

6TL0CBQ6NG
20-13013

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

6TL0CBQ6NG

Document Number Override		Primary Crash Document#	Agency Crash Number 20-13013	Investigating Officer/Deputy DEPUTY B. ZIBELL	
Crash Date 11/10/2020		Crash Time 07:29 PM	Date Arrived 11/10/2020	Time Arrived 07:32 PM	
Date Notified 11/10/2020		Time Notified 07:30 PM	Total Units 02	Total Injured 01	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 checked="" 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 ZIBELL
	Additional Information NONE, PHOTOS

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

ON 11/10/2020 UNIT 1 WAS TRAVELING SOUTHBOUND ON US HY 12. UNIT 1 CROSSED CENTER LINE AND ENTERED NORTHBOUND LANE. UNIT 1 COLLIDED WITH UNIT 2 HEAD ON. BOTH VEHICLES CAME TO A REST IN THE EAST SIDE DITCH. UNIT 1 DRIVER WAS IDENTIFIED THROUGH ND DL. UNIT 1 DRIVER WAS INFORMED AND EXPLAINED CITATION THROUGH MAIL. UNIT 1 DRIVER WAS COOPERATIVE.

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Location

ON USH12 EB 460 FT S OF USH12 EB IN THE TOWN OF SUMPTER IN SAUK COUNTY	Latitude 43.356559048	Longitude -89.768711994
	X Coordinate 275631	Y Coordinate 4804134.5
	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 DARK/UNLIT	
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 NON-JUNCTION	Intersection Type NOT AN INTERSECTION

Unit Summary

01 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 1	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel SOUTHBOUND	<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 DIVIDED HWY W/TRAFFIC BARRIER	Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type CONCRETE	Road Curvature CURVE RIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO				

Vehicle

01 UNIT VEHICLE	License Plate Number 642CKJ	Plate Type AUT - AUTOMOBILE	St ND	Country of Issuance UNITED STATES
	Vehicle Identification Number 3VWSS29M11M045044	Make VOLKSWAGEN	Year 2004	Model JETTA GLS
	Color SIL - SILVER (ALUMINUM)	Body Style 4D - 4DR		Bus Use
	Initial Contact Point 12 - FRONT	Vehicle Damage		
	Extent Of Damage DISABLING DAMAGE	01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 10 - LEFT SIDE FRONT, 12 - FRONT		

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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By BILLS TOWING		
	What Driver Was Doing LEAVING TRAVEL LANE		Vehicle Factors BODY, DOORS, HEAD LAMPS, MIRRORS, TIRES, WHEELS, WINDOWS /WIND SHIELD		
	Driver Prior Action Other				
	Driver Actions NO CONTRIBUTING ACTION				
01	01	Owner Name HARSHIT PARESHBHAI SHAH (816) 888-0899		Owner Address 514 30TH AVE N APT 9 FARGO, ND 58102 1577, US	
		Sequence Of Events			
UNIT VEHICLE	01	Event MOTOR VEH IN TRANSPORT			
	02	Event CROSS CENTERLINE			
	03	Event			
	04	Event			
UNIT	Policy Holder				
	Insurance Company STATE-FARM-GENERAL-INS-CO		Individual HARSHIT SHAH		
UNIT INDIVIDUAL	Individual				
	Driver HARSHIT PARESHBHAI SHAH (816) 888-0899		Citations Issued 1	Sex MALE	
	Date of Birth [REDACTED]		Race		
	Address 514 30TH AVE N APT 9 FARGO, ND 58102 1577, US		Driver License Number [REDACTED] STATE: NORTH DAKOTA COUNTRY: UNITED STATES		
01	001	Safety Equipment		On Duty Crash	
		Safety Equipment SHOULDER & LAP BELT			
		Row 01 - FRONT ROW	Seat Position 07 - LEFT		
		Helmet Use		Helmet Compliance	
Eye Protection		Tint Compliance			
Injury		Injury Severity NO APPARENT INJURY	Airbag DEPLOYED-COMBINATION		
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 NOT APPLICABLE (NOT DISTRACTED)			
Distracted By Action		NOT DISTRACTED			

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UNIT	INDIVIDUAL	Non Motorist		Striking Unit#	Location		
		Prior Action					
		Action					
		Action Other				To/From School	
01	001	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					
		Individual					
		Passenger BRINDA HARSHIT SHAH (816) 888-0899			Citations Issued 0	Sex FEMALE	
		Address 1173 17TH AVE N UNIT 97 FARGO, ND 58102 2385, US			Date of Birth [REDACTED]	Race	
		Driver License Number STATE: NORTH DAKOTA COUNTRY: UNITED STATES					
		Safety Equipment		On Duty Crash	Safety Equipment		
Row 01 - FRONT ROW	Seat Position 09 - RIGHT	SHOULDER & LAP BELT					
Helmet Use		Helmet Compliance					
Eye Protection		Tint Compliance					
01	002	Injury		Injury Severity NO APPARENT INJURY	Airbag DEPLOYED-COMBINATION		
		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					
Distracted By Action							
Non Motorist		Striking Unit#	Location				

