road Grade			
					Т			SAG(BOT	ГОМ)		
Truc NO	k Bus or HazMat										
	Vahiala										
	Vehicle License Plate Number		Dio	te Type		St. Country of leguance					
	317JDD				JTOMOBII	St LE WI		· ·	Country of Issuance UNITED STATES		
	Vehicle Identification Nun	mber	Mal				Year	Model			
9					HYUNDAI		2004	SONATA GLS			

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WISCONSIN MOTOR VEHICLE CRASH REPORT

			Body Style 4D - 4DR	Bus Use NOT A BUS						
	щ	Initial Contact Point	Vehicle Damage							
LNO	VEHICL	12FRONT Extent Of Damage	12FRONT							
7	VEF	DISABLING DAMAGE	12-FRONT							
			Vehicle Removed By MIKES TOWING							
		What Driver Was Doing	Vehicle Factors							
		GOING STRAIGHT Driver Prior Action Other	NOT APPLICABLE							
		Bliver Filor Action Office	NOT AT LIGABLE							
	ш	Driver Actions FAILED TO YIELD RIGHT-OF-WAY								
L	VEHICLE									
5	ÆΗ									
	_									
		Driver Distractions CARELESS/INATTENTION								
2	01									
		Owner Name DEANNE L ROESSLER	Owner Address E5664 CTH W							
		(608) 727-2800	LOGANVILLE, WI 53943 , US							
		Samuel of Francis								
		Sequence Of Events Event								
	01	MOTOR VEH IN TRANSPORT								
	02	Event								
	03	Event								
		Event								
	04									
	ď	Individual Driver	Citations Issued	Sex						
	<u>ا</u> ـ	MARCUS M PENNIE (617) 516-4059	2	MALE						
_	700	(0.17,0.0	Date of Birth	Race BLACK						
	INDIVIDUAL	Address 200 ASH ST	Driver License Number							
	Z	BARABOO, WI 53913 , US	STATE: WISCONSIN COUNTRY: UN	IITED STATES						
		On Duty Creek	0.61.5							
		Equipment On Duty Crash	Safety Equipment							
		Seat Position 1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY	SHOULDER & LAP BELT							
		Helmet Use	Helmet Compliance							
		Eye Protection	Tint Compliance							
			Till Somplianoo							

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

_	7		Injury Severity			Airbag							
5	90	Injury	SUSPECTE	D MINO	R INJURY	NON DEPLOYED							
		Ejected				Ejection Path Trapped/Extricated							
		NOT EJECTED	EJECTED				CTED/	NOT APPL	.ICABL	NOT TRAPPED			
		Medical Transport				EMS Agend	cy Ident	ifier		EMS Run #			
		EMS GROUND				6000368							
		Hospital				Date of Dea	ath			Time of Dea	ıth		
		ST CLARE HOSP											
		Non Motorist	Striking Unit #	F	Prior Action			Location				To/From School	
		Action											
	¥												
⊨	Ξ												
	₹												
_	NDIVIDUAL												
	Z												
		A stisse Others											
		Action Other											
			Suspected Ald	ohol Hee		Suspected	Drug He	20					
	L	Drug & Alcohol	NO	JUNION USE		NO	Drug U	50					
		Alcohol Test Given	_			Alcohol Tes	st Turno			Alcohol Tes	t Doculto		
		TEST NOT GIVEN				Alconol Tes	вгтуре			Alconol res	i Results		
		Drug Test Given				Drug Toet T	Drug Test Type			Drug Test Results			
		TEST NOT GIVEN				Bridg Foot Typo				Diug Test R	esuits		
	_	Drug Type											
5	9	Diag Type											
		Individual Condition											
		ASLEEP OR FATI	GUED										
		AGEEE! GRIAII	0025										
	,	Violations											
		UTC Number	Issue To?		e Number	Seq Num	Descr	iption					
	2	BB379622	001	343.4	4(1)(a)	001	OPERATING AFTER SUSPENSION						
		UTC Number	Issue To?	Statute	e Number	Seq Num	Seg Num Description						
	02	BB379633	001	344.6	2(1)	001	OPE	RATE MOT	OR VEHIC	CLE W/O IN	SURANCI	E	
	llni	t Summary •	I.				I .						
		Status			ΙV	ehicle Operati	ina As (Classification		Unit Type			
	IN T	TRANSIT	CLASS	J			AUTOMOBILE						
		icle Type					Operating As Endorsements						
05		ORT) UTILITY VEH											
	-	Il Occs		s # Injure	d T	otal # Citation	s Issue	d	Total Traile	ers	Total Hazl	Mat Types	
	1			-	lo)			0		0		
	Insu	rance?	Direction	of Trave	el	Pre Cra	achTir	Δ	Speed Lim	it	Total Lane	es	
_	YES	3	EASTB	OUND	1		ark	•	55		2		
LINO	Mos	t Harmful Event: Collisi	on With			Special Function				Emergency Motor Vehicle Use			
\supset	MOTOR VEH IN TRANSPORT					NO SPECIAL	L FUN	CTION		NOT APP	LICABLE		
	Traff	fic Way	Т	raffic Control				Traffic Cont	rol Inoperati	ve/Missing			
	TW	O-WAY, NOT DIVID	ED		N	O CONTRO	DL			NO			
Surface Type Road Curvature										Road Grade)		
	BLA	ACKTOP (BITUMING	OUS)		S	STRAIGHT				SAG(BOTTOM)			
	Truc	k Bus or HazMat								ı			
	NO												
	,	Vehicle											

