

6TL0B4X4KX

19-04439

# 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>19-04439</b>	Investigating Officer/Deputy <b>DEPUTY E. KNULL</b>	
Crash Date <b>04/18/2019</b>		Crash Time <b>01:09 PM</b>	Date Arrived <b>04/18/2019</b>	Time Arrived <b>01:14 PM</b>	
Date Notified <b>04/18/2019</b>		Time Notified <b>01:09 PM</b>	Total Units <b>02</b>	Total Injured <b>01</b>	Total Killed <b>00</b>
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input checked="" 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.

UNIT 1 STATES SHE WAS AT THE STOP SIGN ON TINKHAM TRAIL AND WAS PROCEEDING THROUGH THE INTERSECTION EB AND DID NOT SEE UNIT 2. UNIT 2 WAS NB ON STH 136 AND UNIT 1 PULLED IN FRONT OF UNIT 2 AND UNIT 2 WAS UNABLE TO AVOID COLLISION. UNIT 1 OPERATOR DID NOT HAVE ANY INJURIES AND VEHICLE SUSTAINED DISABLING DAMAGE AND WAS TOWED BY MIKES TOWING. UNIT 2 OPERATOR REPORTED MINOR INJURY TO HAND FROM AIRBAG AND UNIT 2 SUSTAINED DISABLING DAMAGE AND WAS TOWED BY MIKES TOWING.

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**Location**

<b>INTERSECTION ON STH136 EB AT CHESTNUT ST IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY</b>	Latitude <b>43.472918065</b>	Longitude <b>-89.768762754</b>
	X Coordinate <b>276056.4375</b>	Y Coordinate <b>4817058</b>
	Structure Type <b>NO STRUCTURE</b>	

**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>DRY</b>		Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>			
Weather Condition(s) <b>CLOUDY</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>NO</b>	Junction Location <b>INTERSECTION</b>	Intersection Type <b>FOUR-WAY INTERSECTION</b>	
Closure Type <b>LANE CLOSURE</b>		Reasons for Closure	
Date Initial Lane/Rd Closed <b>04/18/2019</b>	Time Initial Lane/Rd Closed <b>01:14 PM</b>	<b>LAW ENFORCEMENT</b>	
Date All Lanes Open <b>04/18/2019</b>	Time All Lanes Open <b>01:40 PM</b>	Date Scene Cleared <b>04/18/2019</b>	Time Scene Cleared <b>01:40 PM</b>

**Unit Summary**

<b>UNIT</b>	<b>01</b>	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>			
		Vehicle Type <b>(SPORT) UTILITY VEHICLE</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>EASTBOUND</b>	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit <b>25</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>CONCRETE</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>			
		Truck Bus or HazMat <b>NO</b>							
		<b>01</b>	<b>Vehicle</b>						
			License Plate Number <b>579519</b>		Plate Type <b>LTK - LIGHT TRUCK</b>		St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
Vehicle Identification Number <b>3C4PDCBG0HT518204</b>		Make <b>DODGE</b>		Year <b>2017</b>	Model <b>JOURNEY</b>				

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UNIT VEHICLE	Color	RED - RED	Body Style	UT - SPORT UTILITY VEHICLE	Bus Use	NOT A BUS
	Initial Contact Point	3--RIGHT SIDE MIDDLE	Vehicle Damage			
	Extent Of Damage	DISABLING DAMAGE	1--RIGHT FRONT CORNER, 2--RIGHT SIDE FRONT, 3--RIGHT SIDE MIDDLE, 4--RIGHT SIDE REAR			
	Towed Due To Damage	TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By MIKES TOWING			
	What Driver Was Doing	GOING STRAIGHT	Vehicle Factors			
	Driver Prior Action Other		NOT APPLICABLE			
UNIT VEHICLE	Driver Actions FAILED TO YIELD RIGHT-OF-WAY					
	Owner Name	ROBERT A GREENWOOD (608) 356-5640	Owner Address S5026 GREENFIELD LN BARABOO, WI 53913 , US			
01 01	<b>Sequence Of Events</b>					
	Event	MOTOR VEH IN TRANSPORT				
	Event					
	Event					
	Event					
UNIT	<b>Policy Holder</b>					
	Insurance Company	ACUITY,-A-MUTUAL-INSURANCE-CO	Individual SANDRA GREENWOOD			
UNIT INDIVIDUAL	<b>Individual</b>					
	Driver	SANDRA L GREENWOOD (608) 356-5640	Citations Issued	0	Sex	FEMALE
			Date of Birth		Race	WHITE
	Address	S5026 GREENFIELD LN BARABOO, WI 53913 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
01 001	<b>Safety Equipment</b>		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		
	<b>Injury</b>	Injury Severity	NO APPARENT INJURY		Airbag	NON DEPLOYED
	Ejected	NOT EJECTED	Ejection Path	NOT EJECTED/NOT APPLICABLE		Trapped/Extricated
Medical Transport	NOT TRANSPORTED		EMS Agency Identifier	EMS Run #		

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<b>UNIT</b>	Hospital		Date of Death		Time of Death	
	<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>			
	Distracted By Action <b>NOT DISTRACTED</b>					
	<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

<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>(SPORT) UTILITY VEHICLE</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>NORTHBOUND</b>	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit <b>35</b>	Total Lanes <b>4</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>DIVIDED HWY W/O TRAFFIC BARRIER</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>CONCRETE</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>					

<b>02</b>	<b>Vehicle</b>					
	License Plate Number <b>ABW3810</b>		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
	Vehicle Identification Number <b>2FMDK4KC5DBA48751</b>		Make <b>FORD</b>	Year <b>2013</b>	Model <b>EDGE LIMIT</b>	
	Color <b>SIL - SILVER (ALUMINUM)</b>		Body Style <b>UT - SPORT UTILITY VEHICLE</b>		Bus Use <b>NOT A BUS</b>	

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UNIT VEHICLE	Initial Contact Point <b>12--FRONT</b>		Vehicle Damage	
	Extent Of Damage <b>DISABLING DAMAGE</b>		<b>12--FRONT</b>	
	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>MIKES TOWING</b>	
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
UNIT VEHICLE	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
	Owner Name <b>JANETTE A BONHAM (608) 393-1666</b>		Owner Address <b>E11250 STATE ROAD 136 BARABOO, WI 53913 , US</b>	
UNIT 02	<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>STATE-FARM-GENERAL-INS-CO</b>		Individual <b>JANETTE BONHAM</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>MADELINE ANN BONHAM (608) 393-1666</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>
	Address <b>E11250 STATE ROAD 159 BARABOO, WI 53913 , US</b>		Date of Birth	Race <b>WHITE</b>
			Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
UNIT 02	<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	
	<b>Injury</b>		Injury Severity <b>SUSPECTED MINOR INJURY</b>	Airbag <b>DEPLOYED-FRONT</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	

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<b>UNIT</b>	<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>		
	Distracted By Action <b>NOT DISTRACTED</b>				
	<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				
<b>02</b>	<b>002</b>	Individual Condition			
		<b>APPEARED NORMAL</b>			