19-14036

WISCONSIN MOTOR VEHICLE CRASH REPORT

Document Number Override	Primary Crash	3,			ng Officer/Deputy W. VERTEIN					
Crash Date	Date Crash Time Date		Date Ar			Time Arrived				
11/11/2019	11:52 AM		11/11/			12:08 PM	-			
Date Notified 11/11/2019	Time Notified 11:55 AM		Total U	nits	Total I		T (otal Killed 0		
On Emergency Hit	and Run	Lane Clos			Zone	Trailer	or Tov	wed	Reporting Threshold	
Government Property		chool Zone	School NO	Bus Related		Tags				
✓ Reportable	Crash Type DT4000 (STA	NDARD CRASI	1)			Amend	led		Secondary Crash	
Description										
Diagram							Recon	struction I	Ву	
Not to scale		-								
							Photos	s By		
				_			Additio NONE	onal Inforn E	nation	
	South S	hore Rd								
Ski Hi Rd		STO		-						
✓ I, a sworn law enforceme	nt officer, agr	ee that I have n	ot added	any CJIS	data in this	report.				
ON THE DESCRIBED DATE, TIME MAKE A RIGHT TURN, HE SLID II									ATTEMPTING TO	
Location										
INTERSECTION				l	_atitude			Longitud	e	
ON SKIHI RD AT S SHORE RD					43.420066021	1		-89.748		
IN THE TOWN OF BARABOO IN SAUK COUNTY	•				Coordinate 277492.5625			Y Coordi 481113		
					Structure Type NO STRUCTO	JRE				

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WISCONSIN MOTOR VEHICLE CRASH REPORT

First Harmful Event Location

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

Crash Scene First Harmful Event

	_	TOR VEH IN TRANSF	PORT	ON ROADWAY							
		ner of Collision				Light Condition					
		SIDESWIPE/OPPOSI	ITE DIRECTION			DAYLIGHT					
	Road	d Surface Condition(s)				Roadway Factor(s)					
		OW, ICE									
	Envi	Environment Factor(s)									
	WE	ATHER CONDITIONS	NONE								
	Wea	ther Condition(s)									
	CLC	OUDY									
	Anim	ial Type		Relation T		ay ON ROAD					
	Cras	h Classification - Locatio	n			Crash Clas	sification	- Jurisdiction			
	_	BLIC PROPERTY						RISDICTION			
	Triba	al Land				Access Co				Special Study	
	\\/ith	in Interchange Area	Junction Location		Intersectio		INOL				
	NO	in interchange Area	INTERSECTION			SECTION					
	Unit	t Summary =			•						
		Status		Vehicle Ope	erating As C	lassification		Unit Type			
		RANSIT	D CLASS				TRUCK				
01		cle Type						Operating As Endorsements			
0		LITY TRUCK/PICKUF									
		l Occs	Train/Bus # Recorded	Total # Cita	tions Issued		Total Traile			Mat Types	
	1	0	Direction Of Travel	0			Speed Limit		Total Lanes		
_	YES	ance?	SOUTHBOUND	Pre	Pre CrashTire Mark		35		2	es	
UNIT		: Harmful Event: Collision		Special Fun	Special Function			Emergency	icle Use		
O		TOR VEH IN TRANSF		NO SPEC	NO SPECIAL FUNCTION			NOT APPLICABLE			
	Traff	ic Way		Traffic Cont	Traffic Control NO CONTROL Road Curvature CURVE LEFT			Traffic Control Inoperative/Missing		tive/Missing	
		D-WAY, NOT DIVIDE	D	NO CONT				NO			
		асе Туре						Road Grade			
		CKTOP (BITUMINO	US)	CURVE L				DOWNHIL	<u>.L</u>		
	Truc NO	k Bus or HazMat									
	'	Vehicle		In . T			01	10tu-			
		License Plate Number LT3903		Plate Type	SHT TRUC	St WI		Country of Is UNITED S			
		Vehicle Identification No	ımher	Make	oni ikuc	· N	Year	Model	STATES		
6	6	1FTPW14V67FB110	FORD			2007	F150				
		Color GRN - GREEN			Body Style PK - PICKUP			Bus Use NOT A BUS			
	ш	Initial Contact Point		Vehicle Da							
╘	딩	11LEFT FRONT C	ORNER								
UNIT	VEHICL	Extent Of Damage		10LEFT	SIDE FRO	ONT, 11L	EFT FR	ONT CORNE	R, 12FR	RONT	
_	>	FUNCTIONAL DAM	AGE								
		Towed Due To Damage		Vehicle Re	,						
		NOT TOWED		OPERAT							
		What Driver Was Doing		Vehicle Fa	ctors						
		RIGHT TURN Driver Prior Action Other	or .	NOT APP	PLICABLE						
		PHASE ELION WORRD OTHE	71								

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WISCONSIN MOTOR VEHICLE CRASH REPORT

