19-11432

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Override	Primary Crash Document # Agency Crash Number 19-11432			DEPUTY T. SUTHERLAND				
Crash Date 09/13/2019	Crash Time 10:45 AM	Date A 09/13/		Time Arrived 10:54 AM				
Date Notified 09/13/2019	Time Notified 10:47 AM	Total U 02	Inits	Total Injured 00	Total Killed			
	Hit and Run		Work Zone	Trailer or	1	ved Reporting Threshold		
Government Property	Active School Zone School Bus Related Tags			Tags				
✓ Reportable	Crash Type DT4000 (STAND	ARD CRASH)		Amended		Secondary Crash		
Description Diagram				Re	construction B	у		
STH 136			-	Ph	Reconstruction By Photos By Additional Information NONE			
Not To Scale								
I, a sworn law enforcement ON 09-13-19 UNIT 2 WAS TRAVE 1 REAR ENDED UNIT 2 IN THE IN Cocation	LING SOUTH ON W	EST PINE STREET TU	RNING LEFT ONTO LI	NN STREET. UNIT 1 W				
INTERSECTION			Latitude 43.47475		Longitude			
ON STH136 EB			43.4/4/5	5064	-89.7687			
	ARABOO		43.47475 X Coordina 276062		-89.7687 Y Coordin 4817262	77766 ate		

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Crash	Scene
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	First	rst Harmful Event				First Harmful Event Location					
	MO	OR VEH IN TRANSP	ON ROADWAY								
	Manı	anner of Collision					Light Condition				
		FRONT TO REAR		DAYLIGHT							
	Road	Road Surface Condition(s)					actor(s)				
	DRY	,									
	Envi	onment Factor(s)									
	NOM	IE				NONE					
	Wea	ther Condition(s)									
	CLC	UDY									
	Anim	al Type				Relation To	o Trafficway	y			
						TRAFFIC	WAY - O	N ROAD			
		h Classification - Location						Jurisdiction			
		LIC PROPERTY				Access Co		ISDICTION		On a sint Otracha	
	THDa					FULL CC				Special Study	
	Withi	n Interchange Area	Junction Location		Intersectio						
	NO	j.	INTERSECTION			AY INTER	SECTION	1			
ļ	Unit	Summary									
	Unit	Status		Vehicle Ope	erating As C	assification		Unit Type			
		RANSIT		D CLASS	CLASS			TRUCK			
0		cle Type				Operating As Endorsements					
0	-	ITY TRUCK/PICKUP									
		Occs	Train/Bus # Recorded		Total # Citations Issued		Total Trail			Mat Types	
	1	0	Direction Of Troub	0			0 Speed Limit		0 Total Lanes		
_	Insurance? Direction Of Travel YES EASTBOUND		Pre	Pre CrashTire Mark		30			103		
UNIT		Harmful Event: Collision		Special Fun	Special Function			Emergency Motor Vehicle		cle Use	
∍					NO SPECIAL FUNCTION			NOT APPLICABLE			
		ic Way			Traffic Control			Traffic Control Inoperative/Missing		tive/Missing	
		DED HWY W/O TRAF ace Type		-				NO Road Grade			
			5)		Road Curvature STRAIGHT			LEVEL			
		BLACKTOP (BITUMINOUS) STRAI									
	NO										
	١	/ehicle									
		License Plate Number		Plate Type	Plate Type		St		Country of Issuance		
		EC38097			SHT TRUC	К	WI	UNITED ST	TATES		
2	01	Vehicle Identification Nur 4UZAANDU99CAE51		Make	LINER CO		Year 2009	Model			
•	0	Color	01	Body Style		JKF	2009	NO DATA I Bus Use	FU		
		GRN - GREEN			B CHASSIS	6		NOT A BUS			
	щ	Initial Contact Point		Vehicle Da	image						
UNIT	ICI	12FRONT									
5	VEHICL	Extent Of Damage		NO DAM	AGE						
	>	S NO DAMAGE Towed Due To Damage Vehicle Remove									
		NOT TOWED OPERATOR				1					
		What Driver Was Doing		Vehicle Fa	ctors						
		LEFT TURN			LICABLE						
		Driver Prior Action Other			LIVADLE						

