

6TL097RB2D
18-13238

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 18-13238	Investigating Officer/Deputy DEPUTY J. EYALIS	
Crash Date 11/28/2018		Crash Time 06:18 PM	Date Arrived 11/28/2018	Time Arrived 06:41 PM	
Date Notified 11/28/2018		Time Notified 06:41 PM	Total Units 02	Total Injured 00	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 DRIVING SOUTH BOUND ON THE HWY 12 EXIT RAMP TOWARD THE HWY 136 ROUNDABOUT. UNIT 2 WAS WEST BOUND IN THE ROUNDABOUT. DUE TO UNIT 1'S SPEED AND CONDITIONS OF THE ROAD, UNIT 1 WAS NOT ABLE TO YIELD FOR UNIT 2 AND ENTERED THE ROUNDABOUT IN FRONT OF UNIT 2. THE FRONT OF UNIT 2 STRUCK THE LEFT REAR SIDE OF UNIT 1.

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Location

ON USH12 EB 62 FT N OF LINN ST/ STH136 EB IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY	Latitude 43.474933475	Longitude -89.768906983
	X Coordinate 276052.21875	Y Coordinate 4817282
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 08--FRONT TO SIDE	Light Condition DARK/LIGHTED	
Road Surface Condition(s) WET, SNOW, SLUSH, ICE	Roadway Factor(s) ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)	
Environment Factor(s) WEATHER CONDITIONS		
Weather Condition(s) SNOW		
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 YES	Junction Location EXIT RAMP-RELATED	Intersection Type NOT AN INTERSECTION

Unit Summary

UNIT	01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
		Vehicle Type PASSENGER CAR	Operating As Endorsements			
	Total Occs 2	Train/Bus # Injured	Total # Citations Issued 1	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel SOUTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 15	Total Lanes 3	
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way ENTRANCE/EXIT RAMP		Traffic Control YIELD SIGN		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature CURVE RIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

UNIT	01	Vehicle			
		License Plate Number 951SLR	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1C3CCCAB7FN751375	Make CHRYSLER	Year 2015	Model 200 LIMITE
		Color BLK - BLACK	Body Style 4D - 4DR		Bus Use NOT A BUS
		Initial Contact Point 7--LEFT REAR CORNER	Vehicle Damage 7--LEFT REAR CORNER		
		Extent Of Damage MINOR DAMAGE			

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UNIT	VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER		
		What Driver Was Doing RIGHT TURN		Vehicle Factors		
		Driver Prior Action Other		NOT APPLICABLE		
		Driver Actions SPEED TOO FAST/COND				
01	01	Driver Distractions NOT DISTRACTED				
		Owner Name DERREK J RASCHKA (608) 963-1510		Owner Address 230 E MAIN ST MERRIMAC, WI 53561 , US		
Sequence Of Events						
UNIT	INDIVIDUAL	01	Event MOTOR VEH IN TRANSPORT			
		02	Event			
		03	Event			
		04	Event			
Policy Holder						
UNIT	INDIVIDUAL	Insurance Company STATE-FARM-GENERAL-INS-CO		Individual DERREK RASCHKA		
		Driver KAILEY RENEE RASCHKA (608) 370-3335		Citations Issued 1	Sex FEMALE	
UNIT	INDIVIDUAL	Date of Birth [REDACTED]		Race WHITE		
		Address 230 E MAIN ST MERRIMAC, WI 53561 , US		Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES		
01	001	Equipment		On Duty Crash		
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		Safety Equipment SHOULDER & LAP BELT		
		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					
UNIT	INDIVIDUAL	Individual					
		Passenger JAMES D CRANFIELD (608) 644-9166		Citations Issued 0	Sex MALE		
				Date of Birth [REDACTED]	Race WHITE		
		Address E8858 COUNTY ROAD H WISCONSIN DELLS, WI 53965 , 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			
		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				
	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			
	01	Violations				
		UTC Number A1387835	Issue To? 001	Statute Number 346.57(3)	Seq Num 001	Description DRIVING TOO FAST FOR CONDITIONS

Unit Summary

UNIT	02	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 0		Total Trailers 0	Total HazMat Types 0
		Insurance? YES		Direction Of Travel WESTBOUND		<input type="checkbox"/> Pre Crash Tire Mark		Speed Limit 15	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 ONE-WAY TRAFFIC			Traffic Control YIELD SIGN			Traffic Control Inoperative/Missing NO	
		Surface Type BLACKTOP (BITUMINOUS)			Road Curvature CURVE RIGHT			Road Grade LEVEL	
		Truck Bus or HazMat NO							

UNIT	02	Vehicle				
		License Plate Number KY9109		Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 3TMCZ5AN2HM086589		Make TOYOTA	Year 2017	Model TACOMA
		Color SIL - SILVER (ALUMINUM)		Body Style PK - PICKUP		Bus Use NOT A BUS
		Initial Contact Point 12--FRONT		Vehicle Damage		
		Extent Of Damage FUNCTIONAL DAMAGE		12--FRONT		
Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER				

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UNIT VEHICLE	What Driver Was Doing GOING STRAIGHT	Vehicle Factors		
	Driver Prior Action Other	NOT APPLICABLE		
	Driver Actions NO CONTRIBUTING ACTION			
	Driver Distractions NOT DISTRACTED			
02	02	Owner Name CARL LEWIS PIERCE (815) 762-9863	Owner Address E9884 BUCKHORN RD REEDSBURG, WI 53959 , US	
Sequence Of Events				
01	01	Event MOTOR VEH IN TRANSPORT		
02	02	Event		
03	03	Event		
04	04	Event		
UNIT	Policy Holder			
	Insurance Company CINCINNATI-INS-CO,-THE	Individual CARL PIERCE		
UNIT INDIVIDUAL	Individual			
	Driver CARL LEWIS PIERCE (815) 762-9863	Citations Issued 0	Sex MALE	
		Date of Birth [REDACTED]	Race WHITE	
	Address E9884 BUCKHORN RD REEDSBURG, WI 53959 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES		
02 003	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		
	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 #	

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UNIT INDIVIDUAL 02 003	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					