

6TLOBZLVN3  
19-14819

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>19-14819</b>	Investigating Officer/Deputy <b>SERGEANT S. SCHRAM</b>	
Crash Date <b>12/01/2019</b>		Crash Time <b>06:07 PM</b>	Date Arrived <b>12/01/2019</b>	Time Arrived <b>06:11 PM</b>	
Date Notified <b>12/01/2019</b>		Time Notified <b>06:07 PM</b>	Total Units <b>02</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 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

<p>Diagram</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 TRAVELING EB ON HWY 14 EAST OF RAINBOW ROAD TOWING A SMALL RECREATIONAL TRAILER. UNIT 2 WAS FOLLOWING UNIT 1 EB. UNIT 1 LOST CONTROL DUE TO THE ICY ROAD CONDITIONS AND BEGAN TO SLIDE SIDEWAYS STRIKING A GUARDRAIL. UNIT 2 HIT THE TRAILER BEING TOWED BY UNIT 1, FORCING UNIT 1 TO SLIDE ACROSS THE WB LANE COMING TO A REST FACING WB. THE TRAILER HITCH SNAPPED OFF LEAVING THE TRAILER IN THE EB LANE. UNIT 2 CAME TO A REST IN THE EB LANE. UNIT 2 OPERATOR WAS EVALUATED AND RELEASED BY EMS. BOTH VEHICLES WERE REMOVED BY OPERATORS ON SCENE. GEORGE'S TOWING REMOVED THE TRAILER.

Location

<b>ON USH14 EB 0.58 MI S OF RAINBOW RD IN THE VILLAGE OF SPRING GREEN IN SAUK COUNTY</b>	Latitude <b>43.17350787</b>	Longitude <b>-90.047721658</b>
	X Coordinate <b>252277.75</b>	Y Coordinate <b>4784593</b>
	Structure Type	

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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/UNLIT</b>	
Road Surface Condition(s) <b>ICE</b>		Roadway Factor(s) <b>ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)</b>	
Environment Factor(s) <b>WEATHER CONDITIONS</b>			
Weather Condition(s) <b>SNOW</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>FULL CLOSURE</b>		Reasons for Closure <b>LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS</b>	
Date Initial Lane/Rd Closed <b>12/01/2019</b>	Time Initial Lane/Rd Closed <b>06:07 PM</b>	Date Scene Cleared <b>12/01/2019</b>	
Date All Lanes Open <b>12/01/2019</b>	Time All Lanes Open <b>07:16 PM</b>		
Date Scene Cleared <b>12/01/2019</b>		Time Scene Cleared <b>07:16 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>TRUCK</b>	
	Vehicle Type <b>UTILITY TRUCK/PICKUP TRUCK</b>				Operating As Endorsements	
	Total Occs <b>02</b>	Train/Bus # Recorded	Total # Citations Issued <b>00</b>	Total Trailers <b>01</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>YES</b>	Direction Of Travel <b>EASTBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>55</b>	Total Lanes <b>02</b>	
	Most Harmful Event: Collision With <b>GUARDRAIL FACE</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>					

<b>UNIT 01</b>	<b>Vehicle</b>					
	License Plate Number <b>LK9071</b>		Plate Type <b>LTK - LIGHT TRUCK</b>		St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>1D7HU18208J178960</b>		Make <b>DODGE</b>		Year <b>2008</b>	Model <b>RAM</b>
	Color <b>BLK - BLACK</b>		Body Style <b>TK - TRUCK</b>		Bus Use <b>NOT A BUS</b>	
	Initial Contact Point <b>6--REAR</b>		Vehicle Damage <b>1--RIGHT FRONT CORNER, 2--RIGHT SIDE FRONT, 5--RIGHT REAR CORNER, 6--REAR, 11--LEFT FRONT CORNER</b>			
	Extent Of Damage <b>FUNCTIONAL DAMAGE</b>		Towed Due To Damage <b>NOT TOWED</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>FAILURE TO CONTROL</b>				
	Owner Name <b>JAMES A JOHNSON (414) 651-2072</b>		Owner Address <b>450 E RED PINE CIRCLE DOUSMAN, WI 53118 , US</b>		
UNIT 01	<b>Sequence Of Events</b>				
	01	Event <b>MOTOR VEH IN TRANSPORT</b>			
	02	Event <b>GUARDRAIL FACE</b>			
	03	Event			
UNIT 01	<b>Policy Holder</b>				
	Insurance Company <b>STATE-FARM-GENERAL-INS-CO</b>		Individual <b>JAMES JOHNSON</b>		
UNIT 01	<b>Trailer/Towed</b>				
	Trailer Plate #	Plate Type	Make <b>UNK</b>	State	Country of Issuance
	Unit Type <b>RECREATIONAL</b>	Individual <b>JAMES A JOHNSON (414) 651-2072</b>		Address <b>450 E RED PINE CIRCLE DOUSMAN, WI 53118 , US</b>	
UNIT INDIVIDUAL	<b>Individual</b>				
	Driver <b>JAMES A JOHNSON (414) 651-2072</b>		Citations Issued <b>00</b>		Sex <b>MALE</b>
	Address <b>450 E RED PINE CIRCLE DOUSMAN, WI 53118 , US</b>		Date of Birth		
	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		Race <b>WHITE</b>		
	<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	

