

6TL0BC3B37

19-07163

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 19-07163		Investigating Officer/Deputy DEPUTY W. VERTEIN	
Crash Date 06/15/2019		Crash Time 11:36 AM		Date Arrived 06/15/2019		Time Arrived 11:45 AM	
Date Notified 06/15/2019		Time Notified 11:38 AM		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 checked="" 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
	Additional Information NONE

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

ON THE DESCRIBED DATE, TIME, AND LOCATION, UNIT 1 AND UNIT 2 WERE TRAVELING WESTBOUND WITH UNIT 2 FOLLOWING UNIT 1. AS THE OPERATOR OF UNIT 1 WAS ATTEMPTING TO NEGOTIATE A CURVE, HE LOST CONTROL OF UNIT 1 DUE TO UNIT 1 STRIKING PEA GRAVEL IN THE AREA BETWEEN THE FOG LINE AND THE DITCH LINE. UNIT 1 ENTERED THE DITCH LINE WHERE THE OPERATOR WAS THROWN AND UNIT 1 OVERTURNED. THE OPERATOR OF UNIT 2 LOST CONTROL DUE TO THE GRAVEL FROM UNIT 1 BEING ON THE ROADWAY. UNIT 1 ENTERED THE DITCH LINE, BUT THE OPERATOR OF UNIT 1 WAS ABLE TO SET UNIT 1 ON ITS SIDE. THE OPERATOR OF UNIT 1 HAD VISIBLE INJURIES, BUT REFUSED MEDICAL TREATMENT AND WAS LATER TRANSPORTED TO LOCAL HOSPITAL IN A PERSONAL VEHICLE. THE UNIT 2 OPERATOR DID NOT HAVE INJURIES.

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Location

ON CTHPF WB 0.61 MI N OF SCHARA RD IN THE TOWN OF FREEDOM IN SAUK COUNTY	Latitude 43.389354359	Longitude -89.945913453
	X Coordinate 261399.078125	Y Coordinate 4808269
	Structure Type	

Crash Scene

First Harmful Event DITCH		First Harmful Event Location ON ROADWAY	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT		Light Condition DAYLIGHT	
Road Surface Condition(s) DRY		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 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 M CLASS		Unit Type MOTORCYCLE		
	Vehicle Type MOTORCYCLE				Operating As Endorsements		
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0		
	Insurance? NO	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 2		
	Most Harmful Event: Collision With DITCH		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 DOWNHILL		
	Truck Bus or HazMat NO						
	UNIT 01 VEHICLE	Vehicle					
		License Plate Number 776MR		Plate Type CYC - CYCLE	St WI	Country of Issuance UNITED STATES	
Vehicle Identification Number 1HD1HAZ483K834467		Make HARLEY DAVIDSON	Year 2003	Model V-ROD			
Color SIL - SILVER (ALUMINUM)		Body Style MC - MOTORCYCLE		Bus Use NOT A BUS			
Initial Contact Point 11--LEFT FRONT CORNER		Vehicle Damage 1--RIGHT FRONT CORNER, 7--LEFT REAR CORNER, 8--LEFT SIDE REAR, 9--LEFT SIDE MIDDLE, 10--LEFT SIDE FRONT, 11--LEFT FRONT CORNER, 12--FRONT					
Extent Of Damage DISABLING DAMAGE							

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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By MIKES TOWING	
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions RAN OFF ROADWAY			
01	Owner Name ROBERT JAMES PORTER (608) 963-0302		Owner Address 310 E WALNUT ST NORTH FREEDOM, WI 53951 , US	
	Sequence Of Events			
01	Event RUN OFF ROADWAY RIGHT			
	Event DITCH			
	Event OVERTURN/ROLLOVER			
	Event			
01	Individual			
	Driver ROBERT JAMES PORTER (608) 963-0302		Citations Issued 0	Sex MALE
	Address 310 E WALNUT ST NORTH FREEDOM, WI 53951 , US		Date of Birth	Race WHITE
	Driver License Number		STATE: WISCONSIN COUNTRY: UNITED STATES	
01	Safety Equipment		On Duty Crash	
	Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		Protective Gear GLOVES, BOOTS, LONG PANTS	
	Helmet Use NO		Helmet Compliance UNKNOWN	
	Eye Protection YES: WORN		Tint Compliance UNKNOWN	
01	Injury		Injury Severity SUSPECTED MINOR INJURY	
	Airbag		NOT APPLICABLE	
	Ejected NOT APPLICABLE	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED	
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #
01	Hospital		Date of Death	Time of Death
	Distracted By			
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)			
	Distracted By Action NOT DISTRACTED			
01	Non Motorist		Striking Unit #	
	Location			

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UNIT	INDIVIDUAL	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			

Unit Summary

UNIT	02	Unit Status IN TRANSIT		Vehicle Operating As Classification M CLASS		Unit Type MOTORCYCLE		
		Vehicle Type MOTORCYCLE					Operating As Endorsements	
		Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0		
		Insurance? NO	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 2		
		Most Harmful Event: Collision With DITCH		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 DOWNHILL		
		Truck Bus or HazMat NO						

UNIT	02	Vehicle				
		License Plate Number 898LG		Plate Type CYC - CYCLE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1HD1BJL45JY015808		Make HARLEY DAVIDSON	Year 1988	Model FLSTC
		Color WHI - WHITE		Body Style MC - MOTORCYCLE		Bus Use NOT A BUS
		Initial Contact Point 11--LEFT FRONT CORNER		Vehicle Damage		
		Extent Of Damage DISABLING DAMAGE		7--LEFT REAR CORNER, 8--LEFT SIDE REAR, 9--LEFT SIDE MIDDLE, 10--LEFT SIDE FRONT, 11--LEFT FRONT CORNER, 12--FRONT, UNDERCARRIAGE		
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By MIKES TOWING		
		What Driver Was Doing NEGOTIATING CURVE				

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UNIT VEHICLE	Vehicle Factors			
	Driver Prior Action Other	NOT APPLICABLE		
	Driver Actions NO CONTRIBUTING ACTION			
	Owner Name ROBERT J PORTER (608) 963-0302	Owner Address 310 E WALNUT ST NORTH FREEDOM, WI 53951 , US		
02	Sequence Of Events			
	Event RUN OFF ROADWAY RIGHT			
	Event DITCH			
	Event			
	Event			
UNIT INDIVIDUAL	Individual			
	Driver BRETT L JANKOWSKI (608) 393-6527	Citations Issued 0	Sex MALE	
		Date of Birth	Race WHITE	
	Address 21421 KEEL RD SPARTA, WI 54656 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
	Safety Equipment	On Duty Crash	Protective Gear BOOTS, LONG PANTS	
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		
		Helmet Use NO	Helmet Compliance UNKNOWN	
		Eye Protection YES: WORN	Tint Compliance UNKNOWN	
		02 002	Injury	Injury Severity NO APPARENT INJURY
	Ejected NOT APPLICABLE		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	
Prior Action				

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UNIT 02	INDIVIDUAL 002	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			

Property Owner

PROP OWNER 01	Government TOWNSHIP OF FREEDOM (608) 524-6400	Address S4977 CTH D ROCK SPRINGS, WI 53961 , US
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Fixed Objects Struck

01	Striking Unit 01	Struck Object DITCH	Structure Number	Damage Tag Number NA
	Striking Unit 02	Struck Object DITCH	Structure Number	Damage Tag Number NA

Witness

WITN ESS 01	Individual JOHANNA LYNNE BRUNS (608) 434-5106	Address S3880 FAIRFIELD RD BARABOO, WI 53913 , US	Date of Birth
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