WISCONSIN MOTOR VEHICLE CRASH REPORT

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

				(608) 356-489:
Document Number Override	Primary Crash Document #	Agency Crash Number 19-10518	Investigating Office DEPUTY A. KU	
Crash Date	Crash Time	Date Arrived	Time Arrived	
08/22/2019	06:30 PM	08/22/2019	06:46 PM	
Date Notified 08/22/2019	Time Notified 06:41 PM	Total Units 01	Total Injured 00	Total Killed 00
On Emergency	it and Run Lane Clo		Trailer or 1	Reporting Threshold
Government Property	Active School Zone	School Bus Related NO	Tags	
▼ Reportable	Crash Type DT4000 (STANDARD CRA	SH)	Amended	Secondary Crash
Description Diagram			I _D	construction By
NOT TO SCALE		HY 33	Pho A P	ditional Information NE, PHOTOS
		MIRROR LAKE RD		
	ent officer, agree that I have	not added any CJIS data in	this report.	
UNIT 1 WAS EAST BOUND ON ENTERED THE NE DITCH. UNIT	HY 33 AND STARTED TO MAKE A T 1 WENT DOWN AT AN EMBANK	A LEFT HAND TURN ONTO MIRR	OR LAKE RD. UNIT 1 1	TOOK THE TURN WIDE AND
ocation		1,		1. % 1
ON MIRROR LAKE RD 68 FT N		Latitude 43.52541	4787	Longitude -89.83726492
OF STH33 EB IN THE TOWN OF DELTON		X Coordina	ate	Y Coordinate
IN SAUK COUNTY		270714.5		4823075
		Structure T		

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Crash Scene

]	First Harmful Event						First Harmful Event Location				
	EME	IBANKMENT				ON ROADWAY					
	Mani	nner of Collision				Light Condition					
	NO	COLLISION W/VEHICLE IN TRANSPORT				DAYLIGHT					
	Road	ad Surface Condition(s)				Roadway	Factor(s)				
	DRY										
	Envi	ronment Factor(s)									
	NON	NE				NONE					
	Wes	ther Condition(s)									
		• •									
	CLE										
	Anim	al Type	Relation T		N ROAD						
	Cras	h Classification - Location				Crash Clas	ssification -	- Jurisdiction			
		BLIC PROPERTY						RISDICTION			
	Triba	ll Land				Access Co				Special Study	
						NO CON	TROL				
		n Interchange Area	Junction Location		Intersection	,,	CECTIO	N.			
	NO		INTERSECTION		FOUR-W	AY INTER	RSECTIO	N			
		Summary =									
		Status		Vehicle Ope	erating As C	lassification		Unit Type			
		RANSIT cle Type		D CLASS				TRUCK		monto	
0		* *	TDIICK			Operating As Endorsements					
	UTILITY TRUCK/PICKUP TRUCK Total Occs Train/Bus # Recorded		Total # Citat	Total # Citations Issued		Total Trailers Total HazMat Types		Mat Types			
	2	- 0000		1					0	* *	
	Insurance? Direction Of Travel				Pre CrashTire				Total Land	al Lanes	
_	YES EASTBOUND		EASTBOUND	Mark			55		2		
UNIT	Most Harmful Event: Collision With				Special Function			Emergency Motor Vehicle Use			
ا ر		BANKMENT		NO SPEC	NO SPECIAL FUNCTION			NOT APPLICABLE			
		ic Way			Traffic Control			Traffic Control Inoperative/Missing			
		D-WAY, NOT DIVIDED		STOP SIGN			NO Road Grade				
		ace Type ACKTOP (BITUMINOUS	2)		Road Curvature STRAIGHT		LEVEL				
		k Bus or HazMat	3)	JIKAIGII				LEVEL			
	NO	N Duo of Fluzivial									
	,	Vehicle									
		License Plate Number	Plate Type	Plate Type		St		Country of Issuance			
		PG8440		LTK - LIG	LTK - LIGHT TRUCK		WI	UNITED ST	TATES		
5	1	Vehicle Identification Nun		Make	DODGE		Year	2005 RAM 1500			
0	01	1D7HU18NX5S27502	0				2005				
		Color		Body Style				Bus Use NOT A BUS			
	ш	BLK - BLACK Initial Contact Point			PK - PICKUP Vehicle Damage		100.7.200				
-		12FRONT		Vollidio Ba	Verilicie Damage						
LINO	¥	Extent Of Damage		1RIGHT	FRONT	ORNER,	2RIGH1	SIDE FRON	T, 12FR	ONT	
ر ر	ΛE	12FRONT Extent Of Damage FUNCTIONAL DAMAGE			1RIGHT FRONT CORNER, 2RIGHT SIDE FRONT, 12FRONT						
	Towed Due To Damage Vehicle Removed By										
		NOT TOWED What Driver Was Doing Vehicle Factors									
	Driver Prior Action Other NOT APPLICABLE					<u> </u>					