Distracted By Source  
**NOT APPLICABLE (NOT DISTRACTED)**

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Form with sections: Distracted By, Non Motorist, Drug & Alcohol, Individual (Passenger TANYA L JAMES), Safety Equipment, Injury, and another Distracted By section. Includes fields for action, test results, and personal information.

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<b>UNIT</b>	<b>INDIVIDUAL</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>					
	<b>01</b>	<b>002</b>				

### Unit Summary

<b>UNIT</b>	<b>02</b>	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>01</b>		Train/Bus # Recorded		Total # Citations Issued <b>00</b>		Total Trailers <b>00</b>		
	Insurance? <b>YES</b>		Direction Of Travel <b>EASTBOUND</b>		<input type="checkbox"/> Pre Crash Tire Mark		Speed Limit <b>55</b>		
	Total HazMat Types <b>0</b>		Total Lanes <b>02</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>		
	<b>Vehicle</b>								
	<b>02</b>	<b>VEHICLE</b>	License Plate Number <b>MW2003</b>		Plate Type <b>LTK - LIGHT TRUCK</b>		St <b>WI</b>		
			Country of Issuance <b>UNITED STATES</b>		Vehicle Identification Number <b>JT4UN24D2T0023604</b>		Make <b>TOYOTA</b>		Year <b>1996</b>
Model <b>T100</b>			Color <b>RED - RED</b>		Body Style <b>TK - TRUCK</b>		Bus Use <b>NOT A BUS</b>		
Initial Contact Point <b>12--FRONT</b>			Vehicle Damage						
Extent Of Damage <b>FUNCTIONAL DAMAGE</b>			<b>1--RIGHT FRONT CORNER, 11--LEFT FRONT CORNER, 12--FRONT</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	
	NOT APPLICABLE			
	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
02	Owner Name <b>ROBIN L CASPER (414) 828-8283</b>		Owner Address <b>37710 VALLEY ROAD OCONOMOWOC, WI 53066 , 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>AMERICAN-FAMILY-INS-CO</b>		Individual <b>ROBIN CASPER</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>ROBIN L CASPER (414) 828-8283</b>		Citations Issued <b>00</b>	Sex <b>MALE</b>
	Address <b>37710 VALLEY ROAD OCONOMOWOC, WI 53066 , US</b>		Date of Birth	Race <b>WHITE</b>
			Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
02 003	<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	
Prior Action				

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<b>UNIT</b>	<b>INDIVIDUAL</b>	Action			
		Action Other			To/From School
<b>02</b>	<b>003</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>			

### Property Owner

<b>PROP OWNER</b>	<b>01</b>	Government <b>SAUK COUNTY HWY DEPT</b> <b>(608) 356-3855</b>	Address <b>620 STH 136</b> <b>PO BOX 26</b> <b>BARABOO, WI 53913 , US</b>
		<b>Fixed Objects Struck</b>	

<b>PROP OWNER</b>	<b>01</b>	Striking Unit <b>01</b>	Struck Object <b>GUARDRAIL FACE</b>	Structure Number	Damage Tag Number <b>337518</b>
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