

6TL09PBQB8

19-01153

# 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>19-01153</b>	Investigating Officer/Deputy <b>DEPUTY B. STODDARD</b>	
Crash Date <b>01/28/2019</b>		Crash Time <b>12:18 PM</b>	Date Arrived <b>01/28/2019</b>	Time Arrived <b>12:20 PM</b>	
Date Notified <b>01/28/2019</b>		Time Notified <b>12:18 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 <p style="text-align: center;">Not to Scale</p>	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.

UNIT 2 WAS EAST ON CTH H. UNIT 1 WAS SOUTH ON OLD HWY 12. UNIT 1 OPERATOR WAS TRAVELING TOO FAST ON THE SNOW-COVERED SLIPPERY ROAD. UNIT 1 FAILED TO STOP AT THE STOP SIGN ON OLD HWY 12 AT CTH H. UNIT 1 SLID INTO UNIT 2.

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**Location**

INTERSECTION ON CTHH EB AT OLD 12 IN THE CITY OF WISCONSIN DELLS IN SAUK COUNTY	Latitude <b>43.626551244</b>	Longitude <b>-89.807171047</b>
	X Coordinate <b>273526.21875</b>	Y Coordinate <b>4834225.5</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>08--FRONT TO SIDE</b>	Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>SNOW</b>	Roadway Factor(s)  <b>ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)</b>	
Environment Factor(s) <b>WEATHER CONDITIONS</b>		
Weather Condition(s) <b>SNOW</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>PARTIAL CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>INTERSECTION-RELATED</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 # Recorded	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>SOUTHBOUND</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>				

<b>UNIT</b>	<b>VEHICLE</b>	<b>Vehicle</b>			
		License Plate Number <b>322VLA</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>1HGEG8656SL016158</b>	Make <b>HONDA</b>	Year <b>1995</b>	Model <b>CIVIC LX</b>
		Color <b>LAV - LAVENDER</b>	Body Style <b>4D - 4DR</b>		Bus Use <b>NOT A BUS</b>
		Initial Contact Point <b>12--FRONT</b>	Vehicle Damage <b>1--RIGHT FRONT CORNER, 11--LEFT FRONT CORNER, 12--FRONT</b>		
Extent Of Damage <b>MINOR DAMAGE</b>					

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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>		
	What Driver Was Doing <b>SLOW/STOPPING</b>		Vehicle Factors		
	Driver Prior Action Other		<b>NOT APPLICABLE</b>		
	Driver Actions <b>SPEED TOO FAST/COND</b>				
01	01	Owner Name <b>DANA STUART COLE (608) 254-9992</b>		Owner Address <b>926 OLD HIGHWAY 12 WISCONSIN DELLS, WI 53965 , US</b>	
<b>Sequence Of Events</b>					
	01	Event <b>MOTOR VEH IN TRANSPORT</b>			
	02	Event			
	03	Event			
	04	Event			
UNIT	<b>Policy Holder</b>				
	Insurance Company <b>ERIE-INS-CO</b>		Individual <b>DANA COLE</b>		
UNIT INDIVIDUAL	<b>Individual</b>				
	Driver <b>DANA STUART COLE (608) 254-9992</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>	
	Address <b>926 OLD HIGHWAY 12 WISCONSIN DELLS, WI 53965 , US</b>		Date of Birth	Race <b>WHITE</b>	
	Driver License Number		<b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
UNIT INDIVIDUAL	<b>Safety Equipment</b>		On Duty Crash		
	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		
	01	001	<b>Injury</b>		Airbag
			Injury Severity <b>NO APPARENT INJURY</b>	<b>NON DEPLOYED</b>	
Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</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>Distracted By</b>		Distracted By Source			
Distracted By Action <b>UNKNOWN</b>					

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT INDIVIDUAL          01 001	<b>Non Motorist</b>		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other			To/From School	
	<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 # Recorded	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>EASTBOUND</b>	<input type="checkbox"/> <b>Pre Crash Tire Mark</b>	Speed Limit <b>55</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>NO CONTROL</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>736TUN</b>		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
	Vehicle Identification Number <b>YS3ED59Z333002748</b>		Make <b>SAAB</b>	Year <b>2003</b>	Model <b>9-5 ARC</b>	
	Color <b>BLK - BLACK</b>		Body Style <b>SW - STATIONWAGON</b>		Bus Use <b>NOT A BUS</b>	
	Initial Contact Point <b>8--LEFT SIDE REAR</b>		Vehicle Damage			
	Extent Of Damage <b>MINOR DAMAGE</b>		<b>8--LEFT SIDE REAR</b>			
	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>			

WISCONSIN MOTOR VEHICLE  
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UNIT VEHICLE	What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors	
	Driver Prior Action Other	<b>NOT APPLICABLE</b>	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>		
02 02	Owner Name <b>JULIAN TYLKA (608) 432-2589</b>	Owner Address <b>S 300 BIRCHWOOD RD WISCONSIN DELLS, WI 53965 , US</b>	
	<b>Sequence Of Events</b>		
01 02 03 04	Event <b>MOTOR VEH IN TRANSPORT</b>		
	Event		
	Event		
	Event		
UNIT	<b>Policy Holder</b>		
	Insurance Company <b>ERIE-INS-CO</b>	Individual <b>JULIAN TYLKA</b>	
UNIT INDIVIDUAL	<b>Individual</b>		
	Driver <b>JULIAN TYLKA (608) 432-2589</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>
		Date of Birth	Race <b>WHITE</b>
	Address <b>S 300 BIRCHWOOD RD WISCONSIN DELLS, WI 53965 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
02 002	<b>Safety Equipment</b>	On Duty Crash	Safety Equipment
	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 APPLICABLE</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>Distracted By</b>	Distracted By Source		
	Distracted By Action <b>NOT DISTRACTED</b>		
<b>Non Motorist</b>	Striking Unit #	Location	

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<b>UNIT</b>	Prior Action		
	Action		
	Action Other		To/From School
<b>02</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>		
	<b>Individual</b>		
<b>UNIT</b>	Passenger <b>DAMIEN B RAGAN</b> <b>(608) 432-2589</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>
	Address <b>S 300 BIRCHWOOD RD</b> <b>WISCONSIN DELLS, WI 53965 , US</b>	Date of Birth	Race <b>WHITE</b>
	Driver License Number		
	<b>Safety Equipment</b>		
<b>02</b>	On Duty Crash	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
	Seat Position <b>3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER</b>	Helmet Compliance	
	Helmet Use	Tint Compliance	
	Eye Protection		
	<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 APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
<b>003</b>	Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier	EMS Run #
	Hospital	Date of Death	Time of Death
	<b>Distracted By</b>		
	Distracted By Source		
Distracted By Action			
<b>Non Motorist</b>			
Striking Unit #	Location		

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<b>UNIT</b>	Prior Action			
	Action			
	Action Other		To/From School	
	<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>			
	<b>02</b>	<b>003</b>		