6TL0BNZM0N

20-00059

WISCONSIN MOTOR VEHICLE CRASH REPORT

	Document Number Override	Primary Crash D	ocument #	Agency 20-000	Crash Number 59	Investigati		icer/Deputy REUNIG	
NO	Crash Date 01/02/2020	Crash Time 02:19 PM		Date Arrived 01/02/2020			Time Arrived 02:42 PM		
ž	Date Notified	Time Notified			Total Units		Total Injured		d
N	01/02/2020	02:21 PM		01		00		00	
6TL0BNZM0N	On Emergency	t and Run	Lane Closu	ure	Work Zone		er or	Towed	Reporting Threshold
6TL	Government Property	Active Sch	hool Zone	School NO	Bus Related	Tags			
	✓ Reportable	Crash Type DT4000 (STAN		H)		Ame	nded		Secondary Crash
ĺ	Description								
	Diagram								ву
								otos By	
								ditional Info DNE	mation
		СТН	I PF						
	<u></u>	-		-		 /			
			(j	2	┶╼╞┹┍╴	 		
	ϕ								
				NOT	TO SCALE				
	✓ I, a sworn law enforceme	nt officer, agre	e that I have no	ot addec	any CJIS data in t	his report.			
	UNIT 1 WAS TRAVELING WESTBO AND UNDERCARRIAGE, UNIT 1 TR	UND ON CTH PF.	UNIT 1 TRAVELED			F THE ROAD. U	NIT 1 S		
	THE OBEROANIAGE. UNIT I IT	UNITED OUT OF			IL ROAD. THE OF ER				

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L	_OC	ation									
ſ	ON	CTHPF WB	Latitude			Longitude					
	786 FT E						43.300899437			952414	
	OF SLOTTY RD IN THE TOWN OF HONEY CREEK IN SAUK COUNTY						X Coordinate		Y Coord	inate	
							268836.03125 47			798174.5	
				Structure -	Туре		•				
L		sh Scene									
						E : (1)	() =				
							nful Event L				
								11			
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT						Light Condition DAYLIGHT					
-		d Surface Condition(s)				Roadway Factor(s)					
	DRY										
-	Envi	ronment Factor(s)									
	NOM	NE				NONE					
ŀ	Wea	ther Condition(s)									
	CLE	AR									
F	Anim	nal Type				Relation T	Relation To Trafficway				
							CWAY - C				
Γ		sh Classification - Location	1					Jurisdiction			
_		BLIC PROPERTY					ISDICTION		On a sint Otracha		
	TIDa	1 Lanu		Access Control NO CONTROL				Special Study			
	5					ction Type					
L	-		NON-JUNCTION		NOTAN	INTERSE					
		t Summary		Vahiala On	anatia a A a Ol			11.27			
				D CLASS		Classification Unit Type TRUCK					
	IN TRANSIT D CLA Vehicle Type				Operating As Endorsements				ments		
· .								operating //o Endolsements			
F	-		Total # Cita	tions Issued	d Total Trail		lers	Total Haz	Mat Types		
	1			0		0		0			
Ē	Insur	rance?	Pre CrashTire		e Speed Lir				es		
	YES	5		Mark 50			2				
		t Harmful Event: Collision		Special Function NO SPECIAL FUNCTION			Emergency Motor Vehicle Use				
		BIIGH				TION		-	-		
		fic Way		Traffic Control			Traffic Control Inoperative/Missing				
		D-WAY, NOT DIVIDED ace Type)	NO CONTROL Road Curvature STRAIGHT				NO Road Grade			
		ACKTOP (BITUMINOU	IS)								
		k Bus or HazMat	,	onvion	•						
	NO										
1		Vehicle									
		License Plate Number		Plate Type			St	Country of Is			_
		License Plate Number GD2053		LTK - LIC	GHT TRUC	к	WI	UNITED ST			
		License Plate Number GD2053 Vehicle Identification Nur		LTK - LK Make	GHT TRUC	к	WI Year	UNITED ST Model	TATES		_
		License Plate Number GD2053 Vehicle Identification Nur 1GCNKREC7EZ3270		LTK - LK Make CHEVRC	GHT TRUC	к	WI	UNITED ST Model SILVERAD	TATES		
		License Plate Number GD2053 Vehicle Identification Nur		LTK - LK Make	GHT TRUC	к	WI Year	UNITED ST Model	TATES		
;	E 01	License Plate Number GD2053 Vehicle Identification Nur 1GCNKREC7EZ3270 Color		LTK - LIC Make CHEVRC Body Style	GHT TRUC DLET KUP	ĸ	WI Year	UNITED ST Model SILVERAD	TATES		_
;	E 01	License Plate Number GD2053 Vehicle Identification Nur 1GCNKREC7EZ3270 Color BLK - BLACK Initial Contact Point 12 - FRONT		LTK - LIC Make CHEVRC Body Style PK - PIC Vehicle Da	GHT TRUC DLET KUP amage		WI Year 2014	UNITED ST Model SILVERAD Bus Use	TATES	- FRONT 14 -	_
	01	License Plate Number GD2053 Vehicle Identification Nur 1GCNKREC7EZ3270 Color BLK - BLACK Initial Contact Point	953	LTK - LIC Make CHEVRC Body Style PK - PIC Vehicle Da 01 - RIGH	GHT TRUC DLET KUP amage	CORNER	WI Year 2014	UNITED ST Model SILVERAD Bus Use	TATES	- FRONT, 14 -	

