

6TL0B3P3DH  
18-13932

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>18-13932</b>	Investigating Officer/Deputy <b>DEPUTY S. PARKHURST</b>	
Crash Date <b>12/15/2018</b>		Crash Time <b>06:40 PM</b>	Date Arrived <b>12/15/2018</b>	Time Arrived <b>07:25 PM</b>	
Date Notified <b>12/15/2018</b>		Time Notified <b>06:42 PM</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

Diagram 	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.

UNITS 1 AND 2 WERE SLOWING FOR THE STOP SIGN ON STAND ROCK RD AT CTH A. UNIT 1 STRUCK THE REAR OF UNIT 2 CAUSING DAMAGE TO BOTH VEHICLES. THE OPERATOR OF UNIT 1 BLAMED THE ICE ON THE ROADWAY FOR NOT BEING ABLE TO STOP.

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## Location

ON STAND ROCK RD 91 FT S OF CTHA WB IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude <b>43.639988265</b>	Longitude <b>-89.789694848</b>
	X Coordinate <b>274986.375</b>	Y Coordinate <b>4835670.5</b>
	Structure Type	

## Crash Scene

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>	First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>02--FRONT TO REAR</b>	Light Condition <b>DARK/UNLIT</b>	
Road Surface Condition(s) <b>ICE</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>		
Weather Condition(s) <b>CLEAR</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>YES</b>	Junction Location <b>INTERSECTION</b>	Intersection Type <b>T-INTERSECTION</b>

## Unit Summary

<b>UNIT</b>	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>	
	Vehicle Type <b>PASSENGER CAR</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"/> Pre Crash Tire Mark	Speed Limit <b>45</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>STOP SIGN</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>UNIT</b>	<b>Vehicle</b>						
	<b>01</b>	License Plate Number <b>ADF5874</b>		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
		Vehicle Identification Number <b>WAU3GAF1CN064388</b>		Make <b>AUDI</b>	Year <b>2012</b>	Model <b>A7 PRESTIG</b>	
	<b>VEHICLE</b>	Color <b>WHI - WHITE</b>		Body Style <b>4D - 4DR</b>		Bus Use <b>NOT A BUS</b>	
		Initial Contact Point <b>12--FRONT</b>		Vehicle Damage			
		Extent Of Damage <b>DISABLING DAMAGE</b>		<b>12--FRONT</b>			

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UNIT	VEHICLE	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>PLATTS WRECKER</b>		
		What Driver Was Doing <b>SLOW/STOPPING</b>		Vehicle Factors		
		Driver Prior Action Other		<b>NOT APPLICABLE</b>		
		Driver Actions <b>FAILURE TO CONTROL</b>				
01	01	Driver Distractions <b>NOT DISTRACTED</b>				
		Owner Name <b>TARAS ZHYDYK (608) 432-2434</b>		Owner Address <b>108 S GENESEE ST #305 WAUKEGAN, IL 60085 , US</b>		
<b>Sequence Of Events</b>						
UNIT	VEHICLE	01	Event <b>MOTOR VEH IN TRANSPORT</b>			
		02	Event			
		03	Event			
		04	Event			
<b>Policy Holder</b>						
UNIT	VEHICLE	Insurance Company <b>PROCENTURY-INSURANCE-CO</b>		Individual <b>TARAS ZHYDYK</b>		
		<b>Individual</b>				
UNIT	INDIVIDUAL	Driver <b>TARAS ZHYDYK (608) 432-2434</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>	
		Date of Birth		Race <b>WHITE</b>		
		Address <b>108 S GENESEE ST #305 WAUKEGAN, IL 60085 , US</b>		Driver License Number <b>STATE: ILLINOIS COUNTRY: UNITED STATES</b>		
		<b>Equipment</b>		On Duty Crash		
UNIT	INDIVIDUAL	Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>		Safety Equipment <b>SHOULDER &amp; LAP BELT</b>		
		Helmet Use		Helmet Compliance		
		Eye Protection		Tint Compliance		
		<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>		Airbag <b>NON DEPLOYED</b>
01	001	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          01 001	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>					

### 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 CAR</b>				Operating As Endorsements	
	Total Occs <b>2</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 Crash Tire Mark</b>	Speed Limit <b>45</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>STOP SIGN</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>					

UNIT  VEHICLE  02 02	<b>Vehicle</b>					
	License Plate Number <b>E498009</b>		Plate Type <b>AUT - AUTOMOBILE</b>		St <b>IL</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>WDDEJ71X98A013722</b>		Make <b>MERCEDES BENZ</b>		Year <b>2009</b>	Model <b>COUPE</b>
	Color <b>BLK - BLACK</b>		Body Style <b>4D - 4DR</b>			Bus Use <b>NOT A BUS</b>
	Initial Contact Point <b>6--REAR</b>		Vehicle Damage			
	Extent Of Damage <b>DISABLING DAMAGE</b>		<b>6--REAR</b>			

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UNIT	VEHICLE	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>PLATTS WRECKER</b>	
		What Driver Was Doing <b>SLOW/STOPPING</b>		Vehicle Factors	
		Driver Prior Action Other		<b>NOT APPLICABLE</b>	
		Driver Actions <b>NO CONTRIBUTING ACTION</b>			
02	02	Driver Distractions <b>NOT DISTRACTED</b>			
		Owner Name <b>YEVHENIY HUBENKO (000) 000-0000</b>		Owner Address <b>108 S GENESEE ST #305 WAUKEGAN, IL 60085 , 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>ALLSTATE-INS-CO</b>		Individual <b>YEVHENIY HUBENLO</b>	
UNIT	INDIVIDUAL	Driver <b>YEVHENIY HUBENKO (000) 000-0000</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
		Address <b>108 S GENESEE ST #305 WAUKEGAN, IL 60085 , US</b>		Date of Birth	Race <b>WHITE</b>
		Driver License Number <b>STATE: ILLINOIS COUNTRY: UNITED STATES</b>			
		<b>Equipment</b>		On Duty Crash	
02	002	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>	Airbag <b>NON DEPLOYED</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	Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #
	Hospital		Date of Death	Time of Death
INDIVIDUAL	<b>Non Motorist</b>	Striking Unit #	Prior Action	Location
	To/From School			
Action				
Action Other				
02	002	<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>				
UNIT	INDIVIDUAL	<b>Individual</b>		
		Passenger <b>MAXYM KOPYCH (000) 000-0000</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>
		Date of Birth	Race <b>WHITE</b>	
		Address <b>1155 N STERLING AVE #211 PALATINE, IL 60067 , US</b>	Driver License Number <b>STATE: ILLINOIS COUNTRY: UNITED STATES</b>	
02	003	<b>Equipment</b>	On Duty Crash	Safety Equipment
		Seat Position <b>3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER</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>	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

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<b>UNIT</b>	<b>INDIVIDUAL</b>	Action			
		Action Other			
	<b>02</b>	<b>003</b>	<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>		