

6TL0B8M7XC  
20-13972

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<br>20-13972    | Investigating Officer/Deputy<br>DEPUTY B. MEARS |  |
| Crash Date<br>12/12/2020                                |                                      | Crash Time<br>10:20 AM                      | Date Arrived<br>12/12/2020         | Time Arrived<br>11:29 AM                        |  |
| Date Notified<br>12/12/2020                             |                                      | Time Notified<br>11:20 AM                   | Total Units<br>01                  | Total Injured<br>00                             | Total Killed<br>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 checked="" type="checkbox"/> Government Property |                                      | <input type="checkbox"/> Active School Zone | School Bus Related<br>NO           | Tags  |  |
| <input checked="" type="checkbox"/> Reportable          |                                      | Crash Type<br>DT4000 (STANDARD CRASH)       |                                    | <input type="checkbox"/> Amended                | <input type="checkbox"/> Secondary Crash     |

Description

|         |                                  |
|---------|----------------------------------|
| Diagram | Reconstruction By                |
|         | Photos By<br>DEPUTY MEARS        |
|         | Additional Information<br>PHOTOS |

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

UNIT WAS WB ON STH 33 ON SLIPPERY SNOW COVERED ROADWAY. OPERATOR STATED THAT THERE WERE 2 WESTBOUND UNITS IN FRONT OF HIS UNIT. THEY BOTH STARTED TO SLIDE ON THE ROADWAY IN FRONT OF HIM. HE SAID THAT HE STARTED BRAKING AND STEERING TO AVOID COLLIDING WITH THE UNITS. HE SAID HE COULDN'T STEER OR STOP DUE TO THE ROAD CONDITIONS. HE TRAVELLED OFF OF THE LEFT/ SOUTH SIDE OF THE ROADWAY INTO A DITCH ABOUT 30 FEET, WHERE HE THEN STRUCK A NO PASSING ZONE SIGN. THE UNIT WAS SLIDING SIDEWAYS TO THE SOUTH WEST. IT SLID ABOUT 40 MORE FEET WHERE IT THEN STRUCK A UTILITY POLE ON THE DRIVERS SIDE. HE SAID THAT HE THEN TRIED TO DRIVE IT OUT THROUGH A FIELD AND THE DITCH. HE SAID NO OTHER CARS WERE STRUCK OR DAMAGED. HE WAS NOT INJURED. HE SAID HE THEN SLOWLY DROVE IT INTO LAVALLE TO HIS FRIENDS BUSINESS. HE THEN CONTACTED THE POLICE. THE UNIT HAD DAMAGE TO THE FRONT AND DRIVERS SIDE AND A BROKEN TIE ROD. I DROVE HIM BACK TO THE SCENE. THE SIGN POST WAS BROKEN. THE UTILITY POLE HAD COSMETIC DAMAGE BUT DID NOT APPEAR TO HAVE ANY STRUCTURAL DAMAGE. THE POLE NUMBER IS 13-3-62 OVER 47/24.

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Location

|  |                              |                            |
|--|------------------------------|----------------------------|
| ON STH33 WB<br>0.29 MI E<br>OF EMERALD DR<br>IN THE TOWN OF LA VALLE<br>IN SAUK COUNTY | Latitude<br>43.562109293     | Longitude<br>-90.074889145 |
|  | X Coordinate<br>251661.46875 | Y Coordinate<br>4827833.5  |
|  | Structure Type               |                            |

Crash Scene

|  |   |   |
|--|---|---|
| First Harmful Event<br><b>TRAFFIC SIGN POST</b>                        | First Harmful Event Location<br><b>SHOULDER LEFT</b>                                |   |
| Manner of Collision<br><b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b> | Light Condition<br><b>DAYLIGHT</b>  |   |
| Road Surface Condition(s)<br><b>WET, SNOW, SLUSH, ICE</b>              | Roadway Factor(s)<br><br><b>ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)</b> |   |
| Environment Factor(s)<br><b>WEATHER CONDITIONS</b>                     |   |   |
| Weather Condition(s)<br><b>SNOW</b>                                    |   |   |
| Animal Type  | Relation To Trafficway<br><b>TRAFFICWAY - ON ROAD</b>                               |   |
| Crash Classification - Location<br><b>PUBLIC PROPERTY</b>              | Crash Classification - Jurisdiction<br><b>NO SPECIAL JURISDICTION</b>               |   |
| Tribal Land  | Access Control<br><b>NO CONTROL</b>   | Special Study                                   |
| Within Interchange Area<br><b>NO</b>                                   | Junction Location<br><b>NON-JUNCTION</b>  | Intersection Type<br><b>NOT AN INTERSECTION</b> |

