

6TL0BFKDF9

21-04123

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 21-04123	Investigating Officer/Deputy DEPUTY H. VOLZ	
Crash Date 05/14/2021		Crash Time 09:50 AM	Date Arrived 05/14/2021	Time Arrived 09:55 AM	
Date Notified 05/14/2021		Time Notified 09:55 AM	Total Units 02	Total Injured 00	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 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 DEPUTY H VOLZ
	Additional Information PHOTOS

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

UNIT 1 WAS TRAVELING EB ON STH 136. UNIT 2 WAS TRAVELING WB ON LINN ST. UNIT 1 DRIVER WAS ATTEMPTING TO MAKE A RIGHT TURN AND DRIVE SOUTH ONTO W PINE STREET. UNIT 1 DRIVER SAID HE WAS NOT SURE IF HE HAD A RED LIGHT AT THE INTERSECTION, BUT IF HE DID, HE DID NOT RUN THE RED LIGHT. UNIT 2 ALSO WAS TURNING SOUTH ONTO W PINE ST. UNIT 2 DRIVER SAID SHE HAD A GREEN ARROW. UNIT 2 ENTERED THE INTERSECTION AND PULLED INTO THE CLOSEST SOUTHBOUND LANE ON W. PINE ST. UNIT 1 ENTERED THE SOUTHBOUND LANE OF W PINE ST AND FAILED TO YIELD TO UNIT 2 AND TOOK THE TURN TOO WIDE. UNIT 1 STRUCK UNIT 2.

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Location

INTERSECTION ON STH136 EB AT STH33 EB IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY	Latitude 43.474737	Longitude -89.768905283
	X Coordinate 276051.625	Y Coordinate 4817260.5
	Structure Type	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 01 - ANGLE	Light Condition DAYLIGHT	
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 INTERSECTION-RELATED	Intersection Type FOUR-WAY INTERSECTION

Unit Summary

UNIT 01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type TRUCK	
	Vehicle Type UTILITY TRUCK/PICKUP TRUCK	Operating As Endorsements			
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 1	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 30	Total Lanes 4
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT	Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED	Traffic Control TRAFFIC SIGNAL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)	Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO				

UNIT 01	Vehicle				
	VEHICLE 01	License Plate Number PT2350	Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1GCPKSE71CF121373	Make CHEVROLET	Year 2012	Model SILVERADO
		Color BLU - BLUE	Body Style PK - PICKUP		Bus Use
		Initial Contact Point 11 - LEFT FRONT CORNER	Vehicle Damage		
Extent Of Damage MINOR DAMAGE	11 - LEFT FRONT CORNER				

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UNIT VEHICLE	Towed Due To Damage NOT TOWED	Vehicle Removed By OWNER	
	What Driver Was Doing RIGHT TURN	Vehicle Factors	
	Driver Prior Action Other	NOT APPLICABLE	
	Driver Actions FAILED TO YIELD RIGHT-OF-WAY, FAILED TO KEEP IN DESIGNATED LANE, LOOKED BUT DID NOT SEE		
01 01	Owner Name LARRY ORMSON NTM INC	Owner Address 113 RAILROAD ST ELROY, WI 53929 , US	
	Sequence Of Events		
01 01	Event MOTOR VEH IN TRANSPORT		
	Event RIGHT TURN		
	Event		
	Event		
UNIT	Policy Holder		
	Insurance Company ERIE-INS-CO	Organization/Company LARRY ORMSON NTM INC	
UNIT INDIVIDUAL	Individual		
	Driver TIMOTHY JAMES ORMSON (608) 683-1748	Citations Issued 1	Sex MALE
		Date of Birth [REDACTED]	Race WHITE
	Address 817 2ND MAIN ST ELROY, WI 53929 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
01 001	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
	Injury	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
Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)	
Distracted By Action NOT DISTRACTED			

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Form containing sections: Non Motorist, Drug & Alcohol, and Violations. Includes fields for Striking Unit #, Location, Prior Action, Action, Suspected Alcohol Use, Suspected Drug Use, Alcohol Test Given, Drug Test Given, and UTC Number.

Unit Summary

Unit Summary table with columns: Unit Status, Vehicle Operating As Classification, Unit Type, Vehicle Type, Operating As Endorsements, Total Occs, Train/Bus # Recorded, Total # Citations Issued, Total Trailers, Total HazMat Types, Insurance?, Direction Of Travel, Pre Crash Tire Mark, Speed Limit, Total Lanes, Most Harmful Event, Special Function, Emergency Motor Vehicle Use, Traffic Way, Traffic Control, Traffic Control Inoperative/Missing, Surface Type, Road Curvature, Road Grade, Truck Bus or HazMat.

Vehicle

Vehicle information table with columns: License Plate Number, Plate Type, St, Country of Issuance, Vehicle Identification Number, Make, Year, Model, Color, Body Style, Bus Use, Initial Contact Point.

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UNIT VEHICLE	Vehicle Damage	
	Extent Of Damage FUNCTIONAL DAMAGE	03 - RIGHT SIDE MIDDLE. 04 - RIGHT SIDE REAR
	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR
	What Driver Was Doing LEFT TURN	Vehicle Factors
UNIT VEHICLE	Driver Prior Action Other	NOT APPLICABLE
	Driver Actions NO CONTRIBUTING ACTION	
	Owner Name SIEMENS MEDICAL SOLUTIONS USA INC	Owner Address 40 LIBERTY BLVD MELVERN, PA 19355 , US
	Sequence Of Events	
UNIT VEHICLE	Event MOTOR VEH IN TRANSPORT	
	Event	
	Event	
	Event	
UNIT	Policy Holder	
	Insurance Company TRAVELERS-PROPERTY-CASUALTY-CO-OF-AME	Organization/Company SIEMENS MEDICAL SOLUTIONS USA INC
UNIT INDIVIDUAL	Individual	
	Driver MARY THERESE WYSOCKI (715) 570-6149	Citations Issued 0
		Sex FEMALE
		Date of Birth [REDACTED]
	Race WHITE	
	Address W11899 LAKE ST MERRIMAC, WI 53561 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES
UNIT INDIVIDUAL	Safety Equipment	
	On Duty Crash	Safety Equipment
	Row 01 - FRONT ROW	Seat Position 07 - LEFT
	SHOULDER & LAP BELT	
	Helmet Use	Helmet Compliance
	Eye Protection	Tint Compliance
UNIT INDIVIDUAL	Injury	
	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE
	NOT TRAPPED	
	Medical Transport NOT TRANSPORTED	EMS Agency Identifier
	Hospital	EMS Run#
	Date of Death	Time of Death

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UNIT INDIVIDUAL 02 002	Distracted By Distracted By Source NOT APPLICABLE (NOT DISTRACTED)	
	Distracted By Action NOT DISTRACTED	
	Non Motorist	Striking Unit # Location
	Prior Action	
	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		