Wisconsin Motor Vehicle Crash Report

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

	Document Number Override Primary Cr Crash Date Crash Time 08/13/2020 06:51 PM Date Notified Time Notifi				sh Document #		Agency Crash Number 20-10057				Investigating Officer/Deputy DEPUTY S. PARKHURST								
								Date Arrived			Time Arrived								
G 9								2020			07:01 PM								
က္					ı	Total Units				Total Injured	Tota	l Killed	<u> </u>						
3 P 3G	08/13/2020 06:5			06:52 PM	6:52 PM			01			01	00		1					
0B	On Emergency Hit and Run La			Lane	Closure		Work Zone		Trailer or Towe		d		Reporting Threshold						
eTL	Governi Prope		Active School Zone				School Bus Related NO			Tags									
	Reportable Crash Type DT4000 (STAND)					CRASH)					I Amended I I			Secondary Crash	•				
ļ	ocation																		
	ON STH23 WB					Latitu		_	Longitude		t/LongSource		Acces	s Contro	ol				
	556 FT W OF ABLEMAN R	D					3293611	1	-89.91911		LT/ILT								
	IN THE TOWN O			ordinate 128.9062	2	Y Coordina 4824139.		n Roadway Link ID 565257	#	On Ro	oadway l	_ink Offset							
	IN SAUK COUNT	1 1					[_	Tribal Land				Struct	ure Type	ay Link Offset				
						Ove	erride												
(Crash Scene					I 5 :4													
First Harmful Event							Harmiui E ADSIDE	=ven	nt Location										
CULVERT Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT Road Surface Condition(s)							Condition	n											
							DAYLIGHT Environment Factor(s)												
	DRY					NONE													
	Roadway Factor(s)							Weather Condition(s)											
	NONE Animal Type					CLEAR													
						Relation To Trafficway													
						TRAFFICWAY - NOT ON ROAD Crash Classification - Jurisdiction													
	PUBLIC PROPERTY								URISDICT										
	Tribal Land								ecial Study										
	Within Interchange	Δrea	lun	ction Location		NO			section Type										
	NO NO	Alea		N-JUNCTIC					Γ AN INTE		ON								
į	Unit Summary	/																	
	Unit Status			'	Vehicle Operatin	ng As C	Classificat	ion		Unit Type									
	IN TRANSIT			I	D CLASS					AUTOM	OBILE								
0	Vehicle Type PASSENGER CA	AR								Operating	As Endorsements								
	Total Occs 1	Train/Bu	us # Red		Γotal # Citations)	Issued To			Total Trailer	3	Total HazMat Types 0								
UNIT	Insurance? Direction Of Tr. YES WESTBOUN			o					Speed Limit 55		Total Lanes 2								
5	Most Harmful Event: Collision With Special Function NO SPECIA					FUNC	CTION			Emergend NOT AP	cy Motor Vehicle Us PLICABLE	se							
	Traffic Way Traffic Control								Traffic Co	ontrol Inoperative/Missing									
	TWO-WAY, NOT DIVIDED NO CONTROL					L		_		NO									
	Surface Type Road Curvature					Road Grad				de									
	BLACKTOP (BITUMINOUS) STRAIGHT									LEVEL									
6	Truck Bus or HazMa	at																	

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_		Role DRIVER			Citations Issued 0			se Driver Address						
5	01	Last Name HART			First Name HERMAN		1		Middle Initia	al	Suffix			
		Street Address 1160 19TH ST AP	Г3		Street Address 2				PO Box	РО Вох				
_	JAL	City REEDSBURG			State WI		Zip Code 53959		Country of Residence UNITED STATES					
LNO	INDIVIDUAL	DOB	Sex M	Race W		Eyes BRO \	WN	Height 507	Weight 250	Phone I	Number			
	IND	Driver's License Num	ber		State WI		License Ju STATE	ursidiction		Country of Issuance UNITED STATES				
		License Type NON-CDL DRIVER	R'S LICENS		License Status VALID LICENS	E			DL Expire \ 2028	Year				
		Equipment	On Duty Acc		Safety Equipment									
		Row 01 - FRONT ROW	SHOULDER &	LAP	BELT									
	01	Helmet Use	L		Helmet Compliand	се	_							
		Eye Protection			Tint Compliance		/,	,						
		Injury	Injury Severi	ty E D MINOR INJURY	Airbag DEPLOYED-FF	ONT	X							
⊨	DUA	Ejected NOT EJECTED			Ejection Path NOT EJECTED	/NOT	APPLIC	Trapped/E A TRAPPE	D/NOT EXTRICATED					
LNO	INDIVIDUAL	MedicalTransport EMS GROUND			EMS Agency Ider 6001024	tifier		EMS Run	#					
	∠	Hospital REEDSBURG ARI	EA MED CT	R	Date of Death			Time of De	eath					
		Non Motorist	Striking Unit	#	Location			To/FromSo	chool					
		Prior Action			Action									
	01	Distracted By Action NOT DISTRACTE)											
		Distracted By Source NOT APPLICABLE		TRACTED)	Action Other									
		Drug & Alcoh	Individual Co	ondition D NORMAL										
	٦F	Suspected Alcohol Us NO	Suspected Drug U	Jse										
LNO	INDIVIDUAL	Alcohol Test Given TEST NOT GIVEN	71		1			Alcohol Tes	st Resul	ts				
_	INDI	Drug Test Given TEST NOT GIVEN		Drug Test Type										
		Drug Type												
		License Plate Numbe ABR4334	r		Plate Type AUT - AUTOMO	=		Country of Issuance JNITED STATES						
		Vehicle Identification	Number						Make					
		1G4HD57208U111	286					BUICK						
		Model LUCRENE			Body Style 4D - 4DR			Color SIL - SILVER (ALUMINUM)						
		Initial Contact Point						I			-			
		12 - FRONT												