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Towed Due To Damage				nicle Removed By					
		NOT TOWED			-	VNER					
		What Driver Was Doing GOING STRAIGHT			Vehicle Factors						
		Driver Prior Action Other			NC						
		Driver i nor Action Other									
		Driver Actions									
	щ	FAILURE TO CONTR	ROL, RA	N OFF ROADWAY	,						
UNIT	ICI										
5	VEHICLE										
	>										
		Owner Name				Owner Address					
	_	CARL EDWARD BEH	HN			1122 WOODVALE DR					
0	0	(608) 434-1247				MADISON, WI 53716 ,	US				
		Sequence Of Eve	ents								
	01	Event RUN OFF ROADWA	Y RIGH	г							
	02	Event									
	0	DITCH									
	03	Event									
	04	Event									
UNIT		Policy Holder Insurance Company Individual									
5		AMERICAN-FAMILY-INS-CO									
	Individual										
	Ī	Driver CARL EDWARD BEHN (608) 434-1247				Citations Issued		Sex			
	Ļ				(0		MALE			
	INDIVIDUAI				ſ	Date of Birth		Race WHITE			
UNIT	NI	Address 1122 WOODVALE DR MADISON, WI 53716, US				Driver License Number					
	ND					STATE: WISCONSIN COUNTRY: UNITED STATES					
	=	= MADISON, WI 53716 , 03									
			n Duty Cr	ash		Safety Equipment					
	Saf	fety Equipment	in Duty Of		ľ						
	1	Row		Seat Position	osition	SHOULDER & LAP BELT	т				
		01 - FRONT ROW		07 - LEFT							
		Helmet Use	Helmet Use		ł	Helmet Compliance					
		Eye Protection			Tint Compliance						
2	001	1 •	jury Seve	rity RENT INJURY		Airbag NON DEPLOYED					
		Ejected		ection Path				Trapped/Extricated			
		NOT EJECTED NOT EJECTED/NOT AP			APPLIC	CABLE		NOT TRAPPED			
		Medical Transport			I	EMS Agency Identifier		EMS Run #			
	NOT TRANSPORTED				Data of Dooth		Time of Death				
		Hospital				Date of Death		Time of Death			
		Distracted By N	istracted I	By Source	STRACI						
		Distracted By Action	2.741			,					
		NOT DISTRACTED									

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		Non Motorist	Striking Unit #	Location							
		Prior Action									
UNIT	INDIVIDUAL	Action									
		Action Other						To/From School			
	L	Drug & Alcohol	Suspected Alcohol L NO	Jse	Suspected Drug Use						
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results				
		TEST NOT GIVEN									
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results					
6	001	Drug Type									
		Individual Condition									
		APPEARED NORMAL									