Unit Summary

|            |  |   |   |  |                                |
|------------|--|---|---|--|--------------------------------|
| UNIT<br>01 | Unit Status<br><b>IN TRANSIT</b>                               | Vehicle Operating As Classification<br><b>D CLASS</b> | Unit Type<br><b>TRUCK</b>                               |  |                                |
|            | Vehicle Type<br><b>UTILITY TRUCK/PICKUP TRUCK</b>              | Operating As Endorsements                             |   |  |                                |
|            | Total Occs<br><b>01</b>  | Train/Bus # Recorded                                  | Total # Citations Issued<br><b>0</b>                    | Total Trailers<br><b>0</b>                           | Total HazMat Types<br><b>0</b> |
|            | Insurance?<br><b>YES</b>                                       | Direction Of Travel<br><b>WESTBOUND</b>               | <input checked="" type="checkbox"/> Pre Crash Tire Mark | Speed Limit<br><b>55</b>                             | Total Lanes<br><b>2</b>        |
|            | Most Harmful Event: Collision With<br><b>TRAFFIC SIGN POST</b> | Special Function<br><b>NO SPECIAL FUNCTION</b>        |   | Emergency Motor Vehicle Use<br><b>NOT APPLICABLE</b> |                                |
|            | Traffic Way<br><b>TWO-WAY, NOT DIVIDED</b>                     | Traffic Control<br><b>NO CONTROL</b>                  |   | Traffic Control Inoperative/Missing<br><b>NO</b>     |                                |
|            | Surface Type<br><b>BLACKTOP (BITUMINOUS)</b>                   | Road Curvature<br><b>STRAIGHT</b>                     |   | Road Grade<br><b>UPHILL</b>                          |                                |
|            | Truck Bus or HazMat<br><b>NO</b>                               |   |   |  |                                |

Vehicle

|                             |   |   |                     |   |  |
|-----------------------------|---|---|---------------------|---|--|
| UNIT<br>VEHICLE<br>01<br>01 | License Plate Number<br><b>GP9714</b>                     | Plate Type<br><b>LTK - LIGHT TRUCK</b>  | St<br><b>WI</b>     | Country of Issuance<br><b>UNITED STATES</b> |  |
|                             | Vehicle Identification Number<br><b>1D7HU16N58J218950</b> | Make<br><b>DODGE</b>  | Year<br><b>2008</b> | Model<br><b>RAM</b>                         |  |
|                             | Color<br><b>RED - RED</b>                                 | Body Style<br><b>PK - PICKUP</b>  |                     | Bus Use                                     |  |
|                             | Initial Contact Point<br><b>12 - FRONT</b>                | Vehicle Damage  |                     |   |  |
|                             | Extent Of Damage<br><b>FUNCTIONAL DAMAGE</b>              | <b>01 - RIGHT FRONT CORNER, 09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT, 13 - TOP, 14 - UNDERCARRIAGE</b> |                     |   |  |

