WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	(608) 356-								
	Document Number Override	Primary Crash	Primary Crash Document # Agency Crash Nul 19-10762			Investigating Office DEPUTY A. BR			
02	Crash Date 08/28/2019	Crash Time 12:59 PM		Date Arrived 08/28/2019		Time Arrived 01:10 PM			
6TL0BNZM02	Date Notified 08/28/2019	Time Notified 01:01 PM		Total Units 01		Total Injured	Total Kill	otal Killed	
		t and Run		<u> </u>		Trailer or		Poporting	
	Government Property	Active School Zone		Schoo NO	I Bus Related	Tags			
ဖ	Reportable	Crash Type DT4000 (ST	ANDARD CRAS			Amended Second			
	Description		•						
	Diagram	Re	constructio	on By					
	NOT TO SCALE USH 12 STDP 1 STOP STOP							PULLING A TRAILER THAT HE ACCELERATED	
	Location ON USH12 EB				Latitude		Longit		
	106 FT E OF STH60 EB			43.271326 X Coordinat			56062105 rdinate		
	IN THE TOWN OF PRAIRIE DU SAC IN SAUK COUNTY					276343.5625 4794634.5			
			Structure Ty	Structure Type					

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First Harmful Event Location

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Crash Scene First Harmful Event

	_	RGO/EQUIPMENT LO	OSS OR SHIFT		ON ROADWAY						
		ner of Collision			Light Condition						
		COLLISION W/VEHI	DAYLIGHT								
	Road	d Surface Condition(s)	Roadway Factor(s)								
	DRY										
	Envi	ronment Factor(s)									
	ЮИ	NE		NONE							
	Wea	ther Condition(s)									
	CLE	AR									
	Anim	nal Type	Relation To Trafficway TRAFFICWAY - ON ROAD								
	Cras	h Classification - Location	n			Crash Clas	ssification	- Jurisdiction			
	PUE	BLIC PROPERTY					NO SPECIAL JURISDICTION Access Control				
	Triba	al Land								Special Study	
	\\/ith	in Interchange Area		Intersection Typ		NO CONTROL					
	NO	in interchange Area				Type AY INTERSECTION					
	Uni	t Summary =	•								
		Status		Vehicle Ope	erating As C	lassification Unit Type					
		RANSIT		D CLASS	D CLASS		AUTOMOBILE				
01		cle Type				Operating As Endorsements				ments	
0	•	ORT) UTILITY VEHIC		1	·						
	Tota 1	I Occs	Train/Bus # Recorded				Total Tra	ailers		zMat Types	
		rance?	Direction Of Travel		0		Speed Li	0 Limit Total Lar		PS .	
_	YES		EASTBOUND		- FIE CIASITITE		55	2			
UNIT		t Harmful Event: Collision	n With	Special Fun	Special Function		Emergency Motor Vehicle Use				
ر	CAF	RGO/EQUIPMENT LO	OSS OR SHIFT	NO SPEC	NO SPECIAL FUNCTION			NOT APP	LICABLE		
		ic Way			Traffic Control			Traffic Control Inoperative/Missing			
		DED HWY W/O TRA	FFIC BARRIER		NO CONTROL			NO			
		ace Type ACKTOP (BITUMINO	ile/		Road Curvature CURVE LEFT			Road Grade LEVEL			
		k Bus or HazMat	03)	CORVELI				LEVEL			
	NO	K Dus of Flaziviat									
	,	Vehicle									
		License Plate Number		Plate Type			St	Country of Is	suance		
		ACZ2461		AUT - AUTOMOBILE		WI	UNITED STATES				
_	_	Vehicle Identification N	Make	Make		Year	Model				
5	5 1GNSKJE72CR109243				CHEVROLET				JBURBAN		
		Color BLK - BLACK			Body Style UT - SPORT UTILITY VEHICLE		F	Bus Use NOT A BUS			
	Initial Contact Point NON-COLLISION Extent Of Damage MINOR DAMAGE				Vehicle Damage						
╘					9LEFT SIDE MIDDLE						
LIND				9LEFT							
	X	MINOR DAMAGE									
	Towed Due To Damage Vehicle Removed By										
	NOT TOWED OWNER										
		What Driver Was Doing	J	Vehicle Fa	CTORS						
	RIGHT TURN Driver Prior Action Other NOT APPLICABLE										
		ļ		<u> </u>							

