WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT BARABOO, WI 53913 (608) 356-4895

	Document Number Override	Primary Crash I	Document #	Agency Crash Number Investigating 19-01698 DEPUTY I.				g Officer/Deputy . HANSON			
40	Crash Date 02/11/2019	Crash Time 06:44 AM		Date Ar 02/11/2		Time Arrived	i i				
	Date Notified 02/11/2019	Time Notified 06:46 AM			Total Units Total Ir 00			ured Total Killed 00			
0 1 500	On Emergency	Hit and Run	Lane Close	ure	Work Zone	✓ Trailer	or To	owed	Reporting Threshold		
- -	Government Property	Active So	hool Zone	School NO	Bus Related	Tags					
	✓ Reportable	Crash Type DT4000 (STA	NDARD CRASH	1)		Ameno	ded		Secondary Crash		
	Description Diagram						D	onstruction	- D.	_	
	Singrain (tos By ANSON	. Loy		
								itional Infor OTOS	rmation		
		us 14 (not scale)									
	snow plow	A THE CONTRACTOR OF THE PARTY O	Part I			10					
	J, a sworn law enforcer	ment officer, agre	ee that I have no	ot added	any CJIS data in thi	s report.					
	UNIT 1 WAS EAST ON US 14. WESTBOUND TRAFFIC LOSIN THE HEAVY GOOSENECK TRA THE SNOW PLOW WAS STOP	IG CONTROL. UNIT AILER HE JACKED	1 SAID THAT AS KNIFED THE TRU	A FEW V	EHICLES IN FRONT OF FRAILER. UNIT 1 STRU	HIM FISHTAILE	D HE	TRIED TO	O SLOW DOWN. DUE TO		

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Location										
ON USH14 WB					Latitude			Longitud	de	
728 FT W			43.191060903 -90.175734438							
OF PORTER RD					X Coordinate Y Coordinate				linate	
IN THE TOWN OF SPRIN	G GREEN				241946.0625 4786929.5					
IN SAUK COUNTY										
					Structure Type					
Crash Scene										
First Harmful Event					First Harm	ful Event	Location			
MOTOR VEH IN TRANSP	OPT		First Harmful Event Location ON ROADWAY							
Manner of Collision	OKI									
03FRONT TO FRONT		Light Condition DAYLIGHT								
Road Surface Condition(s)					Roadway Factor(s)					
` `					Roadway	i actor(s)				
ICE										
Environment Factor(s)										
NONE					NONE					
Weather Condition(s)										
CLEAR										
Animal Type					Relation T	o Trafficy	vay			
					TRAFFIC	CWAY -	ON ROAD			
Crash Classification - Location							n - Jurisdiction			
PUBLIC PROPERTY					NO SPECIAL JURISDICTION					
Tribal Land					Access Co	ontrol			Special Study	
					NO CON	TROL				
Within Interchange Area	Junction Location			Intersectio	n Type					
NO	NON-JUNCTION			NOT AN	INTERSE	CTION				
Closure Type			Reaso	ons for Closu	ure					
LANE CLOSURE										
Date Initial Lane/Rd Closed	Time Initial Lane/Rd Close	d	TOW	TRUCK						
02/11/2019	06:45 AM									
Date All Lanes Open	Time All Lanes Open		Date S	Scene Clear	ed	17	Time Scene Clea	red		
02/11/2019	08:30 AM					08:35 AM	8:35 AM			
Unit Summary =										
Unit Status		Vehi	cle One	erating As C	lassification	ı	Unit Type			
			LASS	rating As C	iassilication		TRUCK			
IN TRANSIT Vehicle Type		DC	LASS					Operating As Endorsements		
UTILITY TRUCK/PICKUP	TRUCK						Operating A	S Elidoisei	Henis	
		1	0	e 1 1	d Total Trailers			Total HazMat Types		
Total Occs	Train/Bus # Recorded	0	# Cita	tions Issued	1		allers	• • • • • • • • • • • • • • • • • • • •		
1	Direction Of Travel	U			0 11:		imit	Total Lanes		
Insurance? YES	EASTBOUND		Pre	CrashTire	55					
Most Harmful Event: Collision		Spor	ial Fun	Mark					iclo I Iso	
MOTOR VEH IN TRANSP				IAL FUNC	TION			Emergency Motor Vehicle Use NOT APPLICABLE		
Traffic Way		Traff	ic Cont	rol	Traffic Control Inoperative/Missing					
TWO-WAY, NOT DIVIDED)		CONTROL			NO				
Surface Type				urvature Road Grade						
BLACKTOP (BITUMINOU	IS)		AIGH				LEVEL			
Truck Bus or HazMat	,									
NO										
Vehicle										
License Plate Number		Plat	е Туре			St	Country of Is	suance		
Validation of the	mh a r	Mak	′0			Voor	Medal			
Vehicle Identification Null 1FTWW33P25EC447		FO				Year 2005	Model E350			
○ 1FTWW33P25EC447	23	FU	אט			∠005	F350			

