

6TL0BMQKWG

19-13564

# 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>6TL09426T7</b>		Primary Crash Document #	Agency Crash Number <b>19-13564</b>	Investigating Officer/Deputy <b>DEPUTY A. KULAS</b>	
Crash Date <b>10/31/2019</b>		Crash Time <b>05:00 PM</b>	Date Arrived <b>10/31/2019</b>	Time Arrived <b>05:07 PM</b>	
Date Notified <b>10/31/2019</b>		Time Notified <b>05:00 PM</b>	Total Units <b>02</b>	Total Injured <b>02</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 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 <b>SAUK COUNTY SHERIFF</b>
	Photos By <b>A KULAS AND T LOHR</b>
	Additional Information <b>PHOTOS, RECONSTRUCTION</b>

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

UNIT 1 WAS WESTBOUND ON CITY VIEW RD. UNIT 1 CROSSED THE CENTER LINE. UNIT 2 WAS EAST BOUND ON CITY VIEW RD. UNIT 2 ATTEMPTED AN EVASIVE MANEUVER AND SWERVED TO THE NORTH (INTO THE WB LANE OF TRAVEL) IN AN ATTEMPT TO AVOID UNIT 1. UNIT 1 AND 2 STRUCK AT AN ANGLE AND BOTH ROTATED CLOCKWISE. UNIT 2 CAME TO A REST IN THE NORTH DITCH FACING SOUTH. UNIT 1 CAME TO REST IN SOUTH DITCH FACING NORTH.

UPDATED INFORMATION/CORRECTIONS

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Location

Table with location details: ON CITY VIEW RD, 545 FT E, OF JEFFERSON ST, IN THE TOWN OF BARABOO, IN SAUK COUNTY. Includes Latitude (43.489117583), Longitude (-89.727790079), X Coordinate (279429.53125), Y Coordinate (4818747.5), and Structure Type (NO STRUCTURE).

Crash Scene

Table with crash scene details: First Harmful Event (MOTOR VEH IN TRANSPORT), Manner of Collision (03--FRONT TO FRONT), Road Surface Condition (DRY), Environment Factor (NONE), Weather Condition (CLEAR), Animal Type, Crash Classification (PUBLIC PROPERTY), Intersection Type (NOT AN INTERSECTION), Closure Type (FULL CLOSURE), and Date/Time of closure.

Unit Summary

Table with unit summary details: Unit Status (IN TRANSIT), Vehicle Type ((SPORT) UTILITY VEHICLE), Insurance (YES), Direction of Travel (EASTBOUND), Pre Crash Tire Mark (checked), and Vehicle details including License Plate (MT10DEW), Make (JEEP), Year (2013), and Color (RED - RED).

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UNIT VEHICLE	Initial Contact Point <b>12--FRONT</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>BILLS TOWING</b>	
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
UNIT VEHICLE	Driver Actions <b>FAILED TO KEEP IN DESIGNATED LANE</b>			
	Owner Name <b>FRIEDE AND ASSOCIATES LLC (608) 524-4383</b>		Owner Address <b>500 UTILITY LN REEDSBURG, WI 53959 , US</b>	
UNIT 01	<b>Sequence Of Events</b>			
	01	Event <b>MOTOR VEH IN TRANSPORT</b>		
	02	Event		
	03	Event		
	04	Event		
UNIT 01	<b>Policy Holder</b>			
	Insurance Company <b>CENTURY-NATIONAL-INS-CO</b>		Organization/Company <b>FRIEDE AND ASSOCIATES LLC</b>	
UNIT INDIVIDUAL 01	<b>Individual</b>			
	Driver <b>ZACHARY JAMES DOROW (608) 964-1622</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
	Address <b>537 BABB AVE REEDSBURG, WI 53959 , US</b>		Date of Birth	Race <b>WHITE</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>DEPLOYED-FRONT</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>UNKNOWN</b>		

UNIT	INDIVIDUAL	Distracted By Action <b>OTHER ACTION (LOOKING AWAY FROM TASK ETC)</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 GIVEN</b>	Alcohol Test Type <b>BLOOD</b>	Alcohol Test Results <b>PENDING</b>
		Drug Test Given <b>TEST GIVEN</b>	Drug Test Type <b>BLOOD</b>	Drug Test Results <b>PENDING</b>
		Drug Type		
		Individual Condition <b>APPEARED NORMAL</b>		

