

6TL097RB3C
19-04780

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 19-04780	Investigating Officer/Deputy DEPUTY L. GJORGJIEV	
Crash Date 04/26/2019		Crash Time 04:55 PM	Date Arrived 04/26/2019	Time Arrived 05:22 PM	
Date Notified 04/26/2019		Time Notified 04:57 PM	Total Units 02	Total Injured 01	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>not to scale</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.

BOTH UNIT 1 AND UNIT 2 WERE TRAVELING NORTHBOUND ON 113. UNIT 2 STOP AT THE INTERSECTION OF 113 AND W SO THEY CAN TURN ONTO CTH W. UNIT 1 WAS TRAVELING BEHIND UNIT 2 AND STRUCK UNIT 2 IN THE BACK. UNIT 1 DRIVER STATED SHE DIDNT SEE UNIT 2 IN TIME AS HE STOPPED " ABRUPTLY " SO SHE WAS UNABLE TO STOP IN TIME.

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Location

ON STH113 NB 332 FT S OF CTHW SB IN THE TOWN OF GREENFIELD IN SAUK COUNTY	Latitude 43.45187311	Longitude -89.714515012
	X Coordinate 280368.0625	Y Coordinate 4814576
	Structure Type	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 02--FRONT TO REAR	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLEAR		
Animal Type	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control FULL CONTROL	Special Study
Within Interchange Area NO	Junction Location INTERSECTION	Intersection Type FOUR-WAY INTERSECTION

Unit Summary

UNIT 01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR	Operating As Endorsements			
	Total Occs 2	Train/Bus # Recorded	Total # Citations Issued 1	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel NORTHBOUND	<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 STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO				

UNIT 01	Vehicle			
	License Plate Number ADY1283	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1G1ND52FX5M183487	Make CHEVROLET	Year 2005	Model CLASSIC
	Color GRY - GRAY	Body Style SD - SEDAN		Bus Use NOT A BUS
	Initial Contact Point 12--FRONT	Vehicle Damage 12--FRONT		
Extent Of Damage MINOR DAMAGE				

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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions FOLLOWING TOO CLOSE			
01 01	Owner Name TINA BABETTE MCMILLAN (608) 415-1991		Owner Address 325 CHURCH ST CAZENOVIA, WI 53924 , US	
	Sequence Of Events			
01 02 03 04	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
	Event			
UNIT	Policy Holder			
	Insurance Company DAIRYLAND-INS-CO		Individual TINA MCMILLAN	
UNIT INDIVIDUAL	Individual			
	Driver TINA BABETTE MCMILLAN (608) 415-1991		Citations Issued 1	Sex FEMALE
	Address 325 CHURCH ST CAZENOVIA, WI 53924 , 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 POSSIBLE 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 UNKNOWN				

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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 COOPER S MCMILLAN (608) 415-1991			Citations Issued 0	Sex MALE		
		Address 325 CHURCH ST CAZENOVIA, WI 53924 , US			Date of Birth	Race WHITE		
		Driver License Number						
		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	
		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				
		Violations				
		01	002	UTC Number AI387881	Issue To? 001	Statute Number 346.14(1m)

Unit Summary

UNIT	02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE			
		Vehicle Type (SPORT) UTILITY VEHICLE					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 NORTHBOUND		<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 STRAIGHT			Road Grade LEVEL	
		Truck Bus or HazMat NO							

Vehicle

02	02	License Plate Number KD4982		Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES	
		Vehicle Identification Number 1FMCU94108KC31968		Make FORD	Year 2008	Model ESCAPE LIM	
		Color SIL - SILVER (ALUMINUM)		Body Style UT - SPORT UTILITY VEHICLE		Bus Use NOT A BUS	
		Initial Contact Point 6--REAR					

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UNIT VEHICLE	Vehicle Damage	
	Extent Of Damage MINOR DAMAGE	6--REAR
	Towed Due To Damage NOT TOWED	Vehicle Removed By OWNER
	What Driver Was Doing RIGHT TURN	Vehicle Factors
UNIT VEHICLE	Driver Prior Action Other	NOT APPLICABLE
	Driver Actions NO CONTRIBUTING ACTION	
	Owner Name WADE W OPPERMAN (608) 477-2432	Owner Address 430 RED SPRUCE AVE BARABOO, WI 53913 , US
	Sequence Of Events	
UNIT VEHICLE	Event MOTOR VEH IN TRANSPORT	
	Event	
	Event	
	Event	
UNIT VEHICLE	Policy Holder	
	Insurance Company ESURANCE-INSURANCE-COMPANY	Individual WADE OPPERMAN
UNIT INDIVIDUAL	Individual	
	Driver WADE W OPPERMAN (608) 477-2432	Citations Issued 0
		Sex MALE
		Date of Birth
UNIT INDIVIDUAL	Address 430 RED SPRUCE AVE BARABOO, WI 53913 , US	Race WHITE
	Driver License Number	
	STATE: WISCONSIN COUNTRY: UNITED STATES	
UNIT INDIVIDUAL	Safety Equipment	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
	Injury	Injury Severity NO APPARENT INJURY
UNIT INDIVIDUAL	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE
	Trapped/Extricated NOT TRAPPED	
	Medical Transport NOT TRANSPORTED	EMS Agency Identifier
		EMS Run #
UNIT INDIVIDUAL	Hospital	Date of Death
		Time of Death

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UNIT	Distracted By		Distracted By Source UNKNOWN		
	Distracted By Action UNKNOWN				
	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				
02	003	Individual Condition			
		APPEARED NORMAL			