

6TLOBNZLZG

19-03942

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 19-03942	Investigating Officer/Deputy DEPUTY A. BREUNIG	
Crash Date 04/07/2019		Crash Time 03:35 PM	Date Arrived 04/07/2019	Time Arrived 03:51 PM	
Date Notified 04/07/2019		Time Notified 03:41 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> <p>PIT RD</p> <p>DRIVEWAY</p> <p>NOT TO SCALE</p> <p>CTH BD</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 TRAVELING SOUTHBOUND ON CTH BD. UNIT 2 WAS NORTHBOUND ON CTH BD. THE INTERSECTION IS CONTROLLED BY TRAFFIC SIGNAL. THE SIGNAL WAS GREEN FOR NORTH AND SOUTHBOUND. UNIT 2 ATTEMPTED TO TURN LEFT. UNIT 2 STRUCK THE SIDE OF UNIT 1 IN THE AREA OF THE DRIVER'S DOOR. UNIT 2 OPERATOR STATED IT WAS HIS FAULT AND HE WAS TIRED FROM A LONG DRIVE.

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Location

INTERSECTION ON CTHBD SB AT PIT RD IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude 43.513641611	Longitude -89.778051653
	X Coordinate 275456.15625	Y Coordinate 4821606
	Structure Type	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 08--FRONT TO SIDE	Light Condition DAYLIGHT	
Road Surface Condition(s) WET	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) RAIN		
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 INTERSECTION-RELATED	Intersection Type FOUR-WAY INTERSECTION

Unit Summary

UNIT 01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE		
	Vehicle Type (SPORT) UTILITY VEHICLE			Operating As Endorsements		
	Total Occs 2	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel SOUTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	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 DIVIDED HWY W/O TRAFFIC BARRIER		Traffic Control TRAFFIC SIGNAL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

UNIT 01 VEHICLE	Vehicle				
	License Plate Number 862CJJ		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 5N1AR2MM0GC615512		Make NISSAN	Year 2016	Model PATHFINDER
	Color BLU - BLUE		Body Style UT - SPORT UTILITY VEHICLE		Bus Use NOT A BUS
	Initial Contact Point 9--LEFT SIDE MIDDLE		Vehicle Damage		
	Extent Of Damage MINOR DAMAGE		9--LEFT SIDE MIDDLE		

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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
01	Owner Name GARY MATUSZEWSKI (715) 697-1014		Owner Address 4450 EVERGREEN AVE WISCONSIN RAPIDS, WI 54494 , US	
	Sequence Of Events			
01	01	Event MOTOR VEH IN TRANSPORT		
	02	Event		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company ERIE-INS-CO		Individual GARY MATUSZEWSKI	
UNIT INDIVIDUAL	Individual			
	Driver GARY MATUSZEWSKI (715) 697-1014		Citations Issued 0	Sex MALE
	Address 4450 EVERGREEN AVE WISCONSIN RAPIDS, WI 54494 , US		Date of Birth	Race WHITE
	Driver License Number		STATE: WISCONSIN COUNTRY: UNITED STATES	
01	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 NON DEPLOYED
	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 NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				

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UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location			
		Prior Action						
		Action						
		Action Other				To/From School		
01	001	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						
		Individual						
		Passenger DEBBIE MATUSZEWSKI (715) 697-1014			Citations Issued 0		Sex FEMALE	
		Address 4450 EVERGREEN AVE WISCONSIN RAPIDS, WI 54494 , US			Date of Birth Race WHITE			
		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES						
		UNIT	INDIVIDUAL	Safety 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				
01	002			Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED	
				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								
Non Motorist		Striking Unit #	Location					

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UNIT	INDIVIDUAL	Prior Action			
		Action			
		Action Other	To/From School		
	01	002	Drug & Alcohol		
			Suspected Alcohol Use	Suspected Drug Use	
			NO	NO	
			Alcohol Test Given	Alcohol Test Type	Alcohol Test Results
			TEST NOT GIVEN		
			Drug Test Given	Drug Test Type	Drug Test Results
			TEST NOT GIVEN		
Drug Type					
Individual Condition		APPEARED NORMAL			

Unit Summary

UNIT	02	Unit Status		Vehicle Operating As Classification		Unit Type							
		IN TRANSIT		D CLASS		AUTOMOBILE							
		Vehicle Type				Operating As Endorsements							
		(SPORT) UTILITY VEHICLE											
		Total Occs		Train/Bus # Recorded		Total # Citations Issued		Total Trailers		Total HazMat Types			
		1				0		0		0			
		Insurance?		Direction Of Travel		<input type="checkbox"/> Pre Crash Tire Mark		Speed Limit		Total Lanes			
		YES		NORTHBOUND				55		2			
		Most Harmful Event: Collision With				Special Function				Emergency Motor Vehicle Use			
		MOTOR VEH IN TRANSPORT				NO SPECIAL FUNCTION				NOT APPLICABLE			
Traffic Way				Traffic Control				Traffic Control Inoperative/Missing					
DIVIDED HWY W/O TRAFFIC BARRIER				TRAFFIC SIGNAL				NO					
Surface Type				Road Curvature				Road Grade					
BLACKTOP (BITUMINOUS)				STRAIGHT				LEVEL					
Truck Bus or HazMat													
NO													

UNIT	02	Vehicle							
		License Plate Number		Plate Type		St		Country of Issuance	
		851ZAZ		AUT - AUTOMOBILE		WI		UNITED STATES	
		Vehicle Identification Number		Make		Year		Model	
		1J4GL58K16W133312		JEEP		2006		LIBERTY LI	
		Color		Body Style				Bus Use	
		BLK - BLACK		UT - SPORT UTILITY VEHICLE				NOT A BUS	
		Initial Contact Point		Vehicle Damage					
11--LEFT FRONT CORNER		11--LEFT FRONT CORNER, 12--FRONT							
Extent Of Damage									
MINOR DAMAGE									
Towed Due To Damage		Vehicle Removed By							
NOT TOWED		OPERATOR							

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UNIT VEHICLE	What Driver Was Doing LEFT TURN		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions FAILED TO YIELD RIGHT-OF-WAY, FAILURE TO CONTROL				
	Owner Name ZACHARY BISCHOFF (734) 625-8285		Owner Address S936 STATE ROAD 33 LA VALLE, WI 53941 , US		
UNIT 02	Sequence Of Events				
	01	Event MOTOR VEH IN TRANSPORT			
	02	Event			
	03	Event			
	04	Event			
UNIT	Policy Holder				
	Insurance Company PROGRESSIVE-UNIVERSAL-INSURANCE-COMP		Individual ZACHARY BISCHOFF		
	Individual				
UNIT INDIVIDUAL	Driver ZACHARY BISCHOFF (734) 625-8285		Citations Issued 0	Sex MALE	
	Address S936 STATE ROAD 33 LA VALLE, WI 53941 , US		Date of Birth	Race WHITE	
	Driver License Number		STATE: WISCONSIN COUNTRY: UNITED STATES		
	Safety Equipment				
UNIT 02	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		
	003	Injury		Airbag	
		Injury Severity NO APPARENT INJURY		NON DEPLOYED	
	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 NOT APPLICABLE (NOT DISTRACTED)			
Distracted By Action NOT DISTRACTED					
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UNIT	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 ASLEEP OR FATIGUED			
	02	003		