

6TL0B3P3FP  
19-14603

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		Primary Crash Document #	Agency Crash Number <b>19-14603</b>	Investigating Officer/Deputy <b>DEPUTY S. PARKHURST</b>	
Crash Date <b>11/25/2019</b>		Crash Time <b>06:00 PM</b>	Date Arrived <b>11/25/2019</b>	Time Arrived <b>06:13 PM</b>	
Date Notified <b>11/25/2019</b>		Time Notified <b>06:02 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 checked="" 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 type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

Description

Diagram		Reconstruction By
		Photos By <b>9124</b>
		Additional Information <b>PHOTOS</b>

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

UNIT 1 WAS TOWING A SECOND VEHICLE SOUTHBOUND ON CTH BD. THE TOWED VEHICLE WAS BEING PULLED BY A TOW STRAP AND DID NOT HAVE ANY ADDITION LIGHTS OR MARKING ATTACHED TO THE REAR. UNIT 2 DID NOT SEE THE SLOWER MOVING UNIT 1. UNIT 2 STRUCK THE REAR OF UNIT 1.

Location

<b>ON CTHBD NB 447 FT N OF TERRYTOWN RD IN THE TOWN OF BARABOO IN SAUK COUNTY</b>	Latitude <b>43.486573798</b>	Longitude <b>-89.774155924</b>
	X Coordinate <b>275670.78125</b>	Y Coordinate <b>4818589</b>
	Structure Type <b>NO STRUCTURE</b>	

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Crash Scene

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>		First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>02--FRONT TO REAR</b>		Light Condition <b>DARK/LIGHTED</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>INTERSECTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>	
Closure Type <b>FULL CLOSURE</b>		Reasons for Closure	
Date Initial Lane/Rd Closed <b>11/25/2019</b>	Time Initial Lane/Rd Closed <b>06:00 PM</b>	<b>LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS</b>	
Date All Lanes Open <b>11/25/2019</b>	Time All Lanes Open <b>06:37 PM</b>	Date Scene Cleared <b>11/25/2019</b>	Time Scene Cleared <b>06:37 PM</b>

Unit Summary

<b>UNIT 01</b>	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>2</b>	Train/Bus # Recorded	Total # Citations Issued <b>4</b>	Total Trailers <b>1</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>NO</b>	Direction Of Travel <b>SOUTHBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>55</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>DIVIDED HWY MEDIAN W/BARRIER</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>DOWNHILL</b>	
	Truck Bus or HazMat <b>NO</b>					

<b>UNIT 01</b>	<b>Vehicle</b>					
	License Plate Number <b>ACP5622</b>		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
	Vehicle Identification Number <b>1J4GL48K56W203436</b>		Make <b>JEEP</b>	Year <b>2006</b>	Model <b>LIBERTY SP</b>	
	Color <b>GRN - GREEN</b>		Body Style <b>UT - SPORT UTILITY VEHICLE</b>		Bus Use <b>NOT A BUS</b>	
	Initial Contact Point <b>6--REAR</b>		Vehicle Damage			
	Extent Of Damage <b>MINOR DAMAGE</b>		<b>6--REAR</b>			
	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>			
	What Driver Was Doing <b>GOING STRAIGHT</b>					

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UNIT VEHICLE	Driver Prior Action Other		Vehicle Factors <b>NOT APPLICABLE</b>			
	Driver Actions <b>OTHER CONTRIBUTING ACTION</b>					
	Owner Name <b>GAVIN J SLOVIK (608) 432-1512</b>		Owner Address <b>711 5TH AVE BARABOO, WI 53913 , US</b>			
01 01	<b>Sequence Of Events</b>					
	01	Event <b>MOTOR VEH IN TRANSPORT</b>				
	02	Event				
	03	Event				
04	Event					
	<b>Trailer/Towed</b>					
UNIT TRAILER/ TOWED	01	Trailer Plate # <b>KYY6784</b>	Plate Type <b>AUT - AUT</b>	Make <b>CHRY</b>	State <b>TX</b>	Country of Issuance <b>UNITED STATES</b>
		Unit Type <b>AUTO</b>	Individual <b>GAVIN J SLOVIK (608) 432-1512</b>		Address <b>711 5TH AVE BARABOO, WI 53913 , US</b>	
		Vehicle Identification Number <b>3C8FY68B84T244515</b>				
UNIT INDIVIDUAL	<b>Individual</b>					
	Driver <b>SERYNA MARIE JUNGENBERG (608) 432-1512</b>		Citations Issued <b>4</b>		Sex <b>FEMALE</b>	
	Address <b>711 5TH AVE BARABOO, WI 53913 , US</b>		Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>			
01 001	<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>				
<b>Distracted By Action</b>		<b>NOT DISTRACTED</b>				