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		Color		Body Style	!		Bus Use					
		RED - RED				ΓK - TRU	ICK		NOT A BUS			
	Щ	Initial Contact Point			,	/ehicle Da	ımage					
UNIT	VEHICLE	7LEFT REAR CORNER					5RIGHT REAR CORNER, 6REAR, 7LEFT REAR CORNER, 8LEFT SIDE					
5	프	Extent Of Damage				REAR						
	>	FUNCTIONAL DAMAGE										
		I					emoved By					
							RS TOWING					
		What Driver Was Doing SLOW/STOPPING				/ehicle Fa	ctors					
		Driver Prior Action Other				NOT APPLICABLE						
		Driver Prior Action Other	'	101 711	LIOADLL							
		Driver Actions										
		FAILURE TO CONTE	ROL									
_	VEHICLE		I ALUNE TO CONTROL									
UNIT	읒											
)	亩											
	>											
		Owner Name				Owner	r Address					
		RYAN DAVID HILL					N CHURCH ST					
0	2	(608) 475-4943		RICH	ILAND CENTE	R, WI 53581 , U	IS					
	9	Sequence Of Eve	nte									
		Event	1113									
	2	MOTOR VEH IN TRA	NSPORT									
		Event										
	02											
		Event										
	03											
	₩.	Event										
	04											
_		Policy Holder										
UNIT		Insurance Company				Individual						
\supset		PEKIN-INS-CO				RYAN	HILL					
		Trailer/Towed										
_		Trailer Plate #	Plate Type		Make	State Country of Issuance						
01		Trailer Flate II	,,,,		LODT		S tate		ED STATES			
	<u> </u>	Unit Type		Indiv	ı /idual	Address						
╘		SEMI TRAILER			AN DAVID HILL	427 N			N CHURCH ST			
UNIT	TOW	Vehicle Identification Number (608) 475-4943				RICHLAND CENTER, WI 53581 , US						
_	ĔĔ	4ZEGE2427G111628										
		Individual										
	•	Driver				Citations	s Issued		Sex			
	_	RYAN DAVID HILL				0			MALE			
	₹	(608) 475-4943				Date of I	Birth		Race			
—	INDIVIDUAL					WHITE						
UNIT	≥	Address				Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES						
	身	427 N CHURCH ST	WI 50504		0							
	=	RICHLAND CENTER	, WI 53581	, U	3	SIAIE	WISCONSIN	COUNTRY. UN	IIIED STATES			
	Sad	fety Equipment	n Duty Crash	1		Safety Equipment						
	Sal					1						
		Seat Position				SHOUL	LDER & LAP B	BELT				
		1FRONT SEAT-LEF	- I' SIDE (D	RIVI	ER/MOTORCY							
		Helmet Use				Helmet Compliance						

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		Eye Protection			Tint Compliance								
7	001	Injury	Injury Severity		Airbag								
0	Ō		NO APPARE		NON DEPLOYED Trapped/Extricated								
		Ejected NOT EJECTED	*	on Path EJECTED/NOT APP	LICABLE		NOT TRAPPED						
		Medical Transport	1101	LULUTEDINOT ATT	EMS Agency Identifier		EMS Run #						
		NOT TRANSPORT	ED										
		Hospital			Date of Death	ath							
	Distracted By Not APPLICABLE (NOT DISTRACTED)												
	Distracted By Action NOT DISTRACTED												
Non Motorist Striking Unit # Location													
		Prior Action		-									
		Action											
	AL												
╘	INDIVIDUAL												
E N	Ξ												
	9												
	=												
		Action Other						To/From School					
	I	Orug & Alcohol	Suspected Alco	hol Use	Suspected Drug Use NO								
		Alcohol Test Given		Alcohol Test Type			Alcohol Tes	t Poculto					
		TEST NOT GIVEN		Alcohol Test Typi	G		Alcohol Tes	i Nesuits					
		Drug Test Given	Drug Test Given			Drug Test Results	<u> </u>						
		TEŠT NOT GIVEN											
2	001	Drug Type											
		Individual Condition											
		APPEARED NORM	IAL										
	ا	· Cummary											
		t Summary Status			/ehicle Operating As Classi	ification	Unit Type						
		RANSIT			B CLASS		TRUCK						
~ 1		cle Type					Operating As Endorsements						
05	SNC	OW PLOW											
	Total	al Occs Train/Bus #		# Recorded 1	Total # Citations Issued	Total Trail	ers	Total HazMat Types					
	1			C)	0		0					
		rance? Direction Of To			Pre CrashTire	Speed Lim	nit	Total Lanes					
UNIT	YES	i Harmful Event: Collision	WESTBO	_	Mark Special Function	55	2 Emergency Motor Vehicle Use						
5		TOR VEH IN TRANS			NO SPECIAL FUNCTION	N	NOT APP						
		ic Way	JIN 1		Traffic Control		Traffic Control Inoperative/Missing						
		D-WAY, NOT DIVIDE	D		NO CONTROL		NO	. •					
		ace Type			Road Curvature		Road Grade)					
		CKTOP (BITUMING	US)	5	STRAIGHT		LEVEL						
		k Bus or HazMat		•									
	NO	0											