Щ	SPEED TOO FAST/C	UND								
C										
I										
VE										
	Owner Name			Owner Address						
		GERS		S7151 MARSH RD						
0	(608) 963-1105			MERRIMAC, WI 53561	1 , US					
	Seguence Of Eve	nte								
ì		1113								
01	RIGHT TURN									
	Event									
02	MOTOR VEH IN TRANSPORT									
33	Event									
	_									
4	Event									
0										
	Policy Holder									
	Insurance Company			Individual						
	PROGRESSIVE-ADVANCED-INSURANCE-CO			MICHAEL ROGERS						
	Individual									
				Citations Issued	Sev					
		GERS								
AL	(608) 963-1105									
JU,				Date of Diffi	WHITE					
Z	Address			Driver License Number						
	S7151 MARSH RD MERRIMAC, WI 53561 , US			Priver Froetise Mailinei						
Z				STATE: WISCONSIN COUNTRY: UNITED STATES						
	 Or	n Duty Crash		Safety Equipment						
Saf	ety Equipment	. 201, 010011		Curciy Equipment						
				SHOULDER & LAP RELT						
				SHOULDER WEAR BEET						
				Helmet Compliance						
	Helmet Use			Heimer Compliance						
	Eve Protection			Tint Compliance						
	_, _ , _ , _ , _ , _ , _ , _ , _ , _ ,			Thit Compliance						
_	l Ini	urv Severitv		Airbag						
00	Injury N	O APPARENT	IN.IURY	<u> </u>						
				1	Trapped/Extricated					
	· ·	-		ICABLE						
		1.101 201	-07ED/HOT ALLE							
)		mo / igonoy idonunei	LIVIO IXIII IF					
				Date of Death	Time of Death					
	Hospital	ноѕрітаі			Time of Death					
	Hospital									
		stracted By Sour	<u></u>							
	Di	stracted By Sour	ce LE (NOT DISTRA)	CTED)						
	Distracted By No.	stracted By Sour	ce LE (NOT DISTRA)	CTED)						
	Distracted By Distracted By Action	stracted By Sour	CE LE (NOT DISTRAC	CTED)	I					
	Distracted By Action NOT DISTRACTED	OT APPLICAB	LE (NOT DISTRA	CTED)						
	Distracted By Notion NOT DISTRACTED	stracted By Sour	Location	CTED)						
	Distracted By No No No No Motorist	OT APPLICAB	LE (NOT DISTRA	CTED)						
	Distracted By Notion NOT DISTRACTED	OT APPLICAB	LE (NOT DISTRA	L CTED)						
	INDIVIDUAL _ 04 03 02 01 01 VEHICL	Owner Name MICHAEL JOHN ROG (608) 963-1105 Sequence Of Eve Event RIGHT TURN Event MOTOR VEH IN TRA Event Policy Holder Insurance Company PROGRESSIVE-ADV Individual Driver MICHAEL JOHN ROG (608) 963-1105 Address S7151 MARSH RD MERRIMAC, WI 5356 Safety Equipment Seat Position 1FRONT SEAT-LEF Helmet Use Eye Protection Injury Ejected NOT EJECTED Medical Transport NOT TRANSPORTEI	SPEED TOO FAST/COND Owner Name MICHAEL JOHN ROGERS (608) 963-1105 Sequence Of Events Event RIGHT TURN Event MOTOR VEH IN TRANSPORT Event Folicy Holder Insurance Company PROGRESSIVE-ADVANCED-INSUI Individual Driver MICHAEL JOHN ROGERS (608) 963-1105 Address S7151 MARSH RD MERRIMAC, WI 53561 , US Safety Equipment Seat Position 1—FRONT SEAT-LEFT SIDE (DRIVI Helmet Use Eye Protection Injury NO APPARENT Ejected NOT EJECTED Medical Transport NOT TRANSPORTED	Owner Name MICHAEL JOHN ROGERS (608) 963-1105 Sequence Of Events Event RIGHT TURN Event Event Event Event Policy Holder Insurance Company PROGRESSIVE-ADVANCED-INSURANCE-CO Individual Driver MICHAEL JOHN ROGERS (608) 963-1105 Address S7151 MARSH RD MERRIMAC, WI 53561 , US Safety Equipment Seat Position 1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY Helmet Use Eye Protection Injury Severity NO APPARENT INJURY Ejected NOT EJECTED Medical Transport NOT TRANSPORTED	SPEED TOO FAST/COND Owner Name MICHAEL JOHN ROGERS (608) 963-1105 Sequence Of Events Event RIGHT TURN Event MOTOR VEH IN TRANSPORT Event Insurance Company PROGRESSIVE-ADVANCED-INSURANCE-CO Individual Driver MICHAEL JOHN ROGERS (608) 963-1105 Address S7151 MARSH RD MICHAEL ROGERS Individual Driver MICHAEL JOHN ROGERS (608) 963-1105 Address S7151 MARSH RD MERRIMAC, WI 53561 Injury No Duty Crash Safety Equipment Seat Position 1-FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY Helmet Use Eye Protection Injury Severity NO APPARENT INJURY NO APPARENT INJURY RICHAEL NOT EJECTED NOT EJECTED Medical Transport NOT EJECTED/NOT APPLICABLE EMS Agency Identifier	Owner Name				