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|   |   |  |                                       |   |                               |
|---|---|--|---------------------------------------|---|-------------------------------|
| UNIT<br>VEHICLE                             | Towed Due To Damage<br><b>NOT TOWED</b>   |  | Vehicle Removed By<br><b>OPERATOR</b> |   |                               |
|   | What Driver Was Doing<br><b>GOING STRAIGHT</b>  |  | Vehicle Factors                       |   |                               |
|   | Driver Prior Action Other   |  | <b>NOT APPLICABLE</b>                 |   |                               |
|   | Driver Actions<br><b>SWERVED OR AVOIDED DUE TO WIND, SLIPPERY SURFACE, MOTOR VEHICLE, OBJECT, NON-MOTORIST IN ROADWAY, ETC.</b> |  |                                       |   |                               |
| 01  | 01  | Owner Name<br><b>JOHN E MALLO<br/>(608) 415-1721</b>           |                                       | Owner Address<br><b>1950 SUNSET DR<br/>REEDSBURG, WI 53959 , US</b> |                               |
|   |   | <b>Sequence Of Events</b>                                      |                                       |   |                               |
| 01  | 01  | Event<br><b>RUN OFF ROADWAY LEFT</b>                           |                                       |   |                               |
|   |   | Event<br><b>TRAFFIC SIGN POST</b>                              |                                       |   |                               |
|   |   | Event<br><b>UTILITY POLE</b>                                   |                                       |   |                               |
|   |   | Event  |                                       |   |                               |
| UNIT  | <b>Policy Holder</b>  |  |                                       |   |                               |
|   | Insurance Company<br><b>ERIE-INS-CO</b>   |  | Individual<br><b>JOHN MALLO</b>       |   |                               |
| UNIT<br>INDIVIDUAL                          | <b>Individual</b>   |  |                                       |   |                               |
|   | Driver<br><b>JOHN E MALLO<br/>(608) 415-1721</b>  |  | Citations Issued<br><b>0</b>          | Sex<br><b>MALE</b>  |                               |
|   | Address<br><b>1950 SUNSET DR<br/>REEDSBURG, WI 53959 , US</b>   |  | Date of Birth<br>[REDACTED]           | Race<br><b>WHITE</b>  |                               |
|   |   |  | Driver License Number<br>[REDACTED]   | <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>                      |                               |
| 01  | 001   | <b>Safety Equipment</b>  |                                       | On Duty Crash   |                               |
|   |   |  |                                       | Safety Equipment  |                               |
|   |   | Row<br><b>01 - FRONT ROW</b>                                   | Seat Position<br><b>07 - LEFT</b>     | <b>SHOULDER &amp; LAP BELT</b>                                      |                               |
|   |   | Helmet Use   |                                       | Helmet Compliance   |                               |
|   |   | Eye Protection   |                                       | Tint Compliance   |                               |
|   |   | <b>Injury</b>  |                                       | Injury Severity<br><b>NO APPARENT INJURY</b>                        | Airbag<br><b>NON DEPLOYED</b> |
| Ejected<br><b>NOT EJECTED</b>               |   | Ejection Path<br><b>NOT EJECTED/NOT APPLICABLE</b>             |                                       | Trapped/Extricated<br><b>NOT TRAPPED</b>                            |                               |
| Medical Transport<br><b>NOT TRANSPORTED</b> |   | EMS Agency Identifier  |                                       | EMS Run #   |                               |
| Hospital                                    |   | Date of Death  |                                       | Time of Death   |                               |
| <b>Distracted By</b>                        |   | Distracted By Source<br><b>NOT APPLICABLE (NOT DISTRACTED)</b> |                                       |   |                               |
| <b>Distracted By Action</b>                 |   | <b>NOT DISTRACTED</b>  |                                       |   |                               |

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|----------------------------|--|--|-----------------------------|--------------------------|----------------------|--|
| <b>UNIT<br/>INDIVIDUAL</b> | <b>Non Motorist</b>                            |  | Striking Unit #             | Location                 |                      |  |
|                            | Prior Action                                   |  |                             |                          |                      |  |
|                            | Action   |  |                             |                          |                      |  |
|                            | Action Other                                   |  |                             |                          | To/From School       |  |
|                            | <b>Drug &amp; Alcohol</b>                      |  | Suspected Alcohol Use<br>NO | Suspected Drug Use<br>NO |                      |  |
|                            | Alcohol Test Given<br><b>TEST NOT GIVEN</b>    |  | Alcohol Test Type           |                          | Alcohol Test Results |  |
|                            | Drug Test Given<br><b>TEST NOT GIVEN</b>       |  | Drug Test Type              |                          | Drug Test Results    |  |
|                            | Drug Type                                      |  |                             |                          |                      |  |
|                            | Individual Condition<br><b>APPEARED NORMAL</b> |  |                             |                          |                      |  |

**Property Owner**

|                              |   |  |  |  |  |
|------------------------------|---|--|--|--|--|
| <b>PROP<br/>OWNER<br/>01</b> | Government<br><b>SAUK COUNTY HWY DEPT</b><br>(608) 356-3855 |  | Address<br><b>620 STH 136</b><br><b>PO BOX 26</b><br><b>BARABOO, WI 53913 , US</b> |  |  |
|------------------------------|---|--|--|--|--|

|                             |               |                   |                  |                   |
|-----------------------------|---------------|-------------------|------------------|-------------------|
| <b>Fixed Objects Struck</b> |               |                   |                  |                   |
| <b>01</b>                   | Striking Unit | Struck Object     | Structure Number | Damage Tag Number |
|                             | 01            | TRAFFIC SIGN POST |                  |                   |

**Property Owner**

|                              |   |  |  |  |  |
|------------------------------|---|--|--|--|--|
| <b>PROP<br/>OWNER<br/>02</b> | Organization/Company<br><b>ALLIANT ENERGY</b><br>(800) 255-4268 |  | Address<br><b>4902 N BILTMORE</b><br><b>MADISON, WI 53707 1077, US</b> |  |  |
|------------------------------|---|--|--|--|--|

|                             |               |               |                  |                   |
|-----------------------------|---------------|---------------|------------------|-------------------|
| <b>Fixed Objects Struck</b> |               |               |                  |                   |
| <b>02</b>                   | Striking Unit | Struck Object | Structure Number | Damage Tag Number |
|                             | 01            | UTILITY POLE  |                  |                   |