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Divere Address FARON GENE HECKLINGER (717) 446-5701 Sequence Of Events Event											
Owner Address FARON GENE HECKLINGER (717) 446-5701 Sequence Of Events Event EMBANKMENT Event Event Event Event Event Event Event FARON GENE HECKLINGER (717) 446-5701 TILITY POLE Event	╘	SLE		L							
FARON GENE HECKLINGER (717) 446-5701 Sequence Of Events Event EMBANKMENT Event Policy Holder Insurance Company ESURANCE-INSURANCE-COMPANY Individual EVENT Individual There (717) 446-5701 There Event Event Event E	S	VEHIC									
Sequence Of Events				NGER							
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Policy Holder Insurance Company ESURANCE-INSURANCE-COMPANY FARON HECKLINGER Individual Driver FARON GENE HECKLINGER (717) 446-5701 Date of Birth Address E102014 N REEDSBURG RD BARABOO, WI 53913 , US Safety Equipment Seat Position 1-FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY) Helmet Use Eye Protection Tint Compliance Eye Protection Figure No APPARENT INJURY NO APPARENT INJURY NO APPARENT INJURY NOT EJECTED Medical Transport NOT TRANSPORTED Hospital Distracted By NOT APPLICABLE (NOT DISTRACTED) Distracted By Action NOT DISTRACTED Non Motorist Individual FARON HECKLINGER (Individual FARON HECKLINGER FARON HECKLINGER Address Even Helmet Seat Sex MALE (717) 446-5701 Date of Birth Race WHITE Sex MALE (717) 446-5701 Sex MALE (717) 446-5701 Sex MALE (717) 446-5701 Date of Birth Race WHITE Sex MALE (717) 446-5701 Face WHITE Address E102014 N REEDSBURG RD BRACE WHITE Race WHITE Safety Equipment Seat Position 1-FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY) Helmet Compliance Eye Protection Tint Compliance Eye Protection Tint Compliance Eye Protection Trapped/Extricated NOT TRAPPED Mot TRANSPORTED Distracted By NOT APPLICABLE (NOT DISTRACTED) Distracted By Action NOT DISTRACTED Non Motorist Sirking Unit # Location		03	Event								
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Ejected Ejection Path Trapped/Extricated NOT EJECTED NOT EJECTED NOT EJECTED/NOT APPLICABLE NOT TRAPPED			Eye Protection		Tint Compliance						
Ejected Ejection Path Trapped/Extricated NOT EJECTED NOT EJECTED NOT EJECTED/NOT APPLICABLE NOT TRAPPED			Injury	Severity	Airhag						
Ejection Path NOT EJECTED NOT EJECTED/NOT APPLICABLE Medical Transport NOT TRANSPORTED Hospital Distracted By Distracted By Source NOT APPLICABLE (NOT DISTRACTED) Distracted By Action NOT DISTRACTED Striking Unit # Location Location Location Trapped/Extricated NOT TRAPPED EMS Agency Identifier EMS Run # Trapped/Extricated NOT TRAPPED EMS Run # Date of Death Time of Death Time of Death Location	5	00	Injury NO	APPARENT INJURY	=						
Medical Transport NOT TRANSPORTED Hospital Date of Death Time of Death Distracted By Distracted By Source NOT APPLICABLE (NOT DISTRACTED) Distracted By Action NOT DISTRACTED Striking Unit # Location				Ejection Path		Trapped/Extricated					
NOT TRANSPORTED 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			NOT EJECTED	NOT EJECTED/NOT APP	LICABLE	NOT TRAPPED					
Hospital Date of Death Time of Death Distracted By Source NOT APPLICABLE (NOT DISTRACTED) Distracted By Action NOT DISTRACTED Non Motorist Striking Unit # Location			Medical Transport		EMS Agency Identifier	EMS Run #					
Distracted By NOT APPLICABLE (NOT DISTRACTED) Distracted By Action NOT DISTRACTED Non Motorist Striking Unit # Location					Date of Death	Time of Death					
Non Motorist Striking Unit # Location		Distracted By Source									
NOT DISTRACTED Striking Unit # Location											
Non Motorist			NOT DISTRACTED	ng Hait #							
Prior Action			Non Motorist	Location							
			Prior Action								