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LINO	INDIVIDUAL	Action								
		Action Other								To/From School
	L	Orug & Alcohol NO	pected Alcohol U	se	Suspected Drug Use NO					
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type)			Alcohol Test	t Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug 7	Test Results			
01	00	Drug Type	Drug Type							
		Individual Condition								
		APPEARED NORMAL								
		Summary -								
		Status RANSIT			ehicle Operating As Class		Unit Type TRUCK			
02	Vehi	cle Type			3 32.100			Operating As Endorsements		
0		LITY TRUCK/PICKUP TO Occs	corded T	otal # Citations Issued	Total Trail	ilers Total HazMat Types				
	1	TOCCS	Trailip Bus # Tto	•	0 0			515	0	ас турез
_	Insur	ance?	Direction Of Tra	_	Pre CrashTire Speed Lir Mark 45			2		s
UNIT		: Harmful Event: Collision Wi			Special Function NO SPECIAL FUNCTION			NOT APPI		le Use
		ic Way D-WAY, NOT DIVIDED			Traffic Control STOP SIGN			Traffic Control Inoperative/Missing NO		
		ace Type			Road Curvature			Road Grade		
		CKTOP (BITUMINOUS))	S	STRAIGHT			LEVEL		
	Truc NO	k Bus or HazMat								
	'	Vehicle								
		License Plate Number DG77137			Plate Type St			Country of Issuance		
~		Vehicle Identification Numb	per		HTK - HEAVY TRUCK WI Make Year			UNITED STATES Model		
02	05	1FTWX31RX8EC65978	3		FORD		2008	F350 SUPE	R	
		Color BRZ - BRONZE			Body Style PK - PICKUP			Bus Use NOT A BUS	S	
	щ	Initial Contact Point			Vehicle Damage					
UNIT	걸	8LEFT SIDE REAR								
ō	VEHICL	Extent Of Damage FUNCTIONAL DAMAG	iΕ		8LEFT SIDE REAR					
		Towed Due To Damage			Vehicle Removed By					
		NOT TOWED What Driver Was Doing			OPERATOR Vehicle Factors					
		SLOW/STOPPING								
		Driver Prior Action Other			NOT APPLICABLE					

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Driver Actions									
	Щ	NO CONTRIBUTIN	IG ACTION								
╘	VEHICL										
LNO	Ĭ										
ر ر	Æ										
	_										
		Owner Name			Owner Address						
		LOUISE DIANE CF	NAMPIC		E11758 COUNTY ROA	ום מע					
07	02	(608) 356-9502	VIONALA		BARABOO, WI 53913						
0	0	(000) 000 0002			BARABOO, WI GOOTO	, 00					
		Sequence Of Ev	vents								
		Event									
	01	MOTOR VEH IN T	RANSPORT								
		Event									
	02	LVCIII									
		F									
	03	Event									
)										
	04	Event									
	0										
_		Policy Holder									
LIND	Ī	Insurance Company			Individual						
5		AUTO-OWNERS-INS-CO			LOUISE CRISMAN						
					EOOISE CITISMAN						
		Individual									
		Driver			Citations Issued	;	Sex				
	_	LOUISE DIANE CF	RISMAN		0		FEMALE				
	١A	(608) 356-9502			Date of Birth		Race				
\vdash	ב					1	WHITE				
	INDIVIDUAL	Address			Driver License Number	I					
⊃	⊒	E11758 COUNTY ROAD DL BARABOO, WI 53913 , US									
	Z				STATE: WISCONSIN COUNTRY: UNITED STATES						
			On Duty Crash		Safety Equipment						
	Saf	fety Equipment	On Buty Graon		Calciy Equipment						
					SHOULDER & LAP BELT						
		Seat Position			SHOULDER & LAP BEL	-1					
		1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY									
		Helmet Use			Helmet Compliance						
		Eye Protection			Tint Compliance						
		_									
07	005	Indiana.	Injury Severity		Airbag						
0	ŏ	Injury	NO APPARENT	INJURY	NON DEPLOYED						
		Ejected	Ejection F	Path	_		Trapped/Extricated				
		NOT EJECTED	NOT EJ	ECTED/NOT APPI	LICABLE		NOT TRAPPED				
		Medical Transport			EMS Agency Identifier	1	EMS Run #				
		NOT TRANSPORT	ED								
		Hospital			Date of Death	-	Time of Death				
		·									
			Distracted By Sour	ce	1						
		Distracted By	NOT APPLICAE	LE (NOT DISTRA	CTED)						
		Distracted By Action									
		NOT DISTRACTED	n								
		DIOTRAOTEL		I a antin-							
		Non Motorist	Striking Unit #	Location							
		Prior Action									

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 11/11/2019

Crash Time 11:52 AM

TIND	INDIVIDUAL	Action					
	L	Action Other Suspected Alcohol UNO	Jse	Suspected Drug Use NO			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		
05	005	Drug Type					
		Individual Condition					
		APPEARED NORMAL					