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UNIT INDIVIDUAL
Prior Action
Action
Action Other To/From School
Drug & Alcohol Suspected Alcohol Use Suspected Drug Use
Alcohol Test Given Alcohol Test Type Alcohol Test Results
Drug Test Given Drug Test Type Drug Test Results
Drug Type
Individual Condition
Violations
UTC Number Issue To? Statute Number Description
BF694163 001 346.05(1) OPERATING LEFT OF CENTER

Unit Summary

UNIT 02
Unit Status Vehicle Operating As Classification Unit Type
IN TRANSIT D CLASS AUTOMOBILE
Vehicle Type Operating As Endorsements
PASSENGER CAR
Total Occs Train/Bus # Recorded Total # Citations Issued Total Trailers Total HazMat Types
3 0 0 0 0
Insurance? Direction Of Travel Pre Crash Tire Mark Speed Limit Total Lanes
YES NORTHBOUND 55 2
Most Harmful Event: Collision With Special Function Emergency Motor Vehicle Use
MOTOR VEH IN TRANSPORT NO SPECIAL FUNCTION NOT APPLICABLE
Traffic Way Traffic Control Traffic Control Inoperative/Missing
DIVIDED HWY W/TRAFFIC BARRIER NO CONTROL NO
Surface Type Road Curvature Road Grade
CONCRETE CURVE RIGHT LEVEL
Truck Bus or HazMat
NO

Vehicle

UNIT 02 VEHICLE
License Plate Number Plate Type St Country of Issuance
221WPM AUT - AUTOMOBILE WI UNITED STATES
Vehicle Identification Number Make Year Model
1FM5K8F83EGC05852 FORD 2014 EXPLORER L
Color Body Style Bus Use
BLK - BLACK LL - CARRYALL
Initial Contact Point Vehicle Damage
12 - FRONT
Extent Of Damage
DISABLING DAMAGE 02 - RIGHT SIDE FRONT, 10 - LEFT SIDE FRONT, 12 - FRONT

WISCONSIN MOTOR VEHICLE
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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By BILLS TOWING	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		BODY, DOORS, BRAKES, STEERING, TIRES, WHEELS	
	Driver Actions NO CONTRIBUTING ACTION			
02	Owner Name ANN MARIE GARRITY (608) 386-5667		Owner Address 601 RIDGEVIEW DR ONALASKA, WI 54650 , US	
	Sequence Of Events			
01	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
	Event			
02	Policy Holder			
	Insurance Company PROGRESSIVE-CLASSIC-INS-CO		Individual ANN GARRITY	
03	Individual			
	Driver ANN MARIE GARRITY (608) 386-5667		Citations Issued 0	Sex FEMALE
	Address 601 RIDGEVIEW DR ONALASKA, WI 54650 , US		Date of Birth [REDACTED]	Race WHITE
			Driver License Number [REDACTED]	STATE: WISCONSIN COUNTRY: UNITED STATES
04	Safety Equipment		On Duty Crash	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	Safety Equipment SHOULDER & LAP BELT	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
02	Injury		Airbag	
	NO APPARENT INJURY		DEPLOYED-COMBINATION	
	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 NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				

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UNIT	INDIVIDUAL	Non Motorist		Striking Unit#	Location		
		Prior Action					
		Action					
		Action Other				To/From School	
02	003	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					
		Individual					
UNIT	INDIVIDUAL	Passenger MOLLY KATHRYN GARRITY (608) 518-7012			Citations Issued 0	Sex FEMALE	
		Address 601 RIDGEVIEW DR ONALASKA, WI 54650 , US			Date of Birth [REDACTED]	Race	
		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
02	004	Safety Equipment		On Duty Crash	Safety Equipment		
		Row 01 - FRONT ROW	Seat Position 09 - RIGHT	SHOULDER & LAP BELT			
		Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
		Injury		Injury Severity NO APPARENT INJURY	Airbag DEPLOYED-COMBINATION		
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					
Distracted By Action							
Non Motorist		Striking Unit#	Location				

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UNIT	INDIVIDUAL	Prior Action	
		Action	
		Action Other	To/From School
02	004	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	
UNIT	INDIVIDUAL	Individual Condition APPEARED NORMAL	
		Individual	
		Passenger KELLY LOCHNER GARRITY (608) 386-5667	Citations Issued 0
			Sex FEMALE
			Date of Birth [REDACTED]
			Race WHITE
02	005	Address 3002 LOSEY BLVD S LA CROSSE, WI 54601 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES
		Safety Equipment On Duty Crash	
		Safety Equipment SHOULDER & LAP BELT	
		Row 02 - SECOND ROW	Seat Position 07 - LEFT
		Helmet Use	Helmet Compliance
		Eye Protection	Tint Compliance
02	005	Injury Injury Severity SUSPECTED MINOR INJURY Airbag DEPLOYED-COMBINATION	
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE
		Trapped/Extricated NOT TRAPPED	
		Medical Transport EMS GROUND	EMS Agency Identifier 6000555
		EMS Run#	
		Hospital SAUK PRAIRIE HOSP	Date of Death
Time of Death			
02	005	Distracted By Distracted By Source	
		Distracted By Action	
02	005	Non Motorist Striking Unit#	
		Location	
02		Prior Action	

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UNIT INDIVIDUAL	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 APPEARED NORMAL			
	02 005			