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Crash Date 08/13/2020

Crash Time 06:51 PM

					Vehicle D	amage								
	Extent Of Damage				15 - ALL AREAS									
5	01	DISABLING DAMAGE				The results								
		Towed Due To Damage	Vehicle Factors											
		TOWED BUT NOT DUE TO DISABLI	MAG											
		Vehicle Removed By				PLICABLE								
		STEVES AUTO SERVICE												
		What Driver Was Doing		Driver Pri	or Action Other			Bus Us	e					
		GOING STRAIGHT								,				
LIND	VEHICLE	Driver Actions RAN OFF ROADWAY												
		✓ Vehicle Owner Same As Operato			Use Operator Address									
		Organization Type INDIVIDUAL	Compa	ny Name										
		Last Name	First Na	ame			Middle		Suffix Date of Birth					
		HART	HERM			4	Α							
		Street Address Street Address					PO Bo	X						
		1160 19TH ST APT 3	T-7: 0 1	de Country of Residence										
		City St Zip Co REEDSBURG WI 53959						ED STAT						
		Telephone Number	00000	ONITED STATES										
		·												
	70	Event CULVERT												
•	8 Event OVERTURN/ROLLOVER													
•	03	Event												
	94	Event												
₽ĺ		Insurance Company LENTZ INS			V	Policy Holder Same As Owne	er [Policy	Holde	Same As D	river			
ENO.	된	Organization Type Last Name INDIVIDUAL HART	1					Policy Holde	older Company					
Ī	Prop	perty Owner												
		idual ANOR A MONTGOMERY 3) 524-4404			Address E8054 REEDS	STH 33 BURG, WI 539	59 , U	s						
	Fixe	ed Objects Struck												
	10	Striking Unit Struck Object CULVERT							Structu	ire Number	Damage Tag Number 000000			
i	Des	cription												
	Diag									Reconstructio	n By			
	J													
										Photos By 9116				

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	E80 STH					Additic PHO	onal Information
		<u> </u>					
		-	ST	H 33			
			No	ot to scale			
	STH 33. THE VEH B	ENTERED THE NORTH	ERN DI	TCH. WHILE TF	RAVEL	NG IN THE DITCH THE VEH	STRUCK A CULVERT. THE VEH
TRAVELED OVER THE DRIVEW Signature	AY AND OVERTUR	RNED. THE VEH CAME	TO RE	ST ON ITS RO	OF.		
I, a sworn law enforce	ment officer, ag	ree that I have not	adde	d any CJIS o	data i	this report.	
Law Enforcement Age	ency —						
Agency Space							
Officer Rank DEP Officer L PARKH		Officer First N	Name				Suffix
DOT Officer ID DNR Officer ID Officer Badge Number 9116							
Officer EMail							
Local Agency Number	Law Enforce	ement Agency Jurisdict	ion			Law Enforcement Agency to	уре
Law Enforcement Agency Name SAUK COUNTY SHERIFFS				Agency Name K COUNTY S	SHER		
Law Enforcement Agency Stree 1300 LANGE COURT						Street Address2	
Law Enforcement Agency City BARABOO	LE W	EA State	L	Law Enforce	ment A	gency Zip Code	

Wisconsin Motor Vehicle Crash Form DT4000

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Law Enforcement Agency Phone Number	ORI Number	BFUNC Agency	TraCS Agency Number
(608) 356-4895 EXT.	WI0570000	5600	205