

6TL0B8M7VN

19-07169

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 19-07169		Investigating Officer/Deputy DEPUTY B. MEARS	
Crash Date 06/15/2019		Crash Time 02:44 PM		Date Arrived 06/15/2019		Time Arrived 02:55 PM	
Date Notified 06/15/2019		Time Notified 02:44 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 MEARS
	Additional Information PHOTOS

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

UNIT 2, A TRACTOR PULLING EQUIPMENT WAS SB ON CTH G SLOWING, MOVING OVER TO THE CENTER/LEFT PREPARING TO TURN LEFT ONTO EAST HARRIS RD. UNIT 1 WAS ALSO SB ON CTH G, DID NOT KNOW THE UNIT WAS TURNING, AND WENT TO PASS IT ON THE LEFT IN A NO PASSING ZONE, WHEN THE UNITS COLLIDED IN THE ROADWAY. THERE WERE NO INJURIES. UNIT 1 HAD REPORTABLE DAMAGE TO THE RT REAR PASSENGER SIDE UNIT 2 HAD DAMAGE TO A PIECE OF METAL ON THE LEFT FRONT OF A PIECE OF FARM EQUIPMENT. UNIT 1 OPERATOR STAYED SHE THOUGHT IF THE UNIT WAS GOING SLOW, LESS THAN 35 MPH, IT WAS OKAY TO PASS IN A NO PASSING ZONE. I ADVISED HER THAT IT IS NOT ALLOWED WITH FARM EQUIPMENT. SHE WAS ISSUED A WRITTEN WARNING. THE TRACTOR DRIVER WAS ADVISED TO USE HIS HAND SIGNALS TO SIGNAL A TURN, SO OTHER DRIVERS ARE AWARE. HE WAS VERBALLY WARNED. DRIVERS INVOLVED REMOVED THEIR UNITS.

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Location

INTERSECTION ON CTHG SB AT HARRIS RD IN THE TOWN OF WASHINGTON IN SAUK COUNTY	Latitude 43.453056939	Longitude -90.15524841
	X Coordinate 244711.375	Y Coordinate 4815965
	Structure Type	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 05--SIDESWIPE/SAME DIRECTION		Light Condition DAYLIGHT	
Road Surface Condition(s) DRY		Roadway Factor(s) NONE	
Environment Factor(s) NONE			
Weather Condition(s) CLOUDY			
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	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 01	Train/Bus # Recorded	Total # Citations Issued 00	Total Trailers 0	Total HazMat Types 0		
	Insurance? YES	Direction Of Travel SOUTHBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 02		
	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 01	Vehicle					
		License Plate Number 218VSN		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
Vehicle Identification Number 3N1AB61E78L666155		Make NISSAN	Year 2008	Model SENTRA 2.0			
Color SIL - SILVER (ALUMINUM)		Body Style 4D - 4DR		Bus Use NOT A BUS			
Initial Contact Point 5--RIGHT REAR CORNER		Vehicle Damage					
Extent Of Damage FUNCTIONAL DAMAGE		5--RIGHT REAR CORNER					

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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR		
	What Driver Was Doing OVERTAKE LEFT		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions IMPROPER OVERTAKING / PASSING LEFT				
01	Owner Name JENNIFER JO STORKSON (608) 807-9903		Owner Address 13433 JUNGLE BAR LN CAZENOVIA, WI 53924 , US		
	Sequence Of Events				
01	Event	MOTOR VEH IN TRANSPORT			
	Event				
	Event				
	Event				
04	Policy Holder				
	Insurance Company AMERICAN-FAMILY-INS-CO		Individual JENNIFER STORKSON		
UNIT INDIVIDUAL	Individual				
	Driver JENNIFER JO STORKSON (608) 807-9903		Citations Issued 0	Sex FEMALE	
	Address 13433 JUNGLE BAR LN CAZENOVIA, WI 53924 , US		Date of Birth	Race WHITE	
			Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
01	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		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 VEHICLE	What Driver Was Doing GOING STRAIGHT	Vehicle Factors	
	Driver Prior Action Other	NOT APPLICABLE	
	Driver Actions OTHER CONTRIBUTING ACTION		
	Owner Name STEPHEN H FEARING (608) 963-1323	Owner Address E3418 EAST HARRIS RD LA VALLE, WI 53941 , US	
02 02	Sequence Of Events		
	01	Event MOTOR VEH IN TRANSPORT	
	02	Event	
	03	Event	
	04	Event	
UNIT INDIVIDUAL	Individual		
	Driver JASON H FEARING (608) 415-0974	Citations Issued 0	Sex MALE
		Date of Birth	Race WHITE
	Address E5605 CHURCHILL RD REEDSBURG, WI 53959 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
	Safety Equipment	On Duty Crash	Safety Equipment
	Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY	NOT APPLICABLE	
	Helmet Use	Helmet Compliance	
	Eye Protection	Tint Compliance	
	Injury	Injury Severity NO APPARENT INJURY	Airbag NOT APPLICABLE
	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	
Prior Action			

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UNIT	INDIVIDUAL	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	002	Individual Condition			
		APPEARED NORMAL			