6TL0BNZM17 20-03692

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash Document #						g Officer/Deputy A. BREUNIG		
	Crash Date	Crash Time	Crash Time		rrived	Time Arrived				
	04/18/2020	08:48 AM		04/18/	2020	08:52 AM				
Z	Date Notified 04/18/2020	Time Notified 08:50 AM		Total Units 02		Total Injured 01	Total Kille	d		
מפ	On Emergency	Hit and Run	✓ Lane Clos	ure Work Zone		▼ Trailer o	Towed	Reporting Threshold		
6 I LUBNZM17	Government Property	Active So	chool Zone	School NO	Bus Related	Tags	Tags			
	✓ Reportable	Crash Type DT4000 (STA	NDARD CRASI	ASH)Amend			t	Secondary Crash		
	Description —									
	U2 U1		GH 14	•			Photos By V VERTEIN dditional Infor			
	I, a sworn law enfor UNIT 1 WAS TRAVELING EA UNIT 2 SLID TO THE NORTH	ASTBOUND ON USH 14.	UNIT 2 WAS TRAV	/ELING W	ESTBOUND ON USH 14.	UNIT 2 CROSSED	THE CENTERL	INE AND STRUCK UNIT 1. IDE OF THE ROAD INTO A		
	FIELD.									

Form DT4000

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Location									
ON USH14 EB		Longitud	10						
1124 FT E 43.190990383			3772898						
OF BORTER PD									
IN THE TOWN OF SPRING GREEN	X Coordinate Y Coordinate								
IN SAUK COUNTY 242511.484375	5	478690	00						
Structure Type									
Crash Scene									
First Harmful Event First Harmful Eve									
MOTOR VEH IN TRANSPORT ON ROADWAY	<u>′</u>								
Manner of Collision Light Condition									
02 - FRONT TO FRONT DAYLIGHT									
Road Surface Condition(s) Roadway Factor(s)								
DRY									
Environment Factor(s)									
NONE NONE									
Weather Condition(a)									
Weather Condition(s)									
CLEAR									
Animal Type Relation To Traffi	cway								
TRAFFICWAY	=								
Crash Classification - Location Crash Classificati									
	NO SPECIAL JURISDICTION								
Tribal Land Access Control			Special Study						
NO CONTROL	NO CONTROL								
Within Interchange Area Junction Location Intersection Type									
NO NON-JUNCTION NOT AN INTERSECTION	I INTERSECTION								
Closure Type Reasons for Closure	ure								
LANE CLOSURE									
Date Initial Lane/Rd Closed Time Initial Lane/Rd Closed LAW ENFORCEMENT, FIRE/E	MS								
04/18/2020 08:52 AM									
Date All Lanes Open Time All Lanes Open Date Scene Cleared	red Time Scene Cleared								
04/18/2020 10:00 AM 04/18/2020	02:13 PM								
	02.101								
Unit Summary									
Unit Status Vehicle Operating As Classification	Unit Type								
IN TRANSIT A CLASS	TRUCK								
Vehicle Type	Operating As Endorsements								
TRUCK TRACTOR (SEMI ATTACHED)									
	Trailers	Total Haz	Mat Types						
		0							
	d Limit	Total Lan	es						
Fie Clasiffie		2							
Most Harmful Event: Collision With Special Function	Emergency		icle Use						
YES EASTBOUND	NOT APPI								
Traffic Way Traffic Control									
	Traffic Control Inoperative/Missing								
TWO-WAY, NOT DIVIDED NO CONTROL	NO Dead Crade								
Surface Type Road Curvature	Road Grade								
BLACKTOP (BITUMINOUS) STRAIGHT	AIGHT LEVEL								
Truck Bus or HazMat									
TRUCK OR TRUCK COMBINATION > 10,000LBS GVWR/GCWR									
Vehicle		suance							
Vehicle License Plate Number Plate Type St	Country of le	Country of Issuance							
License Plate Number Plate Type St									
License Plate Number 75664X Plate Type APO - APPORTIONED WI	UNITED ST								
License Plate Number Plate Type St									