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

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		Action								
	INDIVIDUAL									
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		Action Other						10/1101113011001		
ļ		Cuo	pected Alcohol Us	20	Suspected Drug Use					
	L	Drug & Alcohol NO	pecieu Alconol Os		NO					
	_						I			
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results			
		TEST NOT GIVEN								
		Drug Test Given		Drug Test Type		Drug Test Results				
		TEŠT NOT GIVEN								
2	00	Drug Type								
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		Individual Condition								
		APPEARED NORMAL								
		AI I LANLD NONWAL								
		la altratalorad								
		ndividual			Louis I		I a			
		Passenger	MELL				Sex			
	7	DAVID WILLIAM HUDNELL (608) 393-0768				MALE				
	INDIVIDUAL			Date of Birth		Race WHITE				
⊨	₽						WHILE			
LNO	≥	Address E10201A N REEDSBURG RD BARABOO, WI 53913 , US			Driver License Number					
_	닐				STATE: WISCONSIN	I COLINTRY: LIN	ITED STATES			
	_	BARABOO, WI 33913	, 03		OTATE: WIGOONOIN		IILD OTATEO			
	Cal	On I	Duty Crash		Safety Equipment					
	Sai	fety Equipment								
		Seat Position			SHOULDER & LAP I	BELT				
		3FRONT SEAT-RIGH	IT SIDE (TRAIN	I ENGINEER						
		Helmet Use			Helmet Compliance					
		Eye Protection			Tint Compliance					
_	2	Injur	ry Severity		Airbag					
2	002	Injury _{NO}	APPARENT IN	JURY	NON DEPLOYED					
		Ejected	Ejection Pat	า	ı		Trapped/Extricated			
		NOT EJECTED	NOT EJEC	TED/NOT APPL	ICABLE		NOT TRAPPED			
		Medical Transport			EMS Agency Identifier		EMS Run #			
		NOT TRANSPORTED								
		Hospital			Date of Death		Time of Death			
		· roopilai			24.0 0. 204		Time of Double			
		Distracted By Source								
		Distracted By								
		Distracted By Action								
	Signature Sy riodon									
		Ct-:11	king Unit #	Location						
		Non Motorist	ung Unit #	Location						
		Prior Action								
		FIIOI ACUON								
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SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT BARABOO, WI 53913 (608) 356-4895

Crash Date 08/22/2019

Crash Time 06:30 PM

		Action						
_	INDIVIDUAL							
UNIT	ĕ							
D	\geq							
	Z							
		Action Other						To/From School
	L	Orug & Alcohol	Suspected Alco	hol Use	Suspected Drug Use NO			
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results	
		TEST NOT GIVEN						
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		
01	005	Drug Type						
	0							
		Individual Condition						
		APPEARED NORM	/ IAL					
	,	Violations						
	Ξ	UTC Number	Issue To?	Statute Number 346.57(2)	Description FAILURE TO KEEP	VEHICLE UNDE	R CONTROL	
	5	BB338424	001	346.57(2)	FAILURE TO KEEP	VEHICLE UNDE	RCONTROL	