

6TL0BC3B55
21-04740

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 21-04740		Investigating Officer/Deputy DEPUTY W. VERTEIN	
Crash Date 05/30/2021		Crash Time 11:15 AM		Date Arrived 05/30/2021		Time Arrived 11:25 AM	
Date Notified 05/30/2021		Time Notified 11:16 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

<p>Diagram</p> <p>Not to scale</p>	Reconstruction By
	Photos By DEPUTY W. VERTEIN #9122
	Additional Information PHOTOS

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

ON THE DESCRIBED DATE, TIME, AND LOCATION, UNIT 1 WAS TRAVELING NORTHBOUND AND UNIT 2 WAS TRAVELING SOUTHBOUND. THE OPERATOR OF UNIT 1 ATTEMPTED TO MAKE A LEFT TURN IN FRONT OF UNIT 2 IN THE INTERSECTION. UNIT 2 STRUCK UNIT 1 IN THE REAR PASSENGER SIDE. THE OPERATOR OF UNIT 1 ADMITTED TO TURNING IN FRONT OF UNIT 2 AND HE SAID HE NEVER SAW UNIT 2 UNTIL THE LAST MINUTE. NO REPORTED INJURIES.

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Location

ON CTHBD NB 6 FT N OF PIT RD IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude 43.513657328	Longitude -89.77805139
	X Coordinate 275456.25	Y Coordinate 4821607.5
	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	Intersection Type FOUR-WAY INTERSECTION

Unit Summary

UNIT 01	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR				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 NORTHBOUND	<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/O TRAFFIC BARRIER		Traffic Control TRAFFIC SIGNAL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

Vehicle

UNIT 01	VEHICLE 01	License Plate Number GLS013	Plate Type AUT - AUTOMOBILE	St IA	Country of Issuance UNITED STATES
		Vehicle Identification Number 5NPE24AF9GH320490	Make HYUNDAI	Year 2016	Model SONATA
		Color BLU - BLUE	Body Style 4D - 4DR		Bus Use
		Initial Contact Point 07 - LEFT REAR CORNER	Vehicle Damage 04 - RIGHT SIDE REAR, 05 - RIGHT REAR CORNER, 06 - REAR, 07 - LEFT REAR CORNER, 08 - LEFT SIDE REAR		
		Extent Of Damage DISABLING DAMAGE			

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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By MIKES TOWING	
	What Driver Was Doing LEFT TURN		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions FAILED TO YIELD RIGHT-OF-WAY, LOOKED BUT DID NOT SEE			
01 01	Owner Name DAVID GINGERICH (608) 475-4134		Owner Address 532 N 1ST ST MISSOURI VALLEY, IA 51555 , US	
	Sequence Of Events			
01 01	01	Event LEFT TURN		
	02	Event MOTOR VEH IN TRANSPORT		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company PROGRESSIVE-ADVANCED-INSURANCE-CO		Individual DAVID GINGERICH	
UNIT INDIVIDUAL	Individual			
	Driver DAVID GINGERICH (608) 475-4134		Citations Issued 1	Sex MALE
	Address 532 N 1ST ST MISSOURI VALLEY, IA 51555 , US		Date of Birth [REDACTED]	Race WHITE
			Driver License Number [REDACTED]	STATE: IOWA COUNTRY: UNITED STATES
01 001	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	
	Injury		Injury Severity NO APPARENT INJURY	Airbag DEPLOYED-CURTAIN
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 UNKNOWN				

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UNIT	INDIVIDUAL	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					
		Violations					
01	001	UTC Number AE138487	Issue To? 001	Statute Number 346.18(2)	Description FAIL/YIELD WHILE MAKING LEFT TURN		

Unit Summary

UNIT	02	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 0		Total Trailers 0	
		Insurance? YES		Direction Of Travel SOUTHBOUND		<input type="checkbox"/> Pre Crash Tire Mark		Speed Limit 55	
		Total HazMat Types 0		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/O TRAFFIC BARRIER		Traffic Control TRAFFIC SIGNAL		Traffic Control Inoperative/Missing NO			
		Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL			
		Truck Bus or HazMat NO							

Vehicle

02	02	License Plate Number EC59525		Plate Type HTK - HEAVY TRUCK		St WI		Country of Issuance UNITED STATES	
		Vehicle Identification Number 3C7WRNAL9JG137377		Make RAM		Year 2018		Model 5500	
		Color BLK - BLACK		Body Style PK - PICKUP				Bus Use	
		Initial Contact Point 01 - RIGHT FRONT CORNER							

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UNIT VEHICLE	Vehicle Damage	
	Extent Of Damage FUNCTIONAL DAMAGE	01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 12 - FRONT
	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR
	What Driver Was Doing GOING STRAIGHT	Vehicle Factors
UNIT VEHICLE	Driver Prior Action Other	NOT APPLICABLE
	Driver Actions NO CONTRIBUTING ACTION	
	Owner Name ABBS PAVING LLC (608) 963-0863	Owner Address S2723 SCHEPP RD PO BOX 744 BARABOO, WI 53913 , US
	Sequence Of Events	
UNIT VEHICLE	Event MOTOR VEH IN TRANSPORT	
	Event	
	Event	
	Event	
UNIT VEHICLE	Policy Holder	
	Insurance Company WEST-BEND-MUTUAL-INS-CO	Individual RANDALL ABBS
UNIT INDIVIDUAL	Individual	
	Driver RANDALL K ABBS (608) 963-0863	Citations Issued 0
		Sex MALE
		Race WHITE
UNIT INDIVIDUAL	Address E11568 N REEDSBURG RD BARABOO, WI 53913 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES
	Safety Equipment	
UNIT INDIVIDUAL	On Duty Crash	Safety Equipment
	Row 01 - FRONT ROW	Seat Position 07 - LEFT
	SHOULDER & LAP BELT	
	Helmet Use	Helmet Compliance
UNIT INDIVIDUAL	Eye Protection	Tint Compliance
	Injury	
UNIT INDIVIDUAL	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
UNIT INDIVIDUAL	Hospital	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		