

6TL0B1717B

20-03872

# 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>20-03872</b>	Investigating Officer/Deputy <b>DEPUTY I. HANSON</b>	
Crash Date <b>04/25/2020</b>		Crash Time <b>01:26 PM</b>	Date Arrived <b>04/25/2020</b>	Time Arrived <b>01:35 PM</b>	
Date Notified <b>04/25/2020</b>		Time Notified <b>01:27 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 type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone	<input 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
	Additional Information <b>NONE</b>

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

UNIT 2 WAS TRAVELING NORTH ON US 12. UNIT 1 SAID A CAR IN FRONT OF HIM WAS BRAKING TO EXIT QUICKLY. UNIT 1 STATED INSTEAD OF STOPPING QUICKLY HE CHECKED LANE 1 AND MERGED LANES. UNIT 1 STATED UNIT 2 MUST HAVE BEEN IN HIS BLIND SPOT. THE VEHICLES SIDESWEPT NEAR THE MIDDLE OF THE 2 LANE HIGHWAY. 9109

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**Location**

<b>INTERSECTION ON USH12 WB AT RAMP USH12 WB IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY</b>	Latitude <b>43.470359995</b>	Longitude <b>-89.775749207</b>
	X Coordinate <b>275481.84375</b>	Y Coordinate <b>4816792.5</b>
	Structure Type	

**Crash Scene**

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>	First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>07 - SIDESWIPE/SAME DIRECTION</b>	Light Condition <b>DAWN</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>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</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>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>YES</b>	Direction Of Travel <b>NORTHBOUND</b>	<input type="checkbox"/> <b>Pre Crash Tire Mark</b>	Speed Limit <b>65</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 W/TRAFFIC BARRIER</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>CONCRETE</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>					

<b>UNIT 01 VEHICLE</b>	<b>Vehicle</b>					
	License Plate Number <b>MYBLIST</b>		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
	Vehicle Identification Number <b>1FM5K7D83JGB69765</b>		Make <b>FORD</b>	Year <b>2018</b>	Model <b>EXPLORER</b>	
	Color <b>WHI - WHITE</b>		Body Style <b>UT - SPORT UTILITY VEHICLE</b>		Bus Use	
	Initial Contact Point <b>08 - LEFT SIDE REAR</b>		Vehicle Damage			
	Extent Of Damage <b>MINOR DAMAGE</b>		<b>08 - LEFT SIDE REAR</b>			

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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OWNER</b>		
	What Driver Was Doing <b>CHANGING LANES</b>		Vehicle Factors		
	Driver Prior Action Other		<b>NOT APPLICABLE</b>		
	Driver Actions <b>LOOKED BUT DID NOT SEE</b>				
01	01	Owner Name <b>ERNEST N KALB (262) 749-4001</b>		Owner Address <b>E2301 CROSS TRAILS DR LA VALLE, WI 53941 , US</b>	
		<b>Sequence Of Events</b>			
UNIT INDIVIDUAL	01	01	Event <b>MOTOR VEH IN TRANSPORT</b>		
		02	Event		
		03	Event		
		04	Event		
UNIT	<b>Policy Holder</b>				
	Insurance Company <b>STATE-FARM-GENERAL-INS-CO</b>		Individual <b>ERNEST KALB</b>		
UNIT	<b>Individual</b>				
	Driver <b>ERNEST N KALB (262) 749-4001</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>	
	Address <b>E2301 CROSS TRAILS DR LA VALLE, WI 53941 , US</b>		Date of Birth	Race <b>WHITE</b>	
	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>				
01	001	<b>Safety Equipment</b>		On Duty Crash	
				Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
		Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</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>					

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UNIT	INDIVIDUAL	<b>Non Motorist</b>		Striking Unit #	Location	
		Prior Action				
		Action				
01	001	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>Individual</b>				
		Passenger <b>VIRGINIA JANE KALB (262) 749-4001</b>			Citations Issued <b>0</b>	Sex <b>FEMALE</b>
		Address <b>E2301 CROSS TRAILS DR LA VALLE, WI 53941 , US</b>			Date of Birth	Race <b>WHITE</b>
		Driver License Number			<b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01	002	<b>Safety Equipment</b>		On Duty Crash		
		Safety Equipment		<b>SHOULDER &amp; LAP BELT</b>		
		Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</b>	Helmet Compliance		
		Helmet Use		Tint Compliance		
		Eye Protection		Airbag <b>NON DEPLOYED</b>		
		<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		
Distracted By Action						
<b>Non Motorist</b>		Striking Unit #	Location			

