

6TL0DDT5JQ  
20-11542

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 <b>6TL0D7W13M</b>		Primary Crash Document#	Agency Crash Number <b>20-11542</b>	Investigating Officer/Deputy <b>DEPUTY K. MUELLER</b>	
Crash Date <b>09/26/2020</b>		Crash Time <b>12:21 PM</b>	Date Arrived <b>09/26/2020</b>	Time Arrived <b>12:35 PM</b>	
Date Notified <b>09/26/2020</b>		Time Notified <b>12:22 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 checked="" 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 1 AND UNIT 2 WERE BOTH TURNING NORTH ON TO COUNTY RD BD. UNIT 1 WAS TURNING LEFT FROM A BUSINESS. UNIT 2 WAS TURNING RIGHT FROM BERKLEY BLVD. UNIT 1 AND UNIT TWO COLLIDED AS THEY BOTH TURNED, BOTH SAID THEY STAYED IN THEIR LANE. THERE WAS NO EVIDENCE AT THE SCENE OF THE ACCIDENT TO DETERMINE WHO CROSSED THEIR LANE AS THEY TURNED.  
ON 10/5/2020 I REVIEWED VIDEO OF THE ACCIDENT, WHICH WAS OBTAINED THROUGH THE CLARION HOTEL. UNIT 2 CLEARLY MADE AN ILLEGAL TURN BY TURNING IN TO THE INCORRECT LANE AS IT WAS TURNING RIGHT. UNIT 2 WAS AT FAULT FOR THE ACCIDENT.

ADDITIONAL INFORMATION/VIDEO OF ACCIDENT OBTAINED. EDITED INFORMATION INCLUDES CONTRIBUTING "DRIVER ACTIONS" FOR UNIT 2, DIAGRAM, AND NARRATIVE.

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**Location**

ON BERKLEY BLVD 12 FT E OF CTHBD NB IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY	Latitude 43.47708889	Longitude -89.768796749
	X Coordinate 276069.09375	Y Coordinate 4817521.5
	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>01 - ANGLE</b>	Light Condition <b>DAYLIGHT</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>FULL CONTROL</b>	Special Study
Within Interchange Area <b>YES</b>	Junction Location <b>INTERSECTION</b>	Intersection Type <b>FOUR-WAY INTERSECTION</b>

**Unit Summary**

<b>UNIT</b>	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>AUTOMOBILE</b>		
	Vehicle Type <b>PASSENGER CAR</b>	Operating As Endorsements			
	Total Occs <b>1</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>35</b>	Total Lanes <b>4</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/O TRAFFIC BARRIER</b>	Traffic Control <b>STOP SIGN</b>	Traffic Control Inoperative/Missing <b>NO</b>		
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>	Road Curvature <b>STRAIGHT</b>	Road Grade <b>LEVEL</b>		
	Truck Bus or HazMat <b>NO</b>				

**Vehicle**

<b>01</b>	<b>01</b>	License Plate Number <b>102TEX</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>JF1ZNAA10K8702190</b>	Make <b>TOYOTA</b>	Year <b>2019</b>	Model <b>86</b>
		Color <b>BLU - BLUE</b>	Body Style <b>CP - COUPE</b>	Bus Use	
		Initial Contact Point <b>01 - RIGHT FRONT CORNER</b>			

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UNIT VEHICLE	Vehicle Damage			
	Extent Of Damage <b>FUNCTIONAL DAMAGE</b>	01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT		
	Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OWNER</b>		
	What Driver Was Doing <b>LEFT TURN</b>	Vehicle Factors		
UNIT VEHICLE	Driver Prior Action Other	<b>NOT APPLICABLE</b>		
	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
	Owner Name <b>PAVAN VASANT PATEL (608) 404-2404</b>	Owner Address <b>750 W PINE ST BARABOO, WI 53913 , US</b>		
	<b>Sequence Of Events</b>			
UNIT VEHICLE	Event <b>MOTOR VEH IN TRANSPORT</b>			
	Event			
	Event			
	Event			
UNIT VEHICLE	<b>Policy Holder</b>			
	Insurance Company <b>WILSON-MUTUAL-INS-CO</b>	Individual <b>PAVAN PATEL</b>		
	<b>Individual</b>			
UNIT INDIVIDUAL	Driver <b>PAVAN VASANT PATEL (608) 404-2404</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>	
		Date of Birth <b>[REDACTED]</b>	Race <b>ASIAN</b>	
	Address <b>750 W PINE ST BARABOO, WI 53913 , US</b>	Driver License Number <b>[REDACTED]</b> <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
	<b>Safety Equipment</b>			
UNIT INDIVIDUAL	On Duty Crash		Safety Equipment	
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>SHOULDER &amp; LAP BELT</b>	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	UNIT INDIVIDUAL	<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	

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<b>UNIT</b>	<b>Distracted By</b>	Distracted By Source <b>UNKNOWN</b>		
		Distracted By Action <b>UNKNOWN</b>		
	<b>Non Motorist</b>	Striking Unit #	Location	
		Prior Action		
	Action			
	Action Other			To/From School
	<b>01</b>	<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
		Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results
		Drug Type		
Individual Condition <b>APPEARED NORMAL</b>				

