

6TL0BMQKWC

19-11888

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

6TL0BMQKWC

Document Number Override <b>6TL09426SX</b>		Primary Crash Document #	Agency Crash Number <b>19-11888</b>	Investigating Officer/Deputy <b>DEPUTY A. KULAS</b>	
Crash Date <b>09/23/2019</b>		Crash Time <b>04:50 PM</b>	Date Arrived <b>09/23/2019</b>	Time Arrived <b>04:54 PM</b>	
Date Notified <b>09/23/2019</b>		Time Notified <b>04:51 PM</b>	Total Units <b>03</b>	Total Injured <b>00</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 type="checkbox"/> Reporting Threshold
<input checked="" 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 <p>HY 136</p> <p>NOT TO SCALE</p>	Reconstruction By
	Photos By
	Additional Information <b>NONE</b>

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

UNIT 1 WAS NORTHBOUND IN THE PARKING LOT OF FESTIVAL FOODS. UNIT 1 WAS STOPPED AT A STOP SIGN FOR VEHICLES TURNING ONTO HY 136/LINN ST. UNIT 1 MADE A RIGHT(EAST) HAND TURN IN FRONT OF UNIT 2 THAT WAS EAST BOUND ON HY 136. UNIT 1 AND 2 COLLIDED. UNIT 2 ENTERED THE SOUTH CURB AND STRUCK A HY 136 SIGN. THE SIGN FELL OVER AND STRUCK UNIT 3 WHICH WAS LEGALLY PARKED IN THE PARKING LOT CAUSING DAMAGE TO THE WINDSHIELD.

ERROR IN NARRATIVE.

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

Location

ON STH33 EB 468 FT W OF STH136 EB IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY	Latitude <b>43.474762531</b>	Longitude <b>-89.770600425</b>
	X Coordinate <b>275914.625</b>	Y Coordinate <b>4817268</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>08--FRONT TO SIDE</b>		Light Condition <b>DAYLIGHT</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>TOW TRUCK</b>	
Date Initial Lane/Rd Closed <b>09/23/2019</b>	Time Initial Lane/Rd Closed <b>04:54 PM</b>		
Date All Lanes Open <b>09/23/2019</b>	Time All Lanes Open <b>07:49 PM</b>	Date Scene Cleared <b>09/23/2019</b>	Time Scene Cleared <b>07:49 PM</b>

Unit Summary

UNIT	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>10</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>STOP SIGN</b>		Traffic Control Inoperative/Missing <b>NO</b>		
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>	Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>		
	Truck Bus or HazMat <b>NO</b>					
	<b>Vehicle</b>					
		License Plate Number <b>745TNJ</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
	Vehicle Identification Number <b>JTJBC1BA2D2059148</b>	Make <b>LEXUS</b>	Year <b>2013</b>	Model <b>RX 450H</b>		
	Color <b>WHI - WHITE</b>	Body Style <b>UT - SPORT UTILITY VEHICLE</b>		Bus Use <b>NOT A BUS</b>		

6TLOBMQKWC

19-11888

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

UNIT VEHICLE	Initial Contact Point <b>11--LEFT FRONT CORNER</b>		Vehicle Damage	
	Extent Of Damage <b>DISABLING DAMAGE</b>		<b>1--RIGHT FRONT CORNER, 11--LEFT FRONT CORNER, 12--FRONT</b>	
	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>MIKES TOWING</b>	
	What Driver Was Doing <b>RIGHT TURN</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
UNIT VEHICLE	Driver Actions <b>FAILED TO YIELD RIGHT-OF-WAY, LOOKED BUT DID NOT SEE</b>			
	Owner Name <b>TIEN DINH (608) 345-0706</b>		Owner Address <b>S4185 WHISPERING PINES DR BARABOO, WI 53913 , US</b>	
UNIT 01	<b>Sequence Of Events</b>			
	09	Event <b>MOTOR VEH IN TRANSPORT</b>		
	10	Event		
	11	Event		
	12	Event		
UNIT 01	<b>Policy Holder</b>			
	Insurance Company <b>STATE-FARM-GENERAL-INS-CO</b>		Individual <b>TIEN DINH</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>AARON LE (608) 477-7020</b>		Citations Issued <b>1</b>	Sex <b>MALE</b>
	Address <b>S4185 WHISPERING PINES DR BARABOO, WI 53913 , US</b>		Date of Birth	Race <b>ASIAN</b>
	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>		Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</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>	

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT	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>			
01	<b>Violations</b>			
	UTC Number <b>BB338455</b>	Issue To? <b>001</b>	Statute Number <b>346.18(3)</b>	Description <b>FAIL/YIELD RIGHT/WAY FROM STOP SIGN</b>

Unit Summary

UNIT	02	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>TRUCK</b>		
		Vehicle Type <b>UTILITY TRUCK/PICKUP TRUCK</b>				Operating As Endorsements		
	Total Occs <b>4</b>		Train/Bus # Recorded		Total # Citations Issued <b>0</b>		Total Trailers <b>0</b>	
	Insurance? <b>YES</b>		Direction Of Travel <b>EASTBOUND</b>		<input type="checkbox"/> Pre Crash Tire Mark		Speed Limit <b>30</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>LEVEL</b>			
	Truck Bus or HazMat <b>NO</b>							

UNIT	VEHICLE	<b>Vehicle</b>				
		License Plate Number <b>DH11883</b>		Plate Type <b>LTK - LIGHT TRUCK</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>1FTWW33P16EC48224</b>		Make <b>FORD</b>	Year <b>2006</b>	Model <b>F350 SUPER</b>
		Color <b>BLU - BLUE</b>		Body Style <b>PK - PICKUP</b>		Bus Use <b>NOT A BUS</b>
		Initial Contact Point <b>5--RIGHT REAR CORNER</b>		Vehicle Damage		
		Extent Of Damage <b>DISABLING DAMAGE</b>		<b>5--RIGHT REAR CORNER, 6--REAR, 7--LEFT REAR CORNER, UNDERCARRIAGE</b>		

