

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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Document Number Override		Primary Crash Document #		Agency Crash Number 19-04145		Investigating Officer/Deputy DEPUTY H. LARKIN		
Crash Date 04/11/2019		Crash Time 02:15 PM		Date Arrived 04/24/2019		Time Arrived 03:25 PM		
Date Notified 04/11/2019		Time Notified 03:20 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

Diagram 	Reconstruction By
	Photos By DEPUTY LARKIN
	Additional Information PHOTOS

I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

UNIT 1 WAS TRAVELING EB ON STH 136. UNIT 2, A SNOW PLOW WITH FRONT BLADE, WAS TRAVELING WB ON STH 136. UNIT 1 CAME AROUND THE CORNER SHARP AND CROSSED THE CENTER LINE STRIKING THE BLADE ON UNIT 2.

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

Location

ON LINN ST/ STH136 EB 1219 FT W OF STH33 EB IN THE TOWN OF BARABOO IN SAUK COUNTY	Latitude 43.474928851	Longitude -89.780751296
	X Coordinate 275094.1875	Y Coordinate 4817313.5
	Structure Type	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 06--SIDESWIPE/OPPOSITE DIRECTION	Light Condition DAYLIGHT	
Road Surface Condition(s) WET, SNOW	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLOUDY, RAIN, 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 D CLASS	Unit Type TRUCK		
	Vehicle Type UTILITY TRUCK/PICKUP TRUCK	Operating As Endorsements			
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 45	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 TWO-WAY, NOT DIVIDED	Traffic Control NO CONTROL	Traffic Control Inoperative/Missing NO		
	Surface Type BLACKTOP (BITUMINOUS)	Road Curvature CURVE LEFT	Road Grade LEVEL		
	Truck Bus or HazMat NO				

UNIT 01 VEHICLE	Vehicle			
	License Plate Number MR5391	Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1D7HU16NX6J175056	Make DODGE	Year 2006	Model RAM 1500 S
	Color RED - RED	Body Style PK - PICKUP	Bus Use NOT A BUS	
	Initial Contact Point 11--LEFT FRONT CORNER	Vehicle Damage 10--LEFT SIDE FRONT, 11--LEFT FRONT CORNER		
Extent Of Damage MINOR DAMAGE				

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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions FAILURE TO CONTROL, FAILED TO KEEP IN DESIGNATED LANE			
01	Owner Name MARVIN LEROY LAUKANT (608) 524-4100		Owner Address S5737 ROCK ELM RD ROCK SPRINGS, WI 53961 , US	
	Sequence Of Events			
01	01	Event CROSS CENTERLINE		
	02	Event MOTOR VEH IN TRANSPORT		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company PROGRESSIVE-CLASSIC-INS-CO		Individual MARVIN LAUKANT	
UNIT INDIVIDUAL	Individual			
	Driver MARVIN LEROY LAUKANT (608) 524-4100		Citations Issued 0	Sex MALE
	Address S5737 ROCK ELM RD ROCK SPRINGS, WI 53961 , US		Date of Birth	Race
	Driver License Number		STATE: WISCONSIN COUNTRY: UNITED STATES	
01	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 01 001	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 APPEARED NORMAL				

Unit Summary

UNIT 02	Unit Status IN TRANSIT		Vehicle Operating As Classification B CLASS		Unit Type TRUCK	
	Vehicle Type SNOW PLOW				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 45	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 TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature CURVE RIGHT		Road Grade LEVEL	
	Truck Bus or HazMat TRUCK OR TRUCK COMBINATION > 10,000LBS GVWR/GCWR					

UNIT VEHICLE 02 02	Vehicle				
	License Plate Number C10396		Plate Type MUN - MUNICIPAL	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1HTWDAZR7AJ287079		Make INTERNATIONAL	Year 2010	Model SFA
	Color ONG - ORANGE		Body Style CB - CAB CHASSIS		Bus Use NOT A BUS
	Initial Contact Point 11--LEFT FRONT CORNER		Vehicle Damage 11--LEFT FRONT CORNER, 12--FRONT		
	Extent Of Damage MINOR DAMAGE		Towed Due To Damage NOT TOWED		
		Vehicle Removed By OPERATOR			

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UNIT VEHICLE	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
	Owner Name SAUK COUNTY HIGHWAY DEPARTMENT (608) 355-4855		Owner Address 620 STH 136 PO BOX 26 BARABOO, WI 53913 , US	
UNIT 02	Sequence Of Events			
	01	Event MOTOR VEH IN TRANSPORT		
	02	Event		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company COUNTRY-MUTUAL-INSURANCE-CO		Organization/Company SAUK COUNTY	
UNIT INDIVIDUAL	Individual			
	Driver JOHN THOMAS PICKAR (608) 355-4855		Citations Issued 0	Sex MALE
	Address BARABOO, WI 53913 , US		Date of Birth	Race WHITE
	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
UNIT 02	Safety Equipment		On Duty Crash WINTER-HWY-MAINTENANC	
	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			
Non Motorist		Striking Unit #	Location	

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UNIT	INDIVIDUAL						
	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 APPEARED NORMAL						
	Carrier						
UNIT	02	002	<input type="checkbox"/> Use Vehicle Owner Same as Carrier <table border="1" style="float: right; margin-left: 20px;"> <tr><td>Source</td></tr> <tr><td> </td></tr> </table>		Source		
			Source				
	Name		Address				
	UNIT	01	TRUCK BUS	GVWR MORE THAN 26,000 LB			
				Vehicle Configuration SINGLE UNIT TRUCK (3 OR MORE AXLES)			
Cargo Body Type DUMP							
US DOT #							
Carrier Type INTRASTATE CARRIER		Permitted Load NOT APPLICABLE					
<input type="checkbox"/> OS/OW Load <table border="1" style="float: right; margin-left: 20px;"> <tr><td>WI Permit Number</td></tr> <tr><td> </td></tr> </table>		WI Permit Number		<input type="checkbox"/> Permitted Vehicle On Permitted Route <table border="1" style="float: right; margin-left: 20px;"> <tr><td>Escort Vehicle Required By Permit</td></tr> <tr><td> </td></tr> </table>		Escort Vehicle Required By Permit	
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Measured Height		Measured Length					
Measured Width		Measured Weight					