Crash Date **02/11/2019**Crash Time **06:44 AM**

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Vehicle												
		License Plate Number	Plate Type	St	Country of Issuance							
		99552	MUN - MUNICIPAL	WI	UNITED STATES							
7	٥.	Vehicle Identification Number	Make	Year	Model							
02	02	1HTWDAAR92J051286	INTERNATIONAL	2002	NO DATA FO							
		Color	Body Style		Bus Use							
		ONG - ORANGE	CB - CAB CHASSIS		NOT A BUS							
	Щ	Initial Contact Point	Vehicle Damage									
╘	占	12FRONT										
UNIT	Ĭ	Extent Of Damage	12FRONT									
_	VEHICLE	MINOR DAMAGE										
		Towed Due To Damage	Vehicle Removed By									
		NOT TOWED										
		What Driver Was Doing	Vehicle Factors	/ehicle Factors								
		STOP IN TRAFFIC										
		Driver Prior Action Other	NOT APPLICABLE									
		Driver Actions										
	щ	NO CONTRIBUTING ACTION										
╘	VEHICL											
UNIT	王											
	7											
		Owner Name	Owner Address									
2	8	SAUK COUNTY HIGHWAY DEPT	620 STH 136	40 110								
02	05	(608) 355-4855	BARABOO, WI 539	13,05								
	;	Sequence Of Events										
		Event										
	2	MOTOR VEH IN TRANSPORT Event										
	02											
	03	Event										
	94	Event										
		 Policy Holder										
UNIT		Insurance Company	Government									
5		WISCONSIN-COUNTY-MUTUAL-INS-CORP	SAUK COUNTY HIGH	HWAY DEPT								
		Individual Driver	Citations Issued	Sex								
		DALE BAUER	0		MALE							
	¥	(608) 370-3039	Date of Birth		Race							
_	Ξ		Date of Biltin		WHITE							
UNIT	INDIVIDUAL	Address	Driver License Number									
n	ቯ	WI										
	=		STATE: WISCONSIN	COUNTRY: U	INITED STATES							
		On Duty Crash	Safety Equipment									
	Sai	fety Equipment										
		Seat Position	SHOULDER & LAP B	ELT								
		1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY										
		Helmet Use	Helmet Compliance									
		Eye Protection	Tint Compliance									

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Crash Time 06:44 AM

02	005	Iniurv	1			Airbag					
_	J	yy	NO AP	PARENT IN	NJURT	NON DEPLOYED		Tanana al/Costalanta al			
		Ejected		Ejection Pat		10451 5		Trapped/Extricated			
		NOT EJECTED		NOT EJEC	CTED/NOT APPL			NOT TRAPPED			
		Medical Transport NOT TRANSPORT	ΓED			EMS Agency Identifier		EMS Run #			
		Hospital				Date of Death		Time of Death			
		riospitai				Date of Death		Time of Beaut			
	,	Distracted By	Distract	ed By Source PPLICABL	E (NOT DISTRAC	CTED)					
		Distracted By Action NOT DISTRACTED	D								
	,	Non Motorist	Striking	Unit #	Location						
		Prior Action									
		Action									
	INDIVIDUAL										
⊨	J										
UNIT											
_											
	Z										
		Action Other							To/From School		
		Action Other							TO/FIGHT SCHOOL		
	ļ		Suspect	ted Alcohol U	se	Suspected Drug Use					
	L	Drug & Alcohol	NO			NO					
		Alcohol Test Given			Alcohol Test Type			Alcohol Test Results			
		TEST NOT GIVEN									
		Drug Test Given TEST NOT GIVEN			Drug Test Type	Drug Test Result					
02	002	Drug Type									
		Individual Condition									
		APPEARED NOR	MAL								
l											