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Color		В	ody Style			Bus Use			
		RED - RED			B - CAB	CHASSIS					
	ш	Initial Contact Point			ehicle Dam	age					
\vdash		10 - LEFT SIDE FRONT			•						
	VEHICL	Evtont Of Damaga						DE REAR, 09 - LEFT SIDE MIDDLE, 10 -			
-	亩	_	_	L	EFT SIDE	FRONT, 11 - LEF	FT FRONT (CORNER, 12 - FRONT			
	>	DISABLING DAMAGE			/ I : I - D	1.5					
		Towed Due To Damage			ehicle Rem	=					
		TOWED DUE TO DIS	AGE V	VEGNER 1	TOWING						
		What Driver Was Doing	ehicle Facto	ors							
		GOING STRAIGHT									
		Driver Prior Action Other	IOT APPL	ICABLE							
		Driver Actions									
	ш	NO CONTRIBUTING	ACTION								
\vdash	\exists										
L	VEHICL										
	山										
	>										
		Owner Name	Owner Name			Address					
_	_	WALSH TRANSPOR	T LLC			CTH G					
2	0	(608) 546-6539			PLAIN,	, WI 53577 758, L	JS				
		Sequence Of Eve	nto								
	ì	Event	nis								
	7	MOTOR VEH IN TRA	NSPORT								
	02	Event	/ L EET								
	0	RUN OFF ROADWAY	Y LEFI								
	~	Event									
	03										
		Event									
	04	E voin									
	_										
╘		Policy Holder									
LIND		Insurance Company			Organizati	ion/Company					
)		ACUITY,-A-MUTUAL	-INSURANCE	-CO	WALSH	TRANSPORT LL	C				
	-	Trailer/Towed									
		Trailer Plate #	Plate Type	Make		04-4-					
5		752098	STL - SEMI	TIMP		State		etry of Issuance			
		732090		<u> </u>				ED STATES			
.	ER/	Unit Type	Org	janization/Company ALSH TRANSPORT							
 	쁘	FULL TRAILER	RT LLC S8721 CTH G PLAIN, WI 53577 758, US								
5	TRAI	Vehicle Identification Nur	FLAIN, WI 333/1 136, 03								
	Ĕ	1TDH40024KB16214	7								
j	Individual										
		Driver			Citations Issued Sex			Sex			
		MATTHEW BRANDO	N VERTHEIN			33ucu		MALE			
	7	(608) 415-9427	V V LICITIE		0						
)	(000) 413-3427			Date of Bir	rth		Race			
╘	INDIVIDUAL				WHITE						
	≥	Address			Driver Lice	ense Number					
_	$\frac{1}{2}$	E3884 COUNTY ROA			CTATE: 1	WICCONCIN COL	INTOV. LINE	TED STATES			
	=	PLAIN, WI 53577 , U	5		SIAIE	WISCONSIN COL	JNIKT: UNI	IED STATES			
		Or	n Duty Crash		Safety Equ	uipment					
	Saf	ety Equipment	•								
		•									
		Daw	Row Seat Position				SHOULDER & LAP BELT				
					SHOULD	DER & LAP BELT					
		01 - FRONT ROW	Seat 07 -								
					Helmet Co						

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WISCONSIN MOTOR VEHICLE CRASH REPORT

	Eye Protection					Tint Compliance						
2	60	Injury NO A	INJURY	Airbag NOT APPLICABLE								
		Ejected	Ejection Pa					Trapped/Extricated				
		NOT EJECTED Medical Transport	NOT EJE	CTED/NOT APPL				NOT TRAPPED)			
		NOT TRANSPORTED		EIVIS F	Agency Identifier		EMS Run #					
		Hospital		Date o	f Death		Time of Death					
		Distracted By NOT	cted By Sourc APPLICABI	e LE (NOT DISTRAC	CTED)							
		Distracted By Action NOT DISTRACTED										
		Non Motorist Strikin	g Unit #	Location								
		Prior Action	Prior Action									
LIND	INDIVIDUAL	Action										
		Action Other To/From School										
	L	Drug & Alcohol NO	Jse	Suspe NO	cted Drug Use							
		Alcohol Test Given		Alcohol Test Type				Alcohol Test Resu	ults			
		TEST NOT GIVEN	,,,,,									
		Drug Test Given TEST NOT GIVEN	Drug Test Type			Drug Test R	Results					
6	001	Drug Type										
		Individual Condition										
		APPEARED NORMAL										
	Ċ	Carrier										
						Source						
		Use Vehicle Owner Same as Carrier			VEHICLE-SIDE							
6	01	WALSH TRANSPORT LLC USDOT# 636240				Address S8721 CTH G PLAIN, WI 53577 758, US						
	2	GVWR Vehicle Configuration			Cargo Bod			Cargo Body Type	Sody Type			
╘╽	BUS	MORE THAN 26,000 LB TRUCK TRACTOR/SEM			I-TRAILER GRA				RAIN/CHIPS/GRAVEL			
LIND	CK	US DOT # 636240	Carrier Ty	ype TATE CARRIER				Permitted Load NOT APPLICABLE	Permitted Load NOT APPLICABLE			
	TRUCK	OS/OW Load	mit Number	☐ Per		ehicle On Route	Escort	Vehicle Required By Permit	Escort Vehicle Present			
		Measured Height	Measu	ured Length		Measured Width	l	Measured Weight				
	Jnii	Summary ===				I		l				

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WISCONSIN MOTOR VEHICLE CRASH REPORT