Crash Date 09/27/2018 Crash Time 04:50 PM

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		License Plate Number	r		te Type	St	Country of Issuance				
		754WHS			T - AUTOMOBILE	WI	UNITED STATES				
05	02	Vehicle Identification I JTEBU5JR8E5180		Mal TO	KE YOTA	Year 2014	Model 4RUNNER SR				
		Color			dy Style		Bus Use NOT A BUS				
		GRY - GRAY			OT - STOKE OTHER TVERIFICE						
\vdash	ΊE	Initial Contact Point 6REAR		vei	nicle Damage						
LIND	7	Extent Of Damage		6	REAR						
_	VEHICL	FUNCTIONAL DAMAGE									
		Towed Due To Damage		Vehicle Removed By							
			DUE TO DISABLING DAMAG		KES TOWING						
		What Driver Was Doir SLOW/STOPPING	•	Ver	nicle Factors						
		Driver Prior Action Oth		NO	T APPLICABLE						
		Driver Actions	IO ACTION	1							
	VEHICLE	NO CONTRIBUTIN	NG ACTION								
L	ПC										
⊃	Ē										
	>										
		Driver Distractions									
		NOT DISTRACTED	J								
05	02										
		Owner Name KRAEMER COMP	ANVIIC		Owner Address 820 WATCHER AVE						
		KKALWILK COWII	ANT LEG		PO BOX 235						
					PLAIN, WI 53577 , US						
		Sequence Of Ev	vents								
	01	Event MOTOR VEH IN TI									
	02	Event									
		Event									
	03										
	04	Event									
-	İ	Policy Holder									
LNO		Insurance Company		Organization/Company							
			AL-INSURANCE-CO		KRAEMER COMPANY LL	<u>C</u>					
		Individual Driver			Sitationa Jacuard						
		DOUGLAS GRAN	T BETTINGER		Citations Issued		Sex MALE				
	AL	(608) 588-4320			Date of Birth		Race				
-	D						WHITE				
	INDIVIDUA	Address			Driver License Number						
	N	1212 JACOB DR PRAIRIE DU SAC,	. WI 53578 . US	5	STATE: WISCONSIN COU	NTRY: U	NITED STATES				
			,				-				
			On Duty Crash	+							
		Equipment									

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 09/27/2018

Crash Time 04:50 PM

					Safety Equipment						
					1.1						
		Seat Position			SHOULDER & LAP BELT						
		1FRONT SEAT-	I FFT SIDE (DRIV	FR/MOTORCY							
		Helmet Use			Helmet Complianc	Δ					
		Tiennet ode			Tiemet compilatio						
		Eye Protection			Tint Compliance						
02	002	Injury	Injury Severity		Airbag	_					
)	0		NO APPARENT	INJURY	NON DEPLOYE	ED					
		Ejected			Ejection Path		Trapped/Extricated				
		NOT EJECTED				NOT APPLICABL	NOT TRAPPED				
		Medical Transport			EMS Agency Ident	tifier	EMS Run #				
		NOT TRANSPOR	TED								
		Hospital			Date of Death		Time of Death				
		Non Motorist	Striking Unit # Prior Action		Location			To/From School			
		Action									
	¥										
⊨	\geq										
UNIT	=										
_	INDIVIDUAL										
	Z										
		Action Other									
			Cuprested Alasha	Llee	Cupperted Drug II						
	L	Orug & Alcohol	Suspected Alcohol	Use	Suspected Drug U NO	se					
		Alcohol Test Given	•				Alachal Tost Deculto				
		TEST NOT GIVEN	ı		Alcohol Test Type		Alcohol Test Results				
			'		Drug Test Type						
		Drug Test Given TEST NOT GIVEN	١		Drug Test Type		Drug Test Results				
	~	Drug Type									
700 Drug Type											
		Individual Condition									
		APPEARED NOR	МΔΙ								
		ALL LANED NOR	IVAL								