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UNIT	INDIVIDUAL	Prior Action		
		Action		
		Action Other	To/From School	
	01	002	<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>				

**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>(SPORT) UTILITY VEHICLE</b>	Operating As Endorsements			
		Total Occs <b>2</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>NORTHBOUND</b>	<input type="checkbox"/> <b>Pre Crash Tire Mark</b>	Speed Limit <b>65</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 W/TRAFFIC BARRIER</b>		Traffic Control <b>NO CONTROL</b>	Traffic Control Inoperative/Missing <b>NO</b>	
		Surface Type <b>CONCRETE</b>		Road Curvature <b>STRAIGHT</b>	Road Grade <b>LEVEL</b>	
		Truck Bus or HazMat <b>NO</b>				

UNIT	02	<b>Vehicle</b>			
		License Plate Number <b>738XMN</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>2GNALBEK3F6387507</b>	Make <b>CHEVROLET</b>	Year <b>2015</b>	Model <b>EQUINOX</b>
		Color <b>WHI - WHITE</b>	Body Style <b>UT - SPORT UTILITY VEHICLE</b>	Bus Use	
		Initial Contact Point <b>02 - RIGHT SIDE FRONT</b>	Vehicle Damage		
		Extent Of Damage <b>FUNCTIONAL DAMAGE</b>	<b>02 - RIGHT SIDE FRONT</b>		
		Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OWNER</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>NO CONTRIBUTING ACTION</b>			
	Owner Name <b>ASHLEY M KINGCADE (608) 434-2803</b>		Owner Address <b>E10804 DEER RUN RD BARABOO, WI 53913 , US</b>	
UNIT 02	<b>Sequence Of Events</b>			
	01	Event <b>MOTOR VEH IN TRANSPORT</b>		
	02	Event		
	03	Event		
UNIT 04	Event			
	<b>Policy Holder</b>			
UNIT INDIVIDUAL	Insurance Company <b>AMERICAN-FAMILY-INS-CO</b>		Individual <b>LOGAN MARSICH</b>	
	<b>Individual</b>			
UNIT INDIVIDUAL	Driver <b>LOGAN JAMES MARSICH (608) 434-2803</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
	Address <b>1151 CANYON ROAD UNIT 4 WISCONSIN DELLS, WI 53965 , US</b>		Date of Birth	Race <b>WHITE</b>
UNIT INDIVIDUAL	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		Safety Equipment	
	<b>Safety Equipment</b>		On Duty Crash	
UNIT 02	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>SHOULDER &amp; LAP BELT</b>	
	Helmet Use		Helmet Compliance	
UNIT 003	Eye Protection		Tint Compliance	
	<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
UNIT 003	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 #
UNIT 003	Hospital		Date of Death	Time of Death
	<b>Distracted By</b>			
UNIT 003	Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>			
	Distracted By Action <b>NOT DISTRACTED</b>			
UNIT 003	<b>Non Motorist</b>			
	Striking Unit #		Location	

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UNIT	INDIVIDUAL	Prior Action	
		Action	
02	003	Action Other	
		To/From School	
02	003	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>
			Suspected Drug Use <b>NO</b>
02	003	Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type
			Alcohol Test Results
02	003	Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type
			Drug Test Results
02	003	Drug Type	
		Individual Condition <b>APPEARED NORMAL</b>	
UNIT	INDIVIDUAL	<b>Individual</b>	
		Passenger <b>ASHLEY MARIE KINGCADE (608) 434-2803</b>	Citations Issued <b>0</b>
02	004	Sex <b>FEMALE</b>	Date of Birth
		Race <b>WHITE</b>	Driver License Number
02	004	Address <b>E10804 DEER RUN RD BARABOO, WI 53913 , US</b>	<b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>
		<b>Safety Equipment</b>	On Duty Crash
02	004	Safety Equipment	<b>SHOULDER &amp; LAP BELT</b>
		Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</b>
02	004	Helmet Use	Helmet Compliance
		Eye Protection	Tint Compliance
02	004	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>
			Airbag <b>NON DEPLOYED</b>
02	004	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>
			Trapped/Extricated <b>NOT TRAPPED</b>
02	004	Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier
			EMS Run #
02	004	Hospital	Date of Death
			Time of Death
02	004	<b>Distracted By</b>	Distracted By Source
			Distracted By Action
02	004	<b>Non Motorist</b>	Striking Unit #
			Location
02	004	Prior Action	

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<b>UNIT</b>	<b>INDIVIDUAL</b>			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>004</b>					