	Unit Status				Vehicle Operating As Classification			Unit Type			
	IN T	RANSIT		DC	D CLASS			AUTOMOBILE			
02	Vehi	cle Type						Operating As Endorsements			
0	PAS	SSENGER CAR									
	Tota	Total Occs Train/Bus # Recorded		Total # Citations Issued		Total Trai	ilers	Total HazMat Types			
	1			1		0		0			
	Insurance? Direction Of Travel			Pre CrashTire	Speed Lir	mit	Total Lanes				
╘	YES WESTBOUND			☐ Mark 55		2					
UNIT		Harmful Event: Collision Wi			cial Function			Motor Vehicle Use			
	MOTOR VEH IN TRANSPORT				NO SPECIAL FUNCTION			NOT APPLICABLE			
		ic Way			fic Control			trol Inoperative/Missing			
		D-WAY, NOT DIVIDED			CONTROL		NO				
		ace Type			d Curvature		Road Grad	e			
		ACKTOP (BITUMINOUS) k Bus or HazMat)	311	RAIGHT		LEVEL				
	NO	k bus of Haziviat									
	,	Vehicle									
		License Plate Number			te Type	St	Country of Is				
		AHJ5330			T - AUTOMOBILE	WI	UNITED S	TATES			
02	05	Vehicle Identification Number		Ma		Year	Model				
	0	WBA3B3G59DNR80649		BN		2013	328XI				
		Color			dy Style - 4DR		Bus Use				
		BLK - BLACK									
_	쁫	Initial Contact Point 11 - LEFT FRONT CORNER			Vehicle Damage						
UNIT	읔	Extent Of Damage			09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12						
n	VEHICL	DISABLING DAMAGE	- FRONT								
	>	Towed Due To Damage		Vehicle Removed By							
		TOWED DUE TO DISABLING DAMAGE		GEORGES AUTO BODY							
		What Driver Was Doing		Vehicle Factors							
		GOING STRAIGHT									
		Driver Prior Action Other		NOT APPLICABLE							
		Driver Actions									
	Щ	FAILURE TO CONTROL, WRONG SIDE OR WRONG WAY, FAILED TO KEEP IN DESIGNATED LANE, OPERATED MOTOR VEHICLE IN AGGRESSIVE/RECKLESS MANNER									
UNIT	VEHICL	IN AGGRESSIVE/RECI	KLESS WANNER								
5	프										
	7										
		Owner Name PETER DONALD DALLY			Owner Address 6417 INNER DR						
02	05	(608) 298-8619		MADISON, WI 53705							
_		,									
		2									
	•	Sequence Of Even	ts								
	5	Event CROSS CENTERLINE									
	05	Event CARGO/EQUIPMENT I	LOSS OR SHIFT								
	03	Event									
		Event									
	9										
⊨		Policy Holder									
UNIT		Insurance Company			ndividual						
ر ا		CINCINNATI-INS-CO,-	THE		PETER DALLY						
		Individual									

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Driver PETER DONALD DALLY				Citations Issued 1		Sex MALE			
	A	(608) 298-8619	,,,			Date of Birth		Race			
_	INDIVIDUAL							WHITE			
UNIT	Ž	Address				Driver License Number					
	Z	6417 INNER DR MADISON, WI 5370	05 , US			STATE: WISCONSIN	I COUNTRY: UNI	TED STATES			
		,	•								
			On Duty Cra	ash		Safety Equipment					
	Sai	fety Equipment									
		Row 01 - FRONT ROW		Seat P		SHOULDER & LAP	BELT				
		Helmet Use		01 - L	EF!	Helmet Compliance					
		Eye Protection				Tint Compliance					
	8		Injury Sever	rity		Airbag					
02	005	Injury	SUSPECT	ÉD MII	NOR INJURY	DEPLOYED-COMBI	NATION				
		Ejected	Eje	ection Pa	ath			Trapped/Extricated			
		NOT EJECTED Medical Transport	N	OT EJE	CTED/NOT APPL	EMS Agency Identifier		NOT TRAPPED EMS Run #			
		EMS GROUND				6000554		LIVIS IXUII #			
		Hospital				Date of Death		Time of Death			
		SAUK PRAIRIE HO		D O							
		Distracted By	Distracted E	LICABI	e LE (NOT DISTRA	CTED)					
		Distracted By Action									
		NOT DISTRACTED			T. L. and S. a.						
		Non Motorist	Striking Uni	ι#	Location						
		Prior Action									
		Action									
	بِ										
_	Ď										
LIND	1										
_	INDIVIDUAL										
	=										
		A .: 0:1							T (5 0)		
		Action Other							To/From School		
		Device & Alachal	Suspected /	Alcohol (Jse	Suspected Drug Use					
		Drug & Alcohol	NO		T	NO					
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type			Alcohol Test Results			
		Drug Test Given			Drug Test Type		Drug Test Results				
		TEST NOT GIVEN									
05	002	Drug Type									
		Individual Condition									
		EMOTIONAL (DEP	RESSED,	ANGR'	Y, DISTURBED, E	ETC)					
	,	 Violations									
		UTC Number	Issue To?		atute Number	Description	OF OFFITES				
	5	AE753305	002	34	6.05(1)	OPERATING LEFT OF CENTER					