**Unit Summary**

<b>UNIT</b>	<b>02</b>	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>AUTOMOBILE</b>	
		Vehicle Type <b>PASSENGER CAR</b>	Operating As Endorsements		
	Total Occs <b>3</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"/> Pre Crash Tire Mark	Speed Limit <b>35</b>	Total Lanes <b>4</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/O TRAFFIC BARRIER</b>		Traffic Control <b>STOP SIGN</b>	Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>	Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>				

**Vehicle**

<b>02</b>	<b>02</b>	License Plate Number <b>978VTA</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
		Vehicle Identification Number <b>1G11H5SLXEF280864</b>	Make <b>CHEVROLET</b>	Year <b>2014</b>	Model <b>MALIBU</b>	
		Color <b>GRY - GRAY</b>	Body Style <b>4D - 4DR</b>	Bus Use		
		Initial Contact Point <b>11 - LEFT FRONT CORNER</b>				

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UNIT VEHICLE	Vehicle Damage	
	Extent Of Damage <b>MINOR DAMAGE</b>	10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER
	Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OWNER</b>
	What Driver Was Doing <b>RIGHT TURN</b>	Vehicle Factors
UNIT VEHICLE	Driver Prior Action Other	<b>NOT APPLICABLE</b>
	Driver Actions <b>IMPROPER TURN</b>	
02 02	Owner Name <b>CORINNE S SCHUH (715) 314-1990</b>	Owner Address <b>2411 WILSON CT APT 15 APPLETON, WI 54915 , US</b>
	<b>Sequence Of Events</b>	
01 02 03 04	Event <b>MOTOR VEH IN TRANSPORT</b>	
	Event	
	Event	
	Event	
UNIT INDIVIDUAL	<b>Policy Holder</b>	
	Insurance Company <b>PROGRESSIVE-CLASSIC-INS-CO</b>	Individual <b>CORINNE SCHUH</b>
02 002	<b>Individual</b>	
	Driver <b>CORINNE S SCHUH (715) 314-1990</b>	Citations Issued <b>0</b>
		Sex <b>FEMALE</b>
		Date of Birth [REDACTED]
	Race <b>WHITE</b>	
	Address <b>2411 WILSON CT APT 15 APPLETON, WI 54915 , US</b>	Driver License Number [REDACTED] <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>
02 002	<b>Safety Equipment</b>	
	On Duty Crash	Safety Equipment
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>
	<b>SHOULDER &amp; LAP BELT</b>	
	Helmet Use	Helmet Compliance
Eye Protection	Tint Compliance	
02 002	<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>
	<b>NOT TRAPPED</b>	
	Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier
Hospital	Date of Death	
	EMS Run #	Time of Death

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<b>UNIT</b>	<b>INDIVIDUAL</b>	<b>Distracted By</b> Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>			
		Distracted By Action <b>UNKNOWN</b>			
		<b>Non Motorist</b>	Striking Unit #	Location	
		Prior Action			
		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			
<b>02</b>	<b>002</b>	Individual Condition <b>APPEARED NORMAL</b>			
		<b>Individual</b>			
		Passenger <b>REBECCA PLAHUTA</b> (715) 314-0858		Citations Issued <b>0</b>	Sex <b>FEMALE</b>
		Address <b>30480 370TH ST</b> <b>SHELDON, WI 54766 , US</b>		Date of Birth [REDACTED]	Race <b>WHITE</b>
				Driver License Number [REDACTED] <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
		<b>Safety Equipment</b>		On Duty Crash	Safety Equipment
		Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</b>	<b>SHOULDER &amp; LAP BELT</b>	
		Helmet Use		Helmet Compliance	
		Eye Protection		Tint Compliance	
		<b>02</b>	<b>003</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	

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UNIT INDIVIDUAL	Distracted By Action			
	<b>Non Motorist</b>		Striking Unit#	
	Location			
	Prior Action			
	Action			
	Action Other		To/From School	
	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use NO	
			Suspected Drug Use NO	
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	
			Alcohol Test Results	
02 003	Drug Test Given TEST NOT GIVEN		Drug Test Type	
			Drug Test Results	
	Drug Type			
	Individual Condition APPEARED NORMAL			
	<b>Individual</b>			
	Passenger RYAN C PINKALLA (612) 655-4696		Citations Issued 0	
			Sex MALE	
			Date of Birth [REDACTED]	
			Race WHITE	
	Address 4077 DIAMOND DR EAGAN, MN 55112 , US		Driver License Number [REDACTED] STATE: MINNESOTA COUNTRY: UNITED STATES	
UNIT INDIVIDUAL	<b>Safety Equipment</b>		On Duty Crash	
			Safety Equipment	
	Row 02 - SECOND ROW	Seat Position 09 - RIGHT	SHOULDER & LAP BELT	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	02 004	<b>Injury</b>		Injury Severity NO APPARENT INJURY
				Airbag NON DEPLOYED
		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		
<b>Distracted By</b>		Distracted By Source		
Distracted By Action				

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<b>UNIT</b> <b>INDIVIDUAL</b>      <b>02</b> <b>004</b>	<b>Non Motorist</b>	Striking Unit #	Location		
	Prior Action				
	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>				