

WISCONSIN MOTOR VEHICLE
CRASH REPORT

6TL09CGFDC

Document Number Override		Primary Crash Document #	Agency Crash Number 20-05191	Investigating Officer/Deputy DEPUTY K. MUELLER	
Crash Date 06/02/2020		Crash Time 07:29 PM	Date Arrived 06/02/2020	Time Arrived 07:48 PM	
Date Notified 06/02/2020		Time Notified 07:29 PM	Total Units 02	Total Injured 03	Total Killed 00
<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 NO		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

<p>Diagram</p>	Reconstruction By
	Photos By
	Additional Information NONE

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

UNIT 1 WAS DRIVING EAST ON WEIDNER RD AND CROSSED THE CENTER LINE STRIKING UNIT 2. THE DRIVER OF UNIT 1 ADMITTED TO CROSSING THE CENTER OF THE ROADWAY DUE TO LOOKING AT DEER. THE DRIVER OF UNIT 1 HAD OPEN ALCOHOL IN THE VEHICLE. THE DRIVER OF UNIT 1 PERFORMED FIELD SOBRIETY TESTS AND WAS NOT PLACED UNDER ARREST.

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Location

ON WEIDNER RD 62 FT W OF SOELDNER RD IN THE TOWN OF SPRING GREEN IN SAUK COUNTY	Latitude 43.220580333	Longitude -90.029976097
	X Coordinate 253909.640625	Y Coordinate 4789768.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 02 - FRONT TO FRONT	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLOUDY		
Animal Type	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION

Unit Summary

UNIT	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR	Operating As Endorsements			
	Total Occs 2	Train/Bus # Recorded	Total # Citations Issued 2	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT	Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED	Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)	Road Curvature CURVE RIGHT		Road Grade HILLCREST	
	Truck Bus or HazMat NO				

UNIT	Vehicle				
	01	License Plate Number AFA8589	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 3VWEG71K57M148952	Make VOLKSWAGEN	Year 2007	Model JETTA WOLF
	VEHICLE	Color SIL - SILVER (ALUMINUM)	Body Style 4D - 4DR		Bus Use
		Initial Contact Point 11 - LEFT FRONT CORNER	Vehicle Damage 01 - RIGHT FRONT CORNER, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT		
Extent Of Damage DISABLING DAMAGE					

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UNIT	VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By			
		What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors			
		Driver Prior Action Other		NOT APPLICABLE			
		Driver Actions WRONG SIDE OR WRONG WAY, FAILED TO KEEP IN DESIGNATED LANE, OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER					
01	01	Owner Name MELVIN A ZECH (608) 293-1088		Owner Address E8611 WITWEN RD SAUK CITY, WI 53583 , US			
		Sequence Of Events					
UNIT	VEHICLE	01	Event CROSS CENTERLINE				
		02	Event MOTOR VEH IN TRANSPORT				
		03	Event				
		04	Event				
UNIT	VEHICLE	Policy Holder					
		Insurance Company AMERICAN-FAMILY-INS-CO		Individual MELVIN ZECH			
UNIT	INDIVIDUAL	Individual					
		Driver ALEXANDER ARTHUR ZECH (608) 609-0759		Citations Issued 2	Sex MALE		
		Address E8611 WITWEN RD SAUK CITY, WI 53583 , US		Date of Birth	Race WHITE		
		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
01	001	Safety Equipment		On Duty Crash			
		Row 01 - FRONT ROW		Seat Position 07 - LEFT			
		Helmet Use		Safety Equipment SHOULDER & LAP BELT			
		Eye Protection		Helmet Compliance			
		Injury POSSIBLE INJURY		Airbag DEPLOYED-FRONT			
		Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED	
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #	
		Hospital		Date of Death		Time of Death	
Distracted By		Distracted By Source OTHER DISTRACTION (ANIMAL, FOOD, GROOMING)					
Distracted By Action OTHER ACTION (LOOKING AWAY FROM TASK ETC)							