6TL0BMQKWC

19-11888

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

UNIT VEHICLE	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>	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
02	Owner Name <b>SCOTT STIEMKE (608) 477-7020</b>		Owner Address <b>11348 KLANG DR CAZENOVIA, WI 53924 , US</b>	
	<b>Sequence Of Events</b>			
01	Event <b>MOTOR VEH IN TRANSPORT</b>			
	Event <b>TRAFFIC SIGN POST</b>			
	Event			
	Event			
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>AMERICAN-FAMILY-INS-CO</b>		Individual <b>SCOTT STIEMKE</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>SCOTT STIEMKE (608) 477-7020</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
	Address <b>11348 KLANG DR CAZENOVIA, WI 53924 , US</b>		Date of Birth	Race <b>WHITE</b>
			Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
02	<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	

<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>Individual</b>					
		Passenger <b>SAMUEL SCHMUCKER</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>			
		Address <b>S2107 BIRDD RD LA VALLE, WI 53941 , US</b>	Date of Birth	Race <b>WHITE</b>			
		Driver License Number					
		<b>UNIT</b>	<b>INDIVIDUAL</b>	<b>Safety Equipment</b>	On Duty Crash	Safety Equipment	
Seat Position <b>3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER</b>	<b>SHOULDER &amp; LAP BELT</b>						
Helmet Use	Helmet Compliance						
Eye Protection	Tint Compliance						
<b>02</b>	<b>003</b>			<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		
				Distracted By Action			
<b>Non Motorist</b>	Striking Unit #	Location					
Prior Action							

UNIT	INDIVIDUAL	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>Individual</b>				
		Passenger <b>RAYMOND SCHMUCKER</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>		
		Address <b>E5624 SAND HILL RD LA VALLE, WI 53941 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>			
UNIT	INDIVIDUAL	<b>Safety Equipment</b>	On Duty Crash	Safety Equipment		
		Seat Position <b>6--SECOND SEAT-RIGHT SIDE</b>	<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			
		Distracted By Action				
UNIT	INDIVIDUAL	<b>Non Motorist</b>	Striking Unit #	Location		
		Prior Action				

UNIT	INDIVIDUAL	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>Individual</b>			
		Passenger <b>MERLIN BONTRAGER</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>	
		Date of Birth		Race <b>WHITE</b>	
Address <b>E40271 PEERSON RD LA VALLE, WI 53941 , US</b>		Driver License Number			
UNIT	INDIVIDUAL	<b>Safety Equipment</b>	On Duty Crash	Safety Equipment	
		Seat Position <b>4--SECOND SEAT-LEFT SIDE(MOTORCYCLE/BI</b>	<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		
		Distracted By Action			
UNIT	INDIVIDUAL	<b>Non Motorist</b>	Striking Unit #	Location	
		Prior Action			



6TLOBMQKWC

19-11888

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

UNIT	INDIVIDUAL	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>				
		02	005			

**Unit Summary**

UNIT	03	Unit Status <b>LEGALLY PARKED</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>	
		Vehicle Type <b>PASSENGER CAR</b>				Operating As Endorsements	
		Total Occs <b>0</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>NOT ON ROADWAY</b>	<input type="checkbox"/> <b>Pre Crash Tire Mark</b>	Speed Limit <b>10</b>	Total Lanes <b>2</b>	
		Most Harmful Event: Collision With <b>TRAFFIC SIGN POST</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
		Traffic Way <b>PARKING LOT OR PRIVATE PROPERTY</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>LEVEL</b>	
		Truck Bus or HazMat <b>NO</b>					

UNIT	VEHICLE	<b>Vehicle</b>			
		License Plate Number <b>AAT5398</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>3LNHL2GC3BR756717</b>	Make <b>LINCOLN</b>	Year <b>2011</b>	Model <b>MKZ</b>
		Color <b>BLU - BLUE</b>	Body Style <b>4D - 4DR</b>		Bus Use <b>NOT A BUS</b>
		Initial Contact Point <b>NON-COLLISION</b>	Vehicle Damage		
		Extent Of Damage <b>NO DAMAGE</b>	<b>NO DAMAGE</b>		
		Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OWNER</b>		
		What Driver Was Doing <b>LEGALLY PARKED</b>	Vehicle Factors		
		Driver Prior Action Other	<b>NOT APPLICABLE</b>		

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT	VEHICLE	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
		03	03	Owner Name <b>MICHAELA SWIFT</b> (608) 769-7534	Owner Address <b>1875 W PINE ST APT 412</b> <b>BARABOO, WI 53913 , US</b>
<b>Sequence Of Events</b>					
UNIT	01	Event <b>TRAFFIC SIGN POST</b>			
	02	Event			
	03	Event			
	04	Event			
<b>Policy Holder</b>					
UNIT	Insurance Company <b>STATE-FARM-GENERAL-INS-CO</b>		Individual <b>MICHAELA SWIFT</b>		
	<b>Property Owner</b>				
PROP OWNER	01	Government <b>SAUK COUNTY HWY DEPT</b> (608) 356-3855	Address <b>620 STH 136</b> <b>PO BOX 26</b> <b>BARABOO, WI 53913 , US</b>		
<b>Fixed Objects Struck</b>					
	01	Striking Unit <b>02</b>	Struck Object <b>TRAFFIC SIGN POST</b>	Structure Number	Damage Tag Number <b>337598</b>