

6TL0C884GM  
21-00588

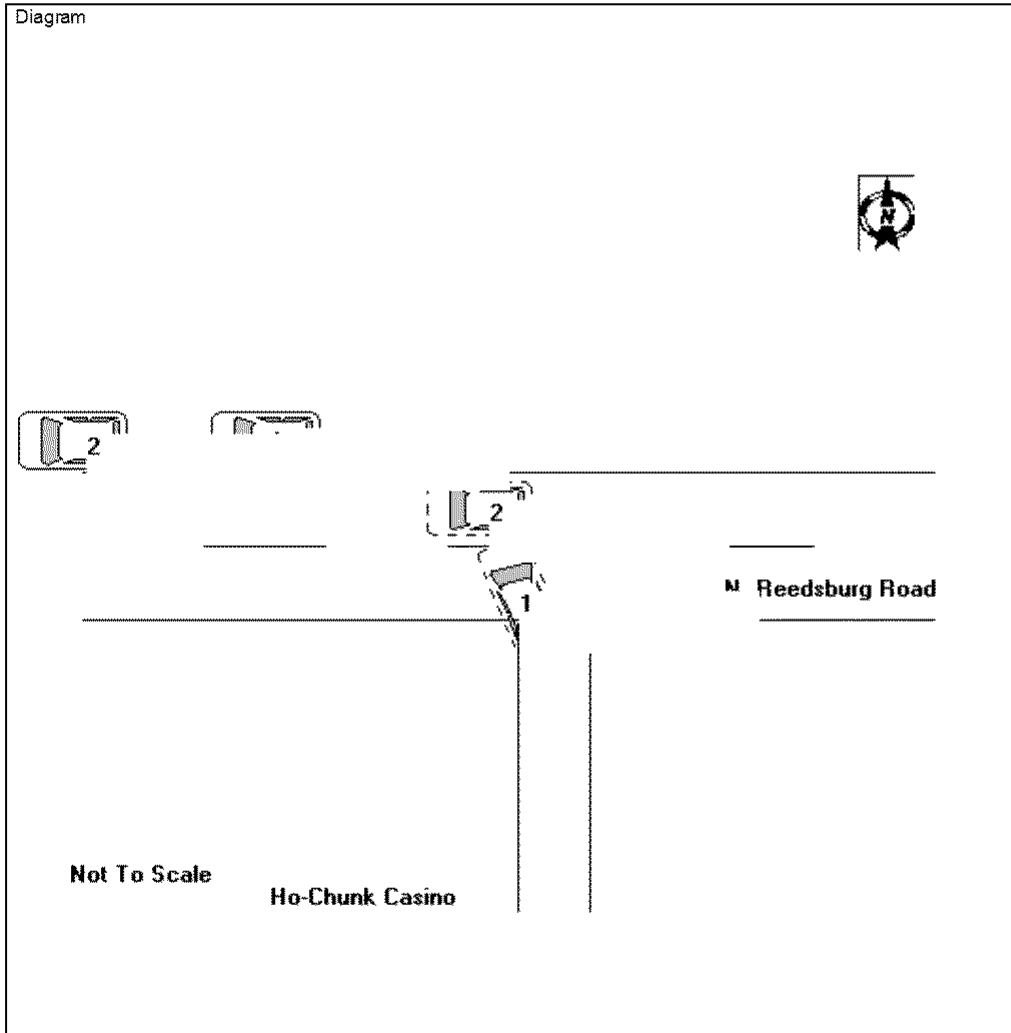
# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

6TL0C884GM

Document Number Override		Primary Crash Document#		Agency Crash Number <b>21-00588</b>		Investigating Officer/Deputy <b>DEPUTY T. SUTHERLAND</b>	
Crash Date <b>01/20/2021</b>		Crash Time <b>01:38 PM</b>		Date Arrived <b>01/20/2021</b>		Time Arrived <b>01:45 PM</b>	
Date Notified <b>01/20/2021</b>		Time Notified <b>01:39 PM</b>		Total Units <b>02</b>		Total Injured <b>01</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 type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

## Description

Diagram   <p>Not To Scale</p> <p>Ho-Chunk Casino</p> <p>Reedsburg Road</p>	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.