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UNIT	INDIVIDUAL	<b>Non Motorist</b>		Striking Unit #	Location		
		Prior Action					
		Action					
		Action Other				To/From School	
01	001	<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>GAVIN JAMES SLOVIK (608) 432-1512</b>			Citations Issued <b>0</b>	Sex <b>MALE</b>	
					Date of Birth	Race <b>WHITE</b>	
		Address <b>W15104 STATE ROAD 16 WISCONSIN DELLS, WI 53965 , US</b>			Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
		01	003	<b>Safety Equipment</b>		On Duty Crash	Safety Equipment
Seat Position <b>TRAILING UNIT</b>				<b>SHOULDER &amp; LAP BELT</b>			
Helmet Use				Helmet Compliance			
Eye Protection				Tint Compliance			
<b>Injury</b>				Injury Severity <b>SUSPECTED MINOR 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>EMS GROUND</b>				EMS Agency Identifier <b>6000368</b>	EMS Run #		
Hospital <b>ST CLARE HOSP</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	
	01	003	<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>			
	09	10	<b>Violations</b>			
			UTC Number <b>BE131138</b>	Issue To? <b>001</b>	Statute Number <b>343.05(3)(a)</b>	Description <b>OPERATE W/O VALID LICENSE</b>
			UTC Number <b>BE131139</b>	Issue To? <b>001</b>	Statute Number <b>344.62(1)</b>	Description <b>OPERATE MOTOR VEHICLE W/O INSURANCE</b>
UTC Number <b>BE131140</b>			Issue To? <b>001</b>	Statute Number <b>341.03(1)</b>	Description <b>OPERATE AFTER REV/SUSP OF REGISTRATION</b>	
UTC Number <b>BE131141</b>			Issue To? <b>001</b>	Statute Number <b>348.08(1)</b>	Description <b>OPERATE MOTOR VEHICLE TRAIN W/O PERMIT</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>1</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>SOUTHBOUND</b>	<input type="checkbox"/> Pre Crash <input type="checkbox"/> Tire Mark	Speed Limit <b>55</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>DIVIDED HWY MEDIAN W/BARRIER</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>DOWNHILL</b>	
		Truck Bus or HazMat <b>NO</b>						

UNIT	02	<b>Vehicle</b>					
		License Plate Number <b>958PCY</b>		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
		Vehicle Identification Number <b>4T4BF3EK5BR200792</b>		Make <b>TOYOTA</b>	Year <b>2011</b>	Model <b>CAMRY/SE/L</b>	
		Color <b>SIL - SILVER (ALUMINUM)</b>		Body Style <b>4D - 4DR</b>		Bus Use <b>NOT A BUS</b>	
		Initial Contact Point <b>12--FRONT</b>		Vehicle Damage			
		Extent Of Damage <b>DISABLING DAMAGE</b>		<b>12--FRONT</b>			

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UNIT VEHICLE	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>MIKES TOWING</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 02	Owner Name <b>GEORGE R DAVIS JR (608) 448-8141</b>		Owner Address <b>E8243 STATE ROAD 23 AND 33 REEDSBURG, WI 53959 , US</b>	
	<b>Sequence Of Events</b>			
01 02 03 04	Event <b>MOTOR VEH IN TRANSPORT</b>			
	Event			
	Event			
	Event			
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>GEICO-CASUALTY-CO</b>		Individual <b>GEORGE DAVIS</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>GEORGE R DAVIS JR</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
	Address <b>E8243 STATE ROAD 23 AND 33 REEDSBURG, WI 53959 , US</b>		Date of Birth	Race <b>WHITE</b>
	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>			
02 002	<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	
02 002	<b>Injury</b>		Injury Severity <b>POSSIBLE INJURY</b>	
	Ejected <b>NOT EJECTED</b>		Airbag <b>DEPLOYED-FRONT</b>	
	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</b>	
	Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	
Hospital		EMS Run #		
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

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<b>UNIT</b>	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>		
	<b>02</b>	<b>002</b>	