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UNIT	Non Motorist		Striking Unit #	Location		
	Prior Action					
	Action					
	Action Other			To/From School		
01	001	Drug & Alcohol		Suspected Alcohol Use YES	Suspected Drug Use NO	
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results	
		Drug Type				
		Individual Condition APPEARED NORMAL				
		Individual				
		Passenger KEEGAN JOSEPH GERBIG		Citations Issued 0	Sex MALE	
				Date of Birth	Race WHITE	
		Address 28860 CLARY LN RICHLAND CENTER, WI 53581 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
		01	002	Safety Equipment		On Duty Crash
Row 01 - FRONT ROW	Seat Position 09 - RIGHT			NONE USED - VEHICLE OCCUPANT		
Helmet Use				Helmet Compliance		
Eye Protection				Tint Compliance		
Injury				Injury Severity SUSPECTED MINOR INJURY	Airbag DEPLOYED-FRONT	
Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE			Trapped/Extricated NOT TRAPPED		
Medical Transport EMS GROUND				EMS Agency Identifier 6000554	EMS Run #	
Hospital SAUK PRAIRIE HOSP				Date of Death	Time of Death	
Distracted By				Distracted By Source		
Distracted By Action						
Non Motorist		Striking Unit #	Location			

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UNIT	INDIVIDUAL	Prior Action				
		Action				
		Action Other			To/From School	
	01	002	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO
			Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	Alcohol Test Results
			Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results
			Drug Type			
			Individual Condition APPEARED NORMAL			
	01	01	Violations			
			UTC Number BD755624	Issue To? 001	Statute Number 346.05(1)	Description OPERATING LEFT OF CENTER
UTC Number BD755625			Issue To? 001	Statute Number 346.935(2)	Description POSSESS OPEN INTOXICANTS IN MV-DRIVER	

Unit Summary

UNIT	02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type TRUCK		
		Vehicle Type UTILITY TRUCK/PICKUP TRUCK					Operating As Endorsements	
		Total Occs 1	Train/Bus # Recorded		Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
		Insurance? YES	Direction Of Travel WESTBOUND		<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2	
		Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT			Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
		Traffic Way TWO-WAY, NOT DIVIDED			Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
		Surface Type BLACKTOP (BITUMINOUS)			Road Curvature CURVE LEFT		Road Grade HILLCREST	
		Truck Bus or HazMat NO						

02	02	Vehicle				
		License Plate Number RX8964		Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1FTSW21P45ED26506		Make FORD	Year 2005	Model F250
		Color RED - RED		Body Style PK - PICKUP		Bus Use
		Initial Contact Point 11 - LEFT FRONT CORNER				

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UNIT VEHICLE	Vehicle Damage	
	Extent Of Damage DISABLING DAMAGE	01 - RIGHT FRONT CORNER, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT
	Towed Due To Damage NOT TOWED	Vehicle Removed By
	What Driver Was Doing NEGOTIATING CURVE	Vehicle Factors
UNIT VEHICLE	Driver Prior Action Other	NOT APPLICABLE
	Driver Actions NO CONTRIBUTING ACTION	
	Owner Name JT CULTIVATION INC (608) 206-4875	Owner Address S11440 BUTTERNUT RD SPRING GREEN, WI 53588 , US
	Sequence Of Events	
UNIT VEHICLE	Event 01 MOTOR VEH IN TRANSPORT	
	Event 02	
	Event 03	
	Event 04	
UNIT VEHICLE	Policy Holder	
	Insurance Company PROGRESSIVE-CLASSIC-INS-CO	Individual RITA TAFS
UNIT INDIVIDUAL	Individual	
	Driver RITA ANN TAFS (608) 206-4875	Citations Issued 0
		Sex FEMALE
		Date of Birth
UNIT INDIVIDUAL	Address S11440 BUTTERNUT RD SPRING GREEN, WI 53588 , US	Race WHITE
	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
	Safety Equipment	
	On Duty Crash	Safety Equipment
UNIT INDIVIDUAL	Row 01 - FRONT ROW	Seat Position 07 - LEFT
	SHOULDER & LAP BELT	
	Helmet Use	Helmet Compliance
	Eye Protection	Tint Compliance
UNIT INDIVIDUAL	Injury	Injury Severity POSSIBLE INJURY
	Airbag NON DEPLOYED	
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE
	Trapped/Extricated NOT TRAPPED	
UNIT INDIVIDUAL	Medical Transport NOT TRANSPORTED	EMS Agency Identifier
	EMS Run #	
	Hospital	Date of Death
		Time of Death

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UNIT	Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)			
	Distracted By Action NOT DISTRACTED					
	Non Motorist		Striking Unit #	Location		
	Prior Action					
	Action					
	Action Other				To/From School	
	Drug & Alcohol		Suspected Alcohol Use NO		Suspected Drug Use NO	
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type		Alcohol Test Results	
	Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	
	Drug Type					
02	003	Individual Condition				
		APPEARED NORMAL				