ON 01-20-21 UNIT 2 WAS TRAVELING WEST ON NORTH REEDSBURG ROAD. UNIT 1 WAS MAKING A LEFT TURN ONTO NORTH REEDSBURG ROAD FROM THE HO-CHUNK CASINO PROPERTY. UNIT 1 HIT THE REAR DRIVERS SIDE OF UNIT 2 ON NORTH REEDSBURG ROAD.

6TL0C884GM

21-00588

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

## Location

ON N REEDSBURG RD 484 FT E OF CTHBD WB IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude 43.532442994	Longitude -89.776031758
	X Coordinate 275689.15625	Y Coordinate 4823688.5
	Structure Type NO STRUCTURE	

## Crash Scene

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>	First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>WET, SNOW, SLUSH</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>WEATHER CONDITIONS</b>		
Weather Condition(s) <b>BLOWING SNOW</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>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>

## Unit Summary

<b>UNIT</b>  <b>01</b>	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>		
	Vehicle Type <b>(SPORT) UTILITY VEHICLE</b>			Operating As Endorsements		
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>1</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>YES</b>	Direction Of Travel <b>WESTBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>55</b>	Total Lanes <b>2</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>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>NO CONTROL</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>					

<b>UNIT</b>  <b>01</b>	<b>VEHICLE</b>  <b>01</b>	<b>Vehicle</b>			
		License Plate Number <b>ALB2527</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>1GYEE637060136540</b>	Make <b>CADILLAC</b>	Year <b>2006</b>	Model <b>XTS</b>
		Color <b>WHI - WHITE</b>	Body Style <b>4D - 4DR</b>		Bus Use
		Initial Contact Point <b>12 - FRONT</b>	Vehicle Damage		
		Extent Of Damage <b>MINOR DAMAGE</b>	<b>01 - RIGHT FRONT CORNER</b>		

6TL0C884GM

21-00588

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OPERATOR</b>	
	What Driver Was Doing <b>LEFT TURN</b>	Vehicle Factors	
	Driver Prior Action Other	<b>NOT APPLICABLE</b>	
	Driver Actions <b>FAILED TO YIELD RIGHT-OF-WAY</b>		
01	01	Owner Name <b>JOYCE DOROTHY HOLLAR FLAIG (715) 459-7103</b>	Owner Address <b>8805 COUNTY ROAD F ARPIN, WI 54410 , US</b>
<b>Sequence Of Events</b>			
01	01	Event <b>MOTOR VEH IN TRANSPORT</b>	
02	02	Event	
03	03	Event	
04	04	Event	
<b>Policy Holder</b>			
UNIT		Insurance Company <b>1ST-AUTO-&amp;-CASUALTY-INS-CO</b>	Individual <b>JOYCE HOLLAR FLAIG</b>
<b>Individual</b>			
UNIT INDIVIDUAL	01	Driver <b>JOYCE DOROTHY HOLLAR FLAIG (715) 459-7103</b>	Citations Issued <b>1</b>
			Sex <b>FEMALE</b>
			Date of Birth [REDACTED]
		Race <b>WHITE</b>	
		Address <b>8805 COUNTY ROAD F ARPIN, WI 54410 , US</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>07 - LEFT</b>
			<b>SHOULDER &amp; LAP BELT</b>
		Helmet Use	Helmet Compliance
		Eye Protection	Tint Compliance
01	001	<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 <b>NOT APPLICABLE (NOT DISTRACTED)</b>	
		Distracted By Action <b>NOT DISTRACTED</b>	