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		Driver Actions								
	U OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER									
нI	Ξ									
	VEHICL									
5	H									
	N N									
	-									
		Owner Name		Owner Address						
		BAND BOX CLEANERS		1207 SUPERIOR AVE						
~	01	(608) 372-5642	LAUNDRTING	TOMAH, WI 54660 0826, US						
6	0	(000) 372-3042		10MAII, WI 34000 0020, 03						
		Sequence Of Events								
	01	Event MOTOR VEH IN TRANSPORT								
	0	MOTOR VEH IN TRANS	PORT							
	••	Event								
	02									
	-									
	03	Event								
	0									
		Event								
	04	Evolut								
	-									
нI		Policy Holder								
UNIT	1	Insurance Company		Organization/Company						
5		ACUITY,-A-MUTUAL-IN		BAND BOX CLEANERS LAUNDRY						
		ACOITT,-A-WOTOAL-ING	SURANCE-CO	BAND BOX CLEANERS LAUNDRI						
		Individual								
	1	Driver		Citations Issued	Sex					
		MARTIN L BLAKE		0	MALE					
	L	(608) 343-6149								
	٩L			Date of Birth	Race					
нI	Ы				WHITE					
	NDIVIDUAI	Address		Driver License Number						
	Δ	E10460C HANGER CT								
	Ζ	BARABOO, WI 53913 ,	US	STATE: WISCONSIN COUNTRY: UNITED STATES						
	_	,								
	_	On Du	ity Crash	Safety Equipment						
	Sat	fety Equipment								
		Seat Position		SHOULDER & LAP BELT						
				SHOULDER & EAF BEET						
			SIDE (DRIVER/MOTORCY							
		Helmet Use		Helmet Compliance						
		Eye Protection		Tint Compliance						
		-								
	_	loiury	Severity	Airbag						
2	001	Injury No. A	PPARENT INJURY	-						
-	0			NON DEPLOYED						
		Ejected	Ejection Path		Trapped/Extricated					
		NOT EJECTED	NOT EJECTED/NOT APP	LICABLE	NOT TRAPPED					
		Medical Transport	1	EMS Agency Identifier	EMS Run #					
		NOT TRANSPORTED		5 <i>y</i>						
	Time of Death									
		Hospital		Date of Death	Time of Death					
		Distrac	cted By Source							
		Distracted By NOT	APPLICABLE (NOT DISTRA	CTED)						
		Distracted By Action								
		NOT DISTRACTED								
		Non Motorist	g Unit # Location							
		Non wolunsi								
		Prior Action								

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		Action							
	JAL								
UNIT	INDIVIDUAL								
	NDI								
	_								
		Action Other							To/From School
		Sus	pected Alcohol U	se	Suspected Drug Use				
	L	Drug & Alcohol No			NO				
		Alcohol Test Given Alcohol Test Ty TEST NOT GIVEN		Alcohol Test Type	<u>)</u>	Alcohol Test Results			
		Drug Test Given TEST NOT GIVEN	Drug Test Type			Drug Test Resul	ts		
01	001	Drug Type							
	•	Individual Condition							
		t Summary Status		V	ehicle Operating As Class	ification	Unit Type		
		RANSIT			CLASS		AUTOMOBILE		
05		cle Type SENGER CAR				Operating A	s Endorsem	ents	
Ŭ			Train/Bus # Re	corded T	otal # Citations Issued	ilers	Total HazM	lat Types	
	1			0		0	0		
F	Insul YES	ance?	Direction Of Tra		Pre CrashTire Mark	Speed Li 30		Total Lanes 2	
UNIT		Harmful Event: Collision Wi			pecial Function	Emergency NOT APP	Motor Vehic	le Use	
		ic Way DED HWY W/O TRAFFI			raffic Control	Traffic Control Inoperative/Missing NO			
		ace Type	C DANNEN		coad Curvature	Road Grade			
		CKTOP (BITUMINOUS))	S	TRAIGHT		LEVEL		
	Truc NO	k Bus or HazMat							
		Vehicle							
		License Plate Number 440WBV			Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES		
02	~	Vehicle Identification Numb		1	Make	Year	Model		
0	02	5YFBURHE2FP212317	,		TOYOTA 2015		COROLLA		
		Color RED - RED			Body Style SD - SEDAN	Bus Use NOT A BUS			
L	Щ	Initial Contact Point 6REAR		,	Vehicle Damage				
UNIT	VEHICL	Extent Of Damage			6REAR				
	2	MINOR DAMAGE Towed Due To Damage			Vehicle Removed By				
		NOT TOWED			OPERATOR				
		What Driver Was Doing		'	Vehicle Factors				
		LEFT TURN Driver Prior Action Other		I	NOT APPLICABLE				

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UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTION								
02	02	Owner Name PATEL KAUSHIK (251) 593-5704		Owner Address 1105 SILVER DR # 2 BARABOO, WI 53913 , US						
	ļ	Sequence Of Events								
	01	Event								
	02	Event								
	03	Event								
	04	Event								
н	I	Policy Holder								
UNIT		Insurance Company AUTO-OWNERS-INS-CO		Individual PATEL KAUSHIK						
		ndividual								
	1			Citations Issued	Sex					
	AL	UTTAM A PATEL (251) 593-5704		0 Date of Birth	MALE Race					
⊢∣	DO			Date of Diffi	ASIAN					
UNIT	INDIVIDUAL	Address 1105 SILVER DR # 2 BARABOO, WI 53913, U	JS	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sat	On Dut	y Crash	Safety Equipment						
	Uu.	Seat Position		SHOULDER & LAP BELT						
		1FRONT SEAT-LEFT SI	DE (DRIVER/MOTORCY							
		Helmet Use		Helmet Compliance						
		Eye Protection		Tint Compliance						
02	002	Injury S	Severity	Airbag						
•	0	Injury NO APPARENT INJURY		NON DEPLOYED						
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APP	LICABLE	Trapped/Extricated NOT TRAPPED					
		Medical Transport		EMS Agency Identifier	EMS Run #					
		NOT TRANSPORTED								
		Hospital		Date of Death	Time of Death					
		Distracted By NOT A	ted By Source APPLICABLE (NOT DISTRA	CTED)						
		Distracted By Action NOT DISTRACTED								
		Non Motorist	Unit # Location							
		Prior Action								

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UNIT	INDIVIDUAL	Action					
	L	Action Other Suspected Alco Drug & Alcohol NO	hol Use	Suspected Drug Use			To/From School
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type			Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results		
02	002	Drug Type					
		Individual Condition APPEARED NORMAL					