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								(000) 000 4000	
		Driver Actions							
	Щ	FAILURE TO CONTROL							
HILLING TO CONTROL HILLING H									
5	표								
	7								
		Owner Name			Owner Add				
_	5	JOHN EDWARD ARI (214) 504-8748	NOLDUSS	EN		SHORE RD # 25 N, WI 54462 , US			
5	0	(214) 304-0740			FEARSO	IN, WI 34402 , US			
		Sequence Of Eve	nts						
	_	Event		D OLUET					
	5	CARGO/EQUIPMEN	I LUSS U	K SHIFT					
	02	Event							
	0								
	03	Event							
	0								
	40	Event							
	0								
-		Policy Holder							
LIND		Insurance Company			Individual				
-		USAA-GENERAL-IN	DEMNITY	-CO	JOHN ARM	IOLDUSSEN			
	-	Trailer/Towed							
_		Trailer Plate #	Plate Type	e Make	5	State	Country of Issuance		
5			,,,						
	5 .	Unit Type		Individual			Address		
╘	뜌입	RECREATIONAL		JOHN EDWARD AF					
LNO	RECREATIONAL Vehicle Identification Number Unit Type RECREATIONAL Vehicle Identification Number Individual JOHN EDWARD AR (214) 504-8748					PEARSON, WI 54462, US			
_	본트								
		Individual							
		Driver			Citations Issu	ued	Sex		
		JOHN EDWARD ARNOLDUSSEN			0 MALE				
			NOLDUS:	EN	0		IMALE		
_	¥	(214) 504-8748	NOLDUSS	SEN	0 Date of Birth		Race		
	DUAL		NOLDUS:	SEN	_				
Ξ	IVIDUAL	(214) 504-8748 Address		SEN	_		Race		
LIND	IDINIDUAL	Address N11310 E SHORE RI	O # 25	SEN .	Date of Birth Driver Licens	se Number	Race WHITE		
N N	INDIVIDUAL	(214) 504-8748 Address	O # 25	SEN	Date of Birth Driver Licens		Race WHITE		
LIND	INDIVIDUAL	Address N11310 E SHORE RI PEARSON, WI 54462	D#25 2,US		Date of Birth Driver Licens	se Number	Race WHITE		
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LINO		Address N11310 E SHORE RI PEARSON, WI 54462	D#25 2,US		Date of Birth Driver Licens STATE: W Safety Equip	se Number ISCONSIN COUNTR'	Race WHITE		
		Address N11310 E SHORE RI PEARSON, WI 54462 fety Equipment Seat Position	D # 25 2 , US	h	Date of Birth Driver Licens STATE: W Safety Equip	se Number	Race WHITE		
LINO		Address N11310 E SHORE RI PEARSON, WI 54462 fety Equipment Seat Position 1FRONT SEAT-LEF	D # 25 2 , US	h	Date of Birth Driver Licens STATE: W Safety Equip SHOULDE	se Number ISCONSIN COUNTR' ment R & LAP BELT	Race WHITE		
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LIND		Address N11310 E SHORE RI PEARSON, WI 54462 fety Equipment Seat Position 1FRONT SEAT-LEF	D # 25 2 , US	h	Date of Birth Driver Licens STATE: Will Safety Equip SHOULDE Helmet Com	ment R & LAP BELT pliance	Race WHITE		
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	Sat	Address N11310 E SHORE RI PEARSON, WI 54462 fety Equipment Seat Position 1FRONT SEAT-LEF Helmet Use	D # 25 2 , US n Duty Cras	h DRIVER/MOTORCY	Date of Birth Driver Licens STATE: Will Safety Equip SHOULDE Helmet Com Tint Complia	ment R & LAP BELT pliance	Race WHITE		
UNI)	Sat	Address N11310 E SHORE RI PEARSON, WI 54462 fety Equipment Seat Position 1FRONT SEAT-LEF Helmet Use Eye Protection	D # 25 2 , US n Duty Cras	h DRIVER/MOTORCY	Date of Birth Driver Licens STATE: Will Safety Equip SHOULDE Helmet Com Tint Complia	ment R & LAP BELT pliance	Race WHITE		
		Address N11310 E SHORE RI PEARSON, WI 54462 fety Equipment Seat Position 1FRONT SEAT-LEF Helmet Use Eye Protection	D # 25 P , US The Duty Crase FT SIDE (I	DRIVER/MOTORCY	Date of Birth Driver Licens STATE: Will Safety Equip SHOULDE Helmet Com Tint Complia	ment R & LAP BELT pliance	Race WHITE Y: UNITED STATES		
	Sat	Address N11310 E SHORE RI PEARSON, WI 54462 fety Equipment Seat Position 1FRONT SEAT-LEF Helmet Use Eye Protection Injury Ejected	D # 25 2 , US The Duty Crass FT SIDE (I	DRIVER/MOTORCY Y ENT INJURY tion Path	Date of Birth Driver Licens STATE: W Safety Equip SHOULDE Helmet Com Tint Complia Airbag NON DEPL	ment R & LAP BELT pliance	Race WHITE Y: UNITED STATES Trapped/Extricated		