**Unit Summary**

UNIT	02	Unit Status <b>IN TRANSIT</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>3</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 checked="" type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>35</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>HILLCREST</b>	
		Truck Bus or HazMat <b>NO</b>				

UNIT	VEHICLE	<b>Vehicle</b>			
		License Plate Number <b>964HHN</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>1G1PF5SC3C7360563</b>	Make <b>CHEVROLET</b>	Year <b>2012</b>	Model <b>CRUZE</b>
		Color <b>BLU - BLUE</b>	Body Style <b>SD - SEDAN</b>		Bus Use <b>NOT A BUS</b>
		Initial Contact Point <b>1--RIGHT FRONT CORNER</b>	Vehicle Damage		
		Extent Of Damage <b>DISABLING DAMAGE</b>	<b>ALL AREAS</b>		
		Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>	Vehicle Removed By <b>MIKES TOWING</b>		

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UNIT VEHICLE	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>MOLLY M SCANLAN (608) 581-0325</b>	Owner Address <b>2119 SURREY LN BARABOO, WI 53913 , US</b>	
	<b>Sequence Of Events</b>		
01 02 03 04	Event <b>MOTOR VEH IN TRANSPORT</b>		
	Event <b>EMBANKMENT</b>		
	Event		
	Event		
UNIT	<b>Policy Holder</b>		
	Insurance Company <b>MT-MORRIS-MUTUAL-INS-CO</b>	Individual <b>MOLLY SCANLAN</b>	
UNIT INDIVIDUAL	<b>Individual</b>		
	Driver <b>OLIVER JOHN SCANLAN (608) 581-0325</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>
		Date of Birth	Race <b>WHITE</b>
	Address <b>2119 SURREY LN BARABOO, WI 53913 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
02 002	<b>Safety Equipment</b>	On Duty Crash	Safety Equipment
	Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>	<b>NONE USED - VEHICLE OCCUPANT</b>	
	Helmet Use	Helmet Compliance	
	Eye Protection	Tint Compliance	
	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>DEPLOYED-FRONT</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	
	Prior Action		

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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 GIVEN</b>	Alcohol Test Type <b>BLOOD</b>	Alcohol Test Results <b>PENDING</b>
	Drug Test Given <b>TEST GIVEN</b>	Drug Test Type <b>BLOOD</b>	Drug Test Results <b>PENDING</b>
	Drug Type		
	Individual Condition <b>APPEARED NORMAL</b>		
	<b>Individual</b>		
	Passenger <b>FINLEY J SCANLAN (608) 581-0325</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>
	Address <b>2119 SURREY LN BARABOO, WI 53913 , US</b>	Date of Birth <b>WHITE</b>	
UNIT INDIVIDUAL	Driver License Number		
	<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>SUSPECTED SERIOUS INJUR</b>	Airbag <b>DEPLOYED-SIDE</b>
	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>TRAPPED/EXTRICATED</b>
	Medical Transport <b>EMS AIR</b>	EMS Agency Identifier <b>6001285</b>	EMS Run #
	Hospital <b>UNIVERSITY OF WI HOSPITALS &amp; CLINICS AUT</b>	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			

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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>GEORGE T STELLING (608) 963-4298</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>	
		Address <b>115 10TH ST BARABOO, WI 53913 , US</b>		Date of Birth <b>WHITE</b>	
UNIT	INDIVIDUAL	Driver License Number			
		<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>Injury</b>	Injury Severity <b>SUSPECTED SERIOUS INJUR</b>	Airbag <b>DEPLOYED-FRONT</b>	
		Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>TRAPPED/EXTRICATED</b>	
		Medical Transport <b>EMS AIR</b>	EMS Agency Identifier <b>6001285</b>	EMS Run #	
		Hospital <b>UNIVERSITY OF WI HOSPITALS &amp; CLINICS AUT</b>	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			

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<b>UNIT</b>	<b>INDIVIDUAL</b>	Action				
		Action Other		To/From School		
	<b>02</b>	<b>004</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>			