

6TL09T1TNC  
19-07490

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

6TL09T1TNC

Document Number Override		Primary Crash Document #	Agency Crash Number <b>19-07490</b>	Investigating Officer/Deputy <b>DEPUTY C. GALLAGHER</b>	
Crash Date <b>06/22/2019</b>		Crash Time <b>12:50 PM</b>	Date Arrived <b>06/22/2019</b>	Time Arrived <b>01:00 PM</b>	
Date Notified <b>06/22/2019</b>		Time Notified <b>01:00 PM</b>	Total Units <b>01</b>	Total Injured <b>02</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 01		Reconstruction By
		Photos By <b>DEPUTY C.GALLAGHER #9170</b>
		Additional Information <b>PHOTOS</b>

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

UNIT 1 WAS TRAVELING WESTBOUND ON HWY 136. UNIT 1 DROVE ALONG RIGHT SHOULDER AND LOST CONTROL. UNIT 1 CRASHED INSIDE THE 6FT DROP BOX CULVERT. UNIT 1 CAME TO REST ON ITS RIGHT SIDE FACING WESTBOUND IN THE CULVERT.

Location

<b>ON STH136 WB 437 FT W OF BREEZY KNOLL LN/ STH123 SB IN THE TOWN OF BARABOO IN SAUK COUNTY</b>	Latitude <b>43.4382284</b>	Longitude <b>-89.745354988</b>
	X Coordinate <b>277822.71875</b>	Y Coordinate <b>4813142.5</b>
	Structure Type	

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Crash Scene

Form with fields: First Harmful Event (OVERTURN/ROLLOVER), First Harmful Event Location (SHOULDER RIGHT), Manner of Collision (NO COLLISION W/VEHICLE IN TRANSPORT), Light Condition (DAYLIGHT), Road Surface Condition(s) (DRY), 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), Access Control (NO CONTROL), Special Study, Within Interchange Area (NO), Junction Location (NON-JUNCTION), Intersection Type (NOT AN INTERSECTION), Closure Type (LANE CLOSURE), Reasons for Closure (LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS), Date Initial Lane/Rd Closed (06/22/2019), Time Initial Lane/Rd Closed (12:50 PM), Date All Lanes Open (06/22/2019), Time All Lanes Open (01:55 PM), Date Scene Cleared (06/22/2019), Time Scene Cleared (01:57 PM).

Unit Summary

Unit Summary table with fields: Unit Status (IN TRANSIT), Vehicle Operating As Classification (M CLASS), Unit Type (MOTORCYCLE), Vehicle Type (MOTORCYCLE), Operating As Endorsements, Total Occs (2), Train/Bus # Recorded, Total # Citations Issued (0), Total Trailers (0), Total HazMat Types (0), Insurance? (YES), Direction Of Travel (WESTBOUND), Pre Crash Tire Mark, Speed Limit (50), Total Lanes (2), Most Harmful Event: Collision With (OVERTURN/ROLLOVER), 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 table with fields: License Plate Number (F00L), Plate Type (CYC - CYCLE), St (WI), Country of Issuance (UNITED STATES), Vehicle Identification Number (1HD1TCL16KB957496), Make (HARLEY DAVIDSON), Year (2019), Model (FLTRXSE), Color (BLU - BLUE), Body Style (MC - MOTORCYCLE), Bus Use (NOT A BUS), Initial Contact Point (12--FRONT), Vehicle Damage (1--RIGHT FRONT CORNER, 2--RIGHT SIDE FRONT, 3--RIGHT SIDE MIDDLE, 4--RIGHT SIDE REAR, 7--LEFT REAR CORNER, 12--FRONT), Extent Of Damage (DISABLING DAMAGE), Towed Due To Damage (TOWED DUE TO DISABLING DAMAGE), Vehicle Removed By (MIKES TOWING), What Driver Was Doing (GOING STRAIGHT).