	Sat	Address N11310 E SHORE RI PEARSON, WI 54462 fety Equipment Seat Position 1FRONT SEAT-LEF Helmet Use Eye Protection	D # 25 2 , US The Duty Crass FT SIDE (I	DRIVER/MOTORCY	Date of Birth Driver Licens STATE: W Safety Equip SHOULDE Helmet Com Tint Complia Airbag NON DEPL	ment R & LAP BELT pliance nce	Race WHITE Y: UNITED STATES		
	Sat	Address N11310 E SHORE RI PEARSON, WI 54462 fety Equipment Seat Position 1FRONT SEAT-LEF Helmet Use Eye Protection Injury Ejected NOT EJECTED	D # 25 P. , US The Duty Crase The T SIDE (I	DRIVER/MOTORCY Y ENT INJURY tion Path	Date of Birth Driver Licens STATE: W Safety Equip SHOULDE Helmet Com Tint Complia Airbag NON DEPL	ment R & LAP BELT pliance nce	Race WHITE Y: UNITED STATES Trapped/Extricated NOT TRAPPED		
	Sat	Address N11310 E SHORE RI PEARSON, WI 54462 fety Equipment Seat Position 1FRONT SEAT-LEF Helmet Use Eye Protection Injury Ejected NOT EJECTED Medical Transport	D # 25 P. , US The Duty Crase The T SIDE (I	DRIVER/MOTORCY Y ENT INJURY tion Path	Date of Birth Driver Licens STATE: W Safety Equip SHOULDE Helmet Com Tint Complia Airbag NON DEPL	se Number ISCONSIN COUNTR ment R & LAP BELT pliance nce OYED	Race WHITE Y: UNITED STATES Trapped/Extricated NOT TRAPPED		
	Sat	Address N11310 E SHORE RI PEARSON, WI 54462 fety Equipment Seat Position 1FRONT SEAT-LEF Helmet Use Eye Protection Injury Ejected NOT EJECTED Medical Transport NOT TRANSPORTEI	D # 25 P. , US The Duty Crase The T SIDE (I	DRIVER/MOTORCY Y ENT INJURY tion Path	Date of Birth Driver Licens STATE: W Safety Equip SHOULDE Helmet Com Tint Complia Airbag NON DEPL PLICABLE EMS Agency	se Number ISCONSIN COUNTR ment R & LAP BELT pliance nce OYED	Race WHITE Y: UNITED STATES Trapped/Extricated NOT TRAPPED EMS Run #		
	Sat	Address N11310 E SHORE RI PEARSON, WI 54462 fety Equipment Seat Position 1FRONT SEAT-LEF Helmet Use Eye Protection Injury Ejected NOT EJECTED Medical Transport NOT TRANSPORTEI Hospital	D # 25 P , US The Duty Crass The T SIDE (I	DRIVER/MOTORCY / ENT INJURY tion Path T EJECTED/NOT AP	Date of Birth Driver Licens STATE: W Safety Equip SHOULDE Helmet Com Tint Complia Airbag NON DEPL PLICABLE EMS Agency Date of Deat	se Number ISCONSIN COUNTR ment R & LAP BELT pliance nce OYED	Race WHITE Y: UNITED STATES Trapped/Extricated NOT TRAPPED EMS Run #		
	Sat	Address N11310 E SHORE RI PEARSON, WI 54462 fety Equipment Seat Position 1FRONT SEAT-LEF Helmet Use Eye Protection Injury N Ejected NOT EJECTED Medical Transport NOT TRANSPORTEI Hospital Distracted By N	D # 25 P , US The Duty Crass The T SIDE (I	PRIVER/MOTORCY V ENT INJURY tion Path T EJECTED/NOT API	Date of Birth Driver Licens STATE: W Safety Equip SHOULDE Helmet Com Tint Complia Airbag NON DEPL PLICABLE EMS Agency Date of Deat	se Number ISCONSIN COUNTR ment R & LAP BELT pliance nce OYED	Race WHITE Y: UNITED STATES Trapped/Extricated NOT TRAPPED EMS Run #		
	Sat	Address N11310 E SHORE RI PEARSON, WI 54462 fety Equipment Seat Position 1FRONT SEAT-LEF Helmet Use Eye Protection Injury Ejected NOT EJECTED Medical Transport NOT TRANSPORTEI Hospital	D # 25 P , US The Duty Crass The T SIDE (I	DRIVER/MOTORCY / ENT INJURY tion Path T EJECTED/NOT AP	Date of Birth Driver Licens STATE: W Safety Equip SHOULDE Helmet Com Tint Complia Airbag NON DEPL PLICABLE EMS Agency Date of Deat	se Number ISCONSIN COUNTR ment R & LAP BELT pliance nce OYED	Race WHITE Y: UNITED STATES Trapped/Extricated NOT TRAPPED EMS Run #		

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		Non Motorist Striking Unit #	Location				
		Prior Action					
TIND	INDIVIDUAL	Action					
		Action Other					To/From School
	1	Drug & Alcohol NO	cohol Use	Suspected Drug Use NO			
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	e		Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results		
10	001	Drug Type					
		Individual Condition APPEARED NORMAL					