

6TL0B8M7WT
20-05840

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 20-05840	Investigating Officer/Deputy DEPUTY B. MEARS	
Crash Date 06/18/2020		Crash Time 12:19 PM	Date Arrived 06/18/2020	Time Arrived 12:21 PM	
Date Notified 06/18/2020		Time Notified 12:19 PM	Total Units 02	Total Injured 02	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

Diagram	Reconstruction By
	Photos By DEPUTY MEARS
	Additional Information PHOTOS

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

UNIT 1 WAS STOPPED AT THE STOP SIGN ON BIG HOLLOW RD AT USH 14 FACING NORTHBOUND. UNIT #2 AND A NON CONTACT UNIT WERE WEST BOUND ON USH 14. UNIT #1 STARTED TO CROSS USH 14 TO CONTINUE ON BIG HOLLOW RD, FAILING TO YIELD TO THE OTHER UNITS THAT WERE WESTBOUND ON THE TROUGH HIGHWAY USH 14. THE NON CONTACT UNIT DRIVER STATED SHE SWERVED SHARPLY TO AVOID UNIT 1. UNIT #2 OPERATOR STATED THAT DUE TO THE UNIT NEXT TO HIM, HE DID NOT SEE UNIT #1 RIGHT AWAY AND THEN WHEN HE DID, HE SWERVED SHARPLY TO TRY TO AVOID IT, BUT STRUCK IT WITH THE RIGHT FRONT CORNER OF HIS UNIT. UNIT #1 SLID ONTO ITS TOP AND THEN SLID ABOUT 30 FEET WHERE IT CAME TO REST IN THE ROADWAY ON ITS TOP FACING SE. UNIT 1 HAD SEVERE DAMAGE AND WAS REMOVED BY GEORGES. OPERATOR HAD NO VISIBLE INJURIES OR COMPLAINTS BUT WAS CONFUSED. HE WAS SEEN BY SPRING GREEN AMBULANCE AND REFUSED TRANSPORT BY THE AMBULANCE, BUT WAS TAKEN TO RICHLAND CENTER HOSPITAL TO BE CHECKED BY HIS WIFE LINDA. OPERATOR OF UNIT 2 WAS ALSO SEEN BY SPRING GREEN AMBULANCE FOR PAIN/INJURY TO HIS RIGHT HAND. HE REFUSED TRANSPORT. HIS UNIT ENDED UP ON THE SOUTH SIDE SHOULDER OF USH 14 ABOUT 300 FT WEST OF BIG HOLLOW RD FACING SW. HIS VEHICLE HAD FRONT/SIDE DAMAGE. HE WAS ABLE TO DRIVE IT AWAY. UNIT #1 OPERATOR WAS CITED BY MAIL FOR FAILURE TO YIELD FROM A TOP SIGN (BODILY HARM).

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Location

ON USH14 WB 10 FT W OF BIG HOLLOW RD IN THE TOWN OF SPRING GREEN IN SAUK COUNTY	Latitude 43.189801203	Longitude -90.113539858
	X Coordinate 246994.984375	Y Coordinate 4786599.5
	Structure Type	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 01 - ANGLE	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLEAR		
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 INTERSECTION	Intersection Type FOUR-WAY INTERSECTION

Unit Summary

UNIT	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE		
	Vehicle Type (SPORT) UTILITY VEHICLE	Operating As Endorsements			
	Total Occs 01	Train/Bus # Recorded	Total # Citations Issued 01	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 03
	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 STOP SIGN		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)	Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO				

UNIT	VEHICLE	Vehicle			
		License Plate Number 491GKH	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number JTMRFREV4GD186515	Make TOYOTA	Year 2016	Model RAV4 XLE
		Color GRY - GRAY	Body Style UT - SPORT UTILITY VEHICLE		Bus Use
		Initial Contact Point 04 - RIGHT SIDE REAR	Vehicle Damage		
Extent Of Damage DISABLING DAMAGE	15 - ALL AREAS				

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Form containing vehicle information, sequence of events, policy holder details, individual driver information, safety equipment, and injury details. Includes fields for driver name, address, license, and injury severity.

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UNIT	INDIVIDUAL	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					
	Individual Condition		CONFUSED OR DISORIENTED (NON LUCID)			
	Violations					
01	UTC Number AD981048	Issue To? 001	Statute Number 346.18(3)	Description FAIL/YIELD RIGHT/WAY FROM STOP SIGN (RESULTING BODILY HARM)		

Unit Summary

UNIT	02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE		
		Vehicle Type (SPORT) UTILITY VEHICLE				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 checked="" type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 3		
		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 STRAIGHT		Road Grade LEVEL	
		Truck Bus or HazMat NO						

02	02	Vehicle						
		License Plate Number 958156		Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES		
		Vehicle Identification Number 1D4HB48N34F101057		Make DODGE	Year 2004	Model DURANGO SL		
		Color BLU - BLUE		Body Style UT - SPORT UTILITY VEHICLE		Bus Use		
		Initial Contact Point 01 - RIGHT FRONT CORNER						

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UNIT VEHICLE	Vehicle Damage	
	Extent Of Damage FUNCTIONAL DAMAGE	01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 12 - FRONT
	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR
	What Driver Was Doing GOING STRAIGHT	Vehicle Factors
UNIT VEHICLE	Driver Prior Action Other	NOT APPLICABLE
	Driver Actions NO CONTRIBUTING ACTION	
	Owner Name JESSE A JAMES (608) 583-2454	Owner Address E3166 FLOWAGE RD LONE ROCK, WI 53556 , US
	Sequence Of Events	
UNIT VEHICLE	Event 01 MOTOR VEH IN TRANSPORT	
	Event 02	
	Event 03	
	Event 04	
UNIT VEHICLE	Policy Holder	
	Insurance Company SECURA-INS-A-MUTUAL-CO	Individual JESSE JAMES
UNIT INDIVIDUAL	Individual	
	Driver JESSE A JAMES (608) 583-2454	Citations Issued 0
		Sex MALE
		Date of Birth WHITE
UNIT INDIVIDUAL	Address E3166 FLOWAGE RD LONE ROCK, WI 53556 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES
	Safety Equipment	
	On Duty Crash	Safety Equipment SHOULDER & LAP BELT
	Row 01 - FRONT ROW	Seat Position 07 - LEFT
UNIT INDIVIDUAL	Helmet Use	Helmet Compliance
	Eye Protection	Tint Compliance
	Injury	Injury Severity SUSPECTED MINOR INJURY
		Airbag DEPLOYED-FRONT
UNIT INDIVIDUAL	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE
		Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED	EMS Agency Identifier
	Hospital	Date of Death
UNIT INDIVIDUAL		EMS Run #
		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	002	Individual Condition APPEARED NORMAL				