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UNIT VEHICLE	Driver Prior Action Other		Vehicle Factors	
	NOT APPLICABLE			
	Driver Actions <b>RAN OFF ROADWAY</b>			
01	Owner Name <b>DEBORAH ANN KANYUH (920) 251-1572</b>		Owner Address <b>643 E JOHNSON ST FOND DU LAC, WI 54935 , US</b>	
	<b>Sequence Of Events</b>			
01	01	Event <b>RUN OFF ROADWAY RIGHT</b>		
	02	Event <b>OVERTURN/ROLLOVER</b>		
	03	Event		
	04	Event		
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>STATE-FARM-GENERAL-INS-CO</b>		Individual <b>DEBORAH KANYUH</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>DEBORAH ANN KANYUH (920) 251-1572</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>
	Address <b>643 E JOHNSON ST FOND DU LAC, WI 54935 , US</b>		Date of Birth	Race <b>WHITE</b>
			Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01	001	<b>Safety Equipment</b>		On Duty Crash
		Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>		Protective Gear <b>BOOTS, JACKET</b>
		Helmet Use <b>FULL-FACE</b>		Helmet Compliance <b>UNKNOWN</b>
	Eye Protection <b>YES: WINDSHIELD</b>		Tint Compliance <b>UNKNOWN</b>	
	<b>Injury</b>		Injury Severity <b>SUSPECTED MINOR INJURY</b>	Airbag <b>DEPLOYED-FRONT</b>
	Ejected <b>NOT APPLICABLE</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
	Medical Transport <b>EMS GROUND</b>		EMS Agency Identifier <b>6000368</b>	EMS Run #
Hospital <b>ST CLARE HOSP</b>		Date of Death	Time of Death	
<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>		
<b>Distracted By Action</b> <b>NOT DISTRACTED</b>				
<b>Non Motorist</b>		Striking Unit #	Location	
Prior Action				

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UNIT 01	INDIVIDUAL	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>			
		<b>Individual</b>			
		Passenger <b>SHAIRI ANN KENTOPP (920) 251-1573</b>	Citations Issued <b>0</b>	Sex <b>FEMALE</b>	
		Address <b>643 E JOHNSON ST FOND DU LAC, WI 54935 , US</b>		Date of Birth	Race <b>WHITE</b>
Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>					
UNIT 01	INDIVIDUAL	<b>Safety Equipment</b>	On Duty Crash	Protective Gear	
		Seat Position <b>4--SECOND SEAT-LEFT SIDE(MOTORCYCLE/BI</b>	<b>BOOTS, JACKET</b>		
		Helmet Use <b>FULL-FACE</b>	Helmet Compliance <b>UNKNOWN</b>		
		Eye Protection <b>YES: WINDSHIELD</b>	Tint Compliance <b>UNKNOWN</b>		
		<b>Injury</b>	Injury Severity <b>SUSPECTED SERIOUS INJUR</b>	Airbag <b>NON DEPLOYED</b>	
		Ejected <b>NOT APPLICABLE</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>	
		Medical Transport <b>EMS GROUND</b>	EMS Agency Identifier <b>6000368</b>	EMS Run #	
		Hospital <b>ST CLARE HOSP</b>	Date of Death	Time of Death	
		<b>Distracted By</b>	Distracted By Source		
		Distracted By Action			
UNIT 01	INDIVIDUAL	<b>Non Motorist</b>	Striking Unit #	Location	
		Prior Action			

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UNIT	INDIVIDUAL	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>				
		01	002			

**Witness**

WITN 01	ESS	Individual <b>RYAN W KOHLER</b> (865) 748-3900	Address <b>1220 SILVER DRIVE #6</b> <b>BARABOO, WI 53913 , US</b>	Date of Birth

**Witness**

WITN 02	ESS	Individual <b>JODI L KILSDONK</b> (920) 850-3743	Address <b>4416 NORTH PROVEDENCE</b> <b>APPLETON, WI 54912 , US</b>	Date of Birth