

6TL09H5JQD

19-09084

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 19-09084	Investigating Officer/Deputy DEPUTY S. MESSNER	
Crash Date 07/22/2019		Crash Time 04:10 PM	Date Arrived 07/22/2019	Time Arrived 04:39 PM	
Date Notified 07/22/2019		Time Notified 04:13 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

<p>Diagram</p> <p>Not to scale</p> <p>Unit 2</p> <p>Unit 2</p> <p>Unit 1</p> <p>Unit 2</p> <p>point of impact</p> <p>US 12</p> <p>Unit 1</p> <p>driveway of E11583</p> <p>E11583 US 12</p>	Reconstruction By
	Photos By DEP. S. MESSNER #9134
	Additional Information PHOTOS

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

ON MONDAY, JULY 22, 2019, AT APPROXIMATELY 4:10 PM, UNIT 1, A PICKUP BEARING WISCONSIN REGISTRATION PLATE #JA6154, BEING DRIVEN BY GARY R. SCHULTZ WITH A PASSENGER OF TRACY A. FROSCHE, WAS WESTBOUND ON US 12, TOWNSHIP OF PRAIRIE DU SAC, SAUK COUNTY, WISCONSIN. UNIT 1 WAS SLOWING DOWN OR WAS A COMPLETE STOP TO TURN INTO THE DRIVEWAY OF E11583 US 12, WHEN UNIT 2, A CAR BEARING WISCONSIN REGISTRATION PLATE #714EMW, AND BEING DRIVEN BY HAILEY M. FOUTS. UNIT 2 ATTEMPTED TO BRAKE, BUT FAILED TO STOP AND STRUCK THE REAR OF UNIT 1 IN THE WESTBOUND LANE OF TRAVEL. UNIT 2 WAS REMOVED OFF THE ROADWAY AND WAS INOPERABLE. UNIT 1 WAS REMOVED TO THE DRIVEWAY OF E11583 US 12. NO ONE WAS INJURED. THE DRIVER OF UNIT 2, STATED SHE APPLIED THE BRAKES, BUT "THEY DID NOT CATCH," AND EXPLAINED SHE "JUST" HAD BRAKE WORK DONE ON UNIT 2. UNIT 2 WAS REMOVED FROM THE SCENE BY GEORGES TOWING.

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Location

ON USH12 WB 0.28 MI W OF LUEDERS RD IN THE TOWN OF PRAIRIE DU SAC IN SAUK COUNTY	Latitude 43.270957312	Longitude -89.744987227
	X Coordinate 277241	Y Coordinate 4794564
	Structure Type NO STRUCTURE	

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 NO CONTROL	Special Study
Within Interchange Area NO	Junction Location DRIVEWAY ACCESS	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 2	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 55	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	Vehicle				
	License Plate Number JA6154	Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number 3GCUKREC9JG406648	Make CHEVROLET	Year 2018	Model SILVERADO	
	Color BLU - BLUE	Body Style PK - PICKUP		Bus Use NOT A BUS	
	Initial Contact Point 6--REAR	Vehicle Damage 5--RIGHT REAR CORNER, 6--REAR			
	Extent Of Damage FUNCTIONAL DAMAGE				
Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR				

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UNIT VEHICLE	What Driver Was Doing SLOW/STOPPING	Vehicle Factors	
	Driver Prior Action Other	NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION		
01 01	Owner Name GARY ROBERT SCHULTZ (608) 769-3777	Owner Address 1442 KANE ST LA CROSSE, WI 54603 , US	
	Sequence Of Events		
01 02 03 04	Event MOTOR VEH IN TRANSPORT		
	Event		
	Event		
	Event		
UNIT	Policy Holder		
	Insurance Company FARMERS-AUTOMOBILE-INS-ASSOC,-THE	Individual GARY SCHULTZ	
UNIT INDIVIDUAL	Individual		
	Driver GARY ROBERT SCHULTZ (608) 769-3777	Citations Issued 0	Sex MALE
		Date of Birth	Race WHITE
	Address 1442 KANE ST LA CROSSE, WI 54603 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
01 001	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		
	Non Motorist	Striking Unit #	Location
	Prior Action		

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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		
	Individual Condition APPEARED NORMAL		
	Individual		
	Passenger TRACY ANN FROSCH (608) 370-4468	Citations Issued 0	Sex FEMALE
	Address 216 FOX RUN SAUK CITY, WI 53583 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
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	
	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		
UNIT INDIVIDUAL	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					
		Individual Condition APPEARED NORMAL					
		01	002				

Unit Summary

UNIT	02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE		
		Vehicle Type PASSENGER CAR				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 55	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	VEHICLE	Vehicle				
		License Plate Number 714EMW		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 4S4BRGCG7D3312641		Make SUBARU	Year 2013	Model OUTBACK 2.
		Color RED - RED		Body Style SW - STATIONWAGON		Bus Use NOT A BUS
		Initial Contact Point 12--FRONT		Vehicle Damage		
		Extent Of Damage DISABLING DAMAGE		1--RIGHT FRONT CORNER, 11--LEFT FRONT CORNER, 12--FRONT		
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By GEORGES AUTO BODY		
		What Driver Was Doing SLOW/STOPPING		Vehicle Factors		
		Driver Prior Action Other		BRAKES		

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT VEHICLE	Driver Actions NO CONTRIBUTING ACTION		
	02	02	Owner Name HAILEY M FOUTS (608) 604-4146
			Owner Address S12678 MERRILEE RD SPRING GREEN, WI 53588 , US
Sequence Of Events			
UNIT 01 02 03 04	01	Event MOTOR VEH IN TRANSPORT	
	02	Event	
	03	Event	
	04	Event	
Policy Holder			
UNIT	Insurance Company STATE-FARM-GENERAL-INS-CO		Individual HAILEY FOUTS
	Individual		
UNIT INDIVIDUAL	Driver HAILEY M FOUTS (608) 604-4146		Citations Issued 0
			Sex FEMALE
			Date of Birth WHITE
Address S12678 MERRILEE RD SPRING GREEN, WI 53588 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
UNIT 003	Safety Equipment		On Duty Crash
			Safety Equipment SHOULDER & LAP BELT
	Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		
	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
Prior Action			

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UNIT	INDIVIDUAL	Action				
		Action Other			To/From School	
	02	003	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			