6TL0C884GM

21-00588

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

<b>UNIT</b>	<b>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 <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>					
	<b>01</b>	<b>001</b>	<b>Violations</b>			
UTC Number <b>BD759455</b>			Issue To? <b>001</b>	Statute Number <b>346.18(2)</b>	Description <b>FAIL/YIELD WHILE MAKING LEFT TURN</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>2</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>WESTBOUND</b>		<input type="checkbox"/> <b>Pre Crash Tire Mark</b>		Speed Limit <b>55</b>		Total Lanes <b>2</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>TWO-WAY, NOT DIVIDED</b>				Traffic Control <b>NO CONTROL</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>AJL3221</b>		Plate Type <b>AUT - AUTOMOBILE</b>		St <b>WI</b>		Country of Issuance <b>UNITED STATES</b>	
		Vehicle Identification Number <b>1G2HX52K84U173262</b>		Make <b>PONTIAC</b>		Year <b>2004</b>		Model <b>BON</b>	
		Color <b>WHI - WHITE</b>		Body Style <b>4D - 4DR</b>				Bus Use	
		Initial Contact Point <b>08 - LEFT SIDE REAR</b>							

6TL0C884GM

21-00588

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

UNIT VEHICLE	Vehicle Damage		
	Extent Of Damage <b>FUNCTIONAL DAMAGE</b>	<b>08 - LEFT SIDE REAR</b>	
	Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OPERATOR</b>	
	What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors	
UNIT VEHICLE	Driver Prior Action Other	<b>NOT APPLICABLE</b>	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>		
	Owner Name <b>SCOTT E HENNINGS</b> (608) 963-0126	Owner Address <b>320 8TH ST</b> <b>BARABOO, WI 53913 , US</b>	
<b>Sequence Of Events</b>			
UNIT VEHICLE	Event <b>MOTOR VEH IN TRANSPORT</b>		
	Event		
	Event		
	Event		
UNIT	<b>Policy Holder</b>		
	Insurance Company <b>WISCONSIN-MUTUAL-INS-CO</b>	Individual <b>SCOTT HENNINGS</b>	
UNIT INDIVIDUAL	<b>Individual</b>		
	Driver <b>SCOTT E HENNINGS</b> (608) 963-0126	Citations Issued <b>0</b>	Sex <b>MALE</b>
		Date of Birth [REDACTED]	Race <b>WHITE</b>
	Address <b>320 8TH ST</b> <b>BARABOO, WI 53913 , US</b>	Driver License Number [REDACTED] <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
UNIT VEHICLE	<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	
UNIT VEHICLE	<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

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT INDIVIDUAL	<b>Distracted By</b> Distracted By Source NOT APPLICABLE (NOT DISTRACTED)	
	Distracted By Action NOT DISTRACTED	
	<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
	Drug Test Given TEST NOT GIVEN	Drug Test Type Drug Test Results
Drug Type		
Individual Condition APPEARED NORMAL		
UNIT INDIVIDUAL	<b>Individual</b>	
	Passenger BETHANY ANN DORRIS	Citations Issued 0 Sex FEMALE
	Date of Birth [REDACTED]	Race WHITE
	Address 320 8TH ST BARABOO, WI 53913 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES
UNIT INDIVIDUAL	<b>Safety Equipment</b>	
	On Duty Crash	Safety Equipment SHOULDER & LAP BELT
	Row 01 - FRONT ROW	Seat Position 09 - RIGHT
	Helmet Use	Helmet Compliance
	Eye Protection	Tint Compliance
UNIT INDIVIDUAL	<b>Injury</b>	
	Injury Severity POSSIBLE INJURY	Airbag NON DEPLOYED
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE
	Trapped/Extricated NOT TRAPPED	
	Medical Transport EMS GROUND	EMS Agency Identifier 807
Hospital ST CLARE HOSP	Date of Death	
	Time of Death	
<b>Distracted By</b> Distracted By Source		

6TL0C884GM

21-00588

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

UNIT INDIVIDUAL          02 003	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 <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>		