

6TL0CCZ7RF

19-09958

# 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 <b>6TL0B4X4LP</b>		Primary Crash Document #	Agency Crash Number <b>19-09958</b>	Investigating Officer/Deputy <b>DEPUTY E. KNULL</b>	
Crash Date <b>08/10/2019</b>		Crash Time <b>05:53 AM</b>	Date Arrived <b>08/10/2019</b>	Time Arrived <b>06:05 AM</b>	
Date Notified <b>08/10/2019</b>		Time Notified <b>05:53 AM</b>	Total Units <b>02</b>	Total Injured <b>01</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 checked="" 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 checked="" type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

## Description

Diagram  	Reconstruction By
	Photos By <b>KNULL</b>
	Additional Information <b>PHOTOS</b>

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

OPERATOR OF UNIT 1 WAS EB ON STH 23-33 AND STATES HE FELL ASLEEP AND CROSSED THE CENTERLINE STRIKING UNIT 2. UNIT 1 THEN SPUN AROUND AND ENDED UP IN THE SOUTH DITCH FACING NW. UNIT 2 STATES HE WAS WB AND SAW UNIT 1 COMING ACROSS THE CENTERLINE. OPERATOR STATES HE TURNED HARD RIGHT TO AVOID HEAD ON COLLISION. UNIT 1 OPERATOR SUSTAINED INJURIES AND WAS TRANSPORTED TO HOSPITAL VIA PRIVATE VEHICLE. UNIT 1 SUSTAINED DISABLING DAMAGE AND WAS REMOVED BY STEVES TOWING. UNIT 2 OPERATOR REPORTS NO INJURY AND UNIT 2 SUSTAINED DISABLING DAMAGE AND WAS REMOVED BY BYLSTONES.

IN NARRATIVE UNIT 1 AND UNIT 2 SWITCHED AROUND. NARRATIVE CORRECTED TO READ PROPERLY

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**Location**

<b>ON STH23 EB 1302 FT E OF STH23 EB IN THE TOWN OF REEDSBURG IN SAUK COUNTY</b>	Latitude <b>43.532622515</b>	Longitude <b>-89.959700053</b>
	X Coordinate <b>260848.296875</b>	Y Coordinate <b>4824221</b>
	Structure Type <b>NO STRUCTURE</b>	

**Crash Scene**

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>		First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>06--SIDESWIPE/OPPOSITE DIRECTION</b>		Light Condition <b>DAWN</b>	
Road Surface Condition(s) <b>DRY</b>		Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>			
Weather Condition(s) <b>CLEAR</b>			
Animal Type		Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>		Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land		Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>	
Closure Type <b>LANE CLOSURE</b>		Reasons for Closure <b>LAW ENFORCEMENT, TOW TRUCK</b>	
Date Initial Lane/Rd Closed <b>08/10/2019</b>	Time Initial Lane/Rd Closed <b>06:05 AM</b>		
Date All Lanes Open <b>08/10/2019</b>	Time All Lanes Open <b>08:30 AM</b>	Date Scene Cleared <b>08/10/2019</b>	Time Scene Cleared <b>08:30 AM</b>

**Unit Summary**

<b>UNIT</b>	<b>01</b>	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>			
		Vehicle Type <b>(SPORT) UTILITY VEHICLE</b>					Operating As Endorsements		
		Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>1</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>			
		Insurance? <b>YES</b>	Direction Of Travel <b>EASTBOUND</b>	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit <b>55</b>	Total Lanes <b>2</b>			
		Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>			
		Traffic Way <b>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>			
		Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>DOWNHILL</b>			
		Truck Bus or HazMat <b>NO</b>							
		<b>01</b>	<b>01</b>	<b>Vehicle</b>					
				License Plate Number <b>383Nzb</b>		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
Vehicle Identification Number <b>5Y2SL65856Z459918</b>				Make <b>PONTIAC</b>	Year <b>2006</b>	Model <b>VIBE</b>			
Color <b>RED - RED</b>				Body Style <b>4H - HATCHBACK 4 DOOR</b>		Bus Use <b>NOT A BUS</b>			

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UNIT VEHICLE	Initial Contact Point <b>12--FRONT</b>		Vehicle Damage	
	Extent Of Damage <b>DISABLING DAMAGE</b>		<b>9--LEFT SIDE MIDDLE, 10--LEFT SIDE FRONT, 11--LEFT FRONT CORNER, 12--FRONT</b>	
	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>STEVES AUTO SERVICE</b>	
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
UNIT VEHICLE	Driver Actions <b>OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER</b>			
	Owner Name <b>DENISE D HONER (608) 963-2647</b>		Owner Address <b>E3907 BRIMMER RD LA VALLE, WI 53941 , US</b>	
UNIT 01	<b>Sequence Of Events</b>			
	01	Event <b>CROSS CENTERLINE</b>		
	02	Event <b>MOTOR VEH IN TRANSPORT</b>		
	03	Event <b>DITCH</b>		
	04	Event		
UNIT 01	<b>Policy Holder</b>			
	Insurance Company <b>AMERICAN-FAMILY-INS-CO</b>		Individual <b>DENISE HONER</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>TRISTAN JOHN HONER (608) 393-7704</b>		Citations Issued <b>1</b>	Sex <b>MALE</b>
	Address <b>E3907 BRIMMER RD LA VALLE, WI 53941 , US</b>		Date of Birth	Race
	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>			
UNIT 01	<b>Safety Equipment</b>		On Duty Crash	
	Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>		Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	<b>Injury</b>		Airbag	
	<b>SUSPECTED MINOR INJURY</b>		<b>DEPLOYED-FRONT</b>	
UNIT 001	Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
	Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #
	Hospital		Date of Death	Time of Death
	<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>	

