

6TL09XQXZB
18-11759

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 18-11759	Investigating Officer/Deputy DEPUTY I. GALVAN	
Crash Date 10/22/2018		Crash Time 05:27 PM	Date Arrived 10/22/2018	Time Arrived 05:39 PM	
Date Notified 10/22/2018		Time Notified 05:31 PM	Total Units 02	Total Injured 01	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>	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.

UNIT 1 WAS PULLED OVER ONTO A DRIVE WAY AWAITING TO CONDUCT A U TURN ON STH 33 NEAR STH 23. UNIT 1 MADE A IMPROPER TURN LOOKED BUT DID NOT SEE UNIT 2 APPROACHING. UNIT 1 STRUCK UNIT 2 ON THE PASSENGER SIDE. UNIT 2 REMOVED BY STEVE'S TOWING. UNIT 1 CITED FOR IMPROPER LEFT TURN

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Location

ON STH23 WB 0.32 MI W OF COUNTY LAND FILL LN IN THE TOWN OF EXCELSIOR IN SAUK COUNTY	Latitude 43.533256459	Longitude -89.897953771
	X Coordinate 265840.25	Y Coordinate 4824115.5
	Structure Type	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 08--FRONT TO SIDE	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLEAR		
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

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 1	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 NO CONTROL	Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT	Road Grade LEVEL	
	Truck Bus or HazMat NO				

UNIT 01 VEHICLE	Vehicle			
	License Plate Number KD3221	Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 3D7HU18Z72G187919	Make DODGE	Year 2002	Model UNK
	Color GRN - GREEN	Body Style PK - PICKUP		Bus Use NOT A BUS
	Initial Contact Point 11--LEFT FRONT CORNER	Vehicle Damage		
Extent Of Damage FUNCTIONAL DAMAGE	11--LEFT FRONT CORNER, 12--FRONT			

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UNIT	Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER	
	What Driver Was Doing LEFT TURN		Vehicle Factors NOT APPLICABLE	
	Driver Prior Action Other			
	Driver Actions OTHER CONTRIBUTING ACTION			
01	01	Driver Distractions LOOKED BUT DID NOT SEE		
		Owner Name KELLY JOE KNOCK (608) 408-4905	Owner Address N1728 STATE ROAD 80 ELROY, WI 53929 , US	
Sequence Of Events				
UNIT	01	Event MOTOR VEH IN TRANSPORT		
		Event		
		Event		
		Event		
UNIT	04	Policy Holder		
		Insurance Company PROGRESSIVE-CLASSIC-INS-CO	Individual KELLY KNOCK	
UNIT	001	Individual		
		Driver KELLY JOE KNOCK (608) 408-4905	Citations Issued 1	Sex MALE
		Address N1728 STATE ROAD 80 ELROY, WI 53929 , US	Date of Birth [REDACTED]	Race WHITE
			Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
01	001	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	

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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				
01	001	Violations			
		UTC Number AE757489	Issue To? 001	Statute Number 346.31(3)	Seq Num 001

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 4	Train/Bus # Injured	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
		Insurance? YES	Direction Of Travel WESTBOUND	<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 NO CONTROL	Traffic Control Inoperative/Missing NO		
		Surface Type BLACKTOP (BITUMINOUS)	Road Curvature STRAIGHT	Road Grade LEVEL		
		Truck Bus or HazMat NO				
		Vehicle				
		02	02	License Plate Number 722XGD	Plate Type AUT - AUTOMOBILE	St WI
Vehicle Identification Number 2C4RDGCG2HR566904	Make DODGE			Year 2017	Model GRAND CARA	
Color MAR - MAROON (BURGUNDY)	Body Style VN - VAN			Bus Use NOT A BUS		

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UNIT	VEHICLE	Initial Contact Point 3--RIGHT SIDE MIDDLE	Vehicle Damage		
		Extent Of Damage DISABLING DAMAGE	1--RIGHT FRONT CORNER, 2--RIGHT SIDE FRONT, 3--RIGHT SIDE MIDDLE, 4--RIGHT SIDE REAR, 5--RIGHT REAR CORNER		
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By STEVES AUTO SERVICE		
		What Driver Was Doing GOING STRAIGHT	Vehicle Factors		
		Driver Prior Action Other	NOT APPLICABLE		
UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTION			
		Driver Distractions NOT DISTRACTED			
		Owner Name JESSICA M WILMOT (608) 478-3511	Owner Address S6873 HILLPOINT RD HILLPOINT, WI 53937 , US		
02	02	Sequence Of Events			
		01	Event MOTOR VEH IN TRANSPORT		
		02	Event		
		03	Event		
		04	Event		
UNIT	INDIVIDUAL	Policy Holder			
		Insurance Company STATE-FARM-GENERAL-INS-CO	Individual JESSICA WILMOT		
UNIT	INDIVIDUAL	Driver JONATHAN MICHAEL BERGMAN (608) 478-3511	Citations Issued 0	Sex MALE	
		Address S6873 HILLPOINT RD HILLPOINT, WI 53937 , US	Date of Birth [REDACTED]	Race WHITE	
			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				

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02	UNIT	INDIVIDUAL	002	Injury	Injury Severity NO APPARENT INJURY	Airbag DEPLOYED-CURTAIN	
			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
			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		
002	Drug Type						
Individual Condition	APPEARED NORMAL						
02	UNIT	INDIVIDUAL	Individual				
			Passenger JESSICA MARIE WILMOT (608) 495-0969	Citations Issued 0	Sex FEMALE		
				Date of Birth [REDACTED]	Race WHITE		
			Address S6873 HILLPOINT RD HILLPOINT, WI 53937 , US	Driver License Number [REDACTED]	STATE: WISCONSIN COUNTRY: UNITED STATES		
			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						
02	UNIT	INDIVIDUAL	003	Injury	Injury Severity POSSIBLE INJURY	Airbag DEPLOYED-CURTAIN	
			Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABL	Trapped/Extricated NOT TRAPPED		
			Medical Transport EMS GROUND	EMS Agency Identifier 6001024	EMS Run # 181932		

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UNIT	INDIVIDUAL	Hospital REEDSBURG AREA MED CTR		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 RYLEE J BERGMAN (608) 478-3511				Citations Issued 0		Sex		
Address S6873 HILLPOINT RD HILLPOINT, WI 53937 , US				Date of Birth [REDACTED]		Race ASIAN		
				Driver License Number				
Equipment				On Duty Crash		Safety Equipment		
Seat Position 6--SECOND SEAT-RIGHT SIDE				CHILD RESTRAINT SYSTEM - REAR FACING				
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 02	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 MORGAN S BERGMAN (608) 478-3511	Citations Issued 0	Sex FEMALE		
		Address S6873 HILLPOINT RD HILLPOINT, WI 53937 , US	Date of Birth [REDACTED]	Race WHITE		
UNIT 02	INDIVIDUAL 005	Equipment	On Duty Crash	Safety Equipment		
		Seat Position 4--SECOND SEAT-LEFT SIDE(MOTORCYCLE/BI	CHILD RESTRAINT SYSTEM - REAR FACING			
		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			
	02	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		