

6TLOBNZLXX

19-00062

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 19-00062	Investigating Officer/Deputy DEPUTY A. BREUNIG	
Crash Date 01/02/2019		Crash Time 07:20 AM	Date Arrived 01/02/2019	Time Arrived 07:51 AM	
Date Notified 01/02/2019		Time Notified 07:40 AM	Total Units 01	Total Injured	Total Killed
<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 YES, SCHOOL BUS DIREC		Tags	
<input type="checkbox"/> Reportable	Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

Description

Diagram <p style="text-align: center;">NOT TO SCALE</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 EASTBOUND ON GALL RD. UNIT 1 ATTEMPTED TO BACK WESTBOUND INTO A DRIVEWAY. UNIT 1 BACKED OFF THE ROAD AND STRUCK A MAILBOX AND A FIRE NUMBER SIGN AT E11759 GALL RD.

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Location

ON E11759 GALL RD 629 FT W OF GASPER DR (FIRE E11759) IN THE TOWN OF BARABOO IN SAUK COUNTY	Latitude 43.445539952	Longitude -89.73672695
	X Coordinate 278547.6875	Y Coordinate 4813931.5
	Structure Type FIRE	

Crash Scene

First Harmful Event MAILBOX	First Harmful Event Location ON ROADWAY	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAYLIGHT	
Road Surface Condition(s) SNOW	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
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 NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION

Unit Summary

UNIT 01	Unit Status IN TRANSIT		Vehicle Operating As Classification B CLASS		Unit Type BUS		
	Vehicle Type SCHOOL BUS				Operating As Endorsements S - SCHOOL BUS		
	Total Occs 10	Train/Bus # Recorded 1	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types		
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 25	Total Lanes 2		
	Most Harmful Event: Collision With MAILBOX		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 VEHICLE DESIGNED TO CARRY 9 OR MORE PPL, INCLUDING DRIVER						
	UNIT 01 VEHICLE	Vehicle					
		License Plate Number 20936B		Plate Type BUS - BUS	St WI	Country of Issuance UNITED STATES	
Vehicle Identification Number 4DRBUC8P1FB659990		Make ICBU	Year 2015	Model NO DATA FO			
Color YEL - YELLOW		Body Style BU - BUS		Bus Use SCHOOL			
Initial Contact Point 6--REAR		Vehicle Damage					
Extent Of Damage NO DAMAGE		NO DAMAGE					

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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
	What Driver Was Doing BACKING		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions UNSAFE BACKING			
01	01	Owner Name KOBUSSEN BUSES LTD (608) 448-4482		Owner Address 202 OLD HWY 33 BARABOO, WI 53913 , US
Sequence Of Events				
	01	Event MAILBOX		
	02	Event OTHER FIXED OBJECT		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company NATIONAL-INTERSTATE-INS-CO		Organization/Company KOBUSSEN BUSES LTD	
UNIT INDIVIDUAL	Individual			
	Driver CARL V WAGNER		Citations Issued 0	Sex MALE
			Date of Birth	Race WHITE
	Address 120 SANDSTONE DR WISCONSIN DELLS, WI 53965 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
UNIT 001	Safety 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 NOT APPLICABLE
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED
Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #
Hospital		Date of Death		Time of Death
Distracted By		Distracted By Source		
Distracted By Action NOT DISTRACTED				

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UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
	Action Other				To/From School		
	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 NOT OBSERVED						
	UNIT	01	Carrier				
<input checked="" type="checkbox"/> Use Vehicle Owner Same as Carrier			Source VEHICLE-SIDE				
Name KOBUSSEN BUSES LTD USDOT# 275996			Address 202 OLD HWY 33 BARABOO, WI 53913 , US				
TRUCK		BUS	GVWR 10,000 LBS OR LESS	Vehicle Configuration BUS(SEATS FOR MORE THAN 15 OCCUPANTS, INCL	Cargo Body Type BUS (SEATS FOR MORE THAN 15 OCCUPAN		
			US DOT # 275996	Carrier Type INTRASTATE CARRIER	Permitted Load		
			<input type="checkbox"/> OS/OW Load	WI Permit Number	<input type="checkbox"/> Permitted Vehicle On Permitted Route	<input type="checkbox"/> Escort Vehicle Required By Permit	<input type="checkbox"/> Escort Vehicle Present
Measured Height		Measured Length	Measured Width	Measured Weight			

Property Owner

PROP OWNER	01	Individual LUPE CERDA (608) 408-8591	Address E11759 GALL RD BARABOO, WI 53913 , US
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Fixed Objects Struck

01	Striking Unit	Struck Object	Structure Number	Damage Tag Number
	01	MAILBOX		

Property Owner

PROP OWNER	02	Government SAUK COUNTY PLANNING AND ZONING (608) 355-3285	Address 505 BROADWAY BARABOO, WI 53913 , US
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Fixed Objects Struck

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02	Striking Unit 01	Struck Object OTHER FIXED OBJECT	Structure Number	Damage Tag Number
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