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<b>UNIT</b>	<b>INDIVIDUAL</b>	Distracted By Action <b>NOT DISTRACTED</b>			
		<b>Non Motorist</b>	Striking Unit #	Location	
		Prior Action			
		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>01</b>	<b>001</b>	<b>Violations</b>			
		UTC Number <b>BB955203</b>	Issue To? <b>001</b>	Statute Number <b>346.89(1)</b>	Description <b>INATTENTIVE DRIVING</b>

## Unit Summary

<b>UNIT</b>	<b>02</b>	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>B CLASS</b>		Unit Type <b>TRUCK</b>		
		Vehicle Type <b>STRAIGHT TRUCK (INSERT TRUCK)</b>					Operating As Endorsements	
		Total Occs <b>1</b>	Train/Bus # Recorded		Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
		Insurance? <b>YES</b>	Direction Of Travel <b>WESTBOUND</b>		<input type="checkbox"/> Pre Crash <b>Tire Mark</b>	Speed Limit <b>55</b>	Total Lanes <b>2</b>	
		Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>			Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
		Traffic Way <b>TWO-WAY, NOT DIVIDED</b>			Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
		Surface Type <b>BLACKTOP (BITUMINOUS)</b>			Road Curvature <b>STRAIGHT</b>		Road Grade <b>UPHILL</b>	
		Truck Bus or HazMat <b>TRUCK OR TRUCK COMBINATION &gt; 10,000LBS GVWR/GCWR</b>						

<b>UNIT</b>	<b>VEHICLE</b>	<b>Vehicle</b>			
		License Plate Number <b>SB12582</b>	Plate Type <b>HTK - HEAVY TRUCK</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>1NPXGGGG00D420803</b>	Make <b>PETERBILT MOTORS CO</b>	Year <b>2016</b>	Model <b>NO DATA FO</b>
		Color <b>RED - RED</b>	Body Style <b>TN - TANKER</b>		Bus Use <b>NOT A BUS</b>
		Initial Contact Point <b>8--LEFT SIDE REAR</b>	Vehicle Damage		
		Extent Of Damage <b>DISABLING DAMAGE</b>	<b>8--LEFT SIDE REAR</b>		

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UNIT VEHICLE	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>BLYSTONES TOWING</b>	
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
02 02	Owner Name <b>L &amp; R DEVRIES AND SONS INC (920) 210-3612</b>		Owner Address <b>235 GERMANIA ST RANDOLPH, WI 53956 , US</b>	
	<b>Sequence Of Events</b>			
01 02 03 04	Event <b>MOTOR VEH IN TRANSPORT</b>			
	Event			
	Event			
	Event			
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>RURAL-MUTUAL-INS-CO-(ATTN:-CLAIMS-DEPT)</b>		Organization/Company <b>L &amp; R DEVRIES AND SONS INC</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>DAVID PATRICK ADELMAN (608) 415-0654</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
	Address <b>307 CHURCH ST CAZENOVIA, WI 53924 , US</b>		Date of Birth	Race <b>WHITE</b>
			Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
02 002	<b>Safety Equipment</b>		On Duty Crash	
	Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>		Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</b>
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier		EMS Run #
Hospital		Date of Death		Time of Death
<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>		
Distracted By Action <b>NOT DISTRACTED</b>				
<b>Non Motorist</b>		Striking Unit #	Location	

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<b>UNIT</b>	<b>INDIVIDUAL</b>	Prior Action					
		Action					
		Action Other			To/From School		
	<b>02</b>	<b>002</b>	<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>Carrier</b>				
			<b>02</b>	<b>01</b>	<input checked="" type="checkbox"/> Use Vehicle Owner Same as Carrier		Source <b>DRIVER</b>
Name <b>L &amp; R DEVRIES AND SONS INC USDOT# 995400</b>		Address <b>235 GERMANIA ST RANDOLPH, WI 53956 , US</b>					
GVWR <b>MORE THAN 26,000 LB</b>	Vehicle Configuration <b>SINGLE UNIT TRUCK (3 OR MORE AXLES)</b>	Cargo Body Type <b>CARGO TANK</b>					
US DOT # <b>995400</b>	Carrier Type <b>INTRASTATE CARRIER</b>	Permitted Load <b>NOT APPLICABLE</b>					
<input type="checkbox"/> OS/OW Load	WI Permit Number	<input type="checkbox"/> Permitted Vehicle On Permitted Route			<input type="checkbox"/> Escort Vehicle Required By Permit	<input type="checkbox"/> Escort Vehicle Present	
<b>UNIT</b>	<b>TRUCK BUS</b>	Measured Height	Measured Length	Measured Width	Measured Weight		