

6TL0BFKDFC  
21-05065

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 21-05065		Investigating Officer/Deputy DEPUTY H. VOLZ	
Crash Date 06/07/2021		Crash Time 12:22 PM		Date Arrived 06/07/2021		Time Arrived 12:41 PM	
Date Notified 06/07/2021		Time Notified 12:25 PM		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 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

<p>Diagram</p> <p>Not To Scale</p>	Reconstruction By
	Photos By
	Additional Information NONE

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

UNIT 1 WAS TRAVELING WB ON RIVER ROAD. UNIT 1 STOPPED AT THE STOP SIGN ON RIVER ROAD AT STATE HIGHWAY 60. UNIT 2 WAS TRAVELING SOUTHWESTBOUND ON STATE HIGHWAY 60. UNIT 1 PULLED AWAY FROM THE STOP SIGN AND FAILED TO YIELD TO UNIT 2. UNIT 2 STRUCK THE TRAILER THAT UNIT 1 WAS TOWING.

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Location

ON STH60 WB 18 FT N OF RIVER RD IN THE TOWN OF PRAIRIE DU SAC IN SAUK COUNTY	Latitude 43.263760789	Longitude -89.800576469
	X Coordinate 272702.84375	Y Coordinate 4793914.5
	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>01 - ANGLE</b>	Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>DRY</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>		
Weather Condition(s) <b>CLEAR</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>INTERSECTION</b>	Intersection Type <b>FOUR-WAY INTERSECTION</b>

Unit Summary

UNIT 01	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>TRUCK</b>		
	Vehicle Type <b>UTILITY TRUCK/PICKUP TRUCK</b>	Operating As Endorsements			
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>1</b>	Total Trailers <b>1</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>STOP SIGN</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>TRUCK OR TRUCK COMBINATION &gt; 10,000LBS GVWR/GCWR</b>				

Vehicle

UNIT VEHICLE 01	License Plate Number <b>26545Z</b>	Plate Type <b>APO - APPORTIONED</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>3C7WRNEL4MG519377</b>	Make <b>DODGE</b>	Year <b>2021</b>	Model <b>RAM</b>
	Color <b>BLU - BLUE</b>	Body Style <b>TK - TRUCK</b>	Bus Use	
	Initial Contact Point <b>00 - NON-COLLISION</b>	Vehicle Damage		
	Extent Of Damage <b>NO DAMAGE</b>	<b>00 - NO DAMAGE</b>		

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Form containing vehicle details, sequence of events, policy holder information, trailer/towed details, individual driver information, and safety equipment details.

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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>			
<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>Violations</b>			
UTC Number <b>BD758948</b>	Issue To? <b>001</b>	Statute Number <b>346.18(3)</b>	Description <b>FAIL/YIELD RIGHT/WAY FROM STOP SIGN</b>
<b>Carrier</b>			
<input checked="" type="checkbox"/> Use Vehicle Owner Same as Carrier		Source <b>VEHICLE-SIDE</b>	
Name <b>TRIPLE S SHED TRANSPORT LLC USDOT# 2575616</b>		Address <b>18033 MARSHALL ROAD RICHLAND CENTER, WI 53581 , US</b>	
GVWR <b>MORE THAN 26,000 LB</b>	Vehicle Configuration <b>VEHICLE PULLING TRAILERS</b>		Cargo Body Type <b>FLATBED</b>
US DOT # <b>2575616</b>	Carrier Type <b>INTERSTATE CARRIER</b>		Permitted Load <b>NOT APPLICABLE</b>
<input type="checkbox"/> OS/OW Load	WI Permit Number	<input type="checkbox"/> Permitted Vehicle On Permitted Route	<input type="checkbox"/> Escort Vehicle Required By Permit
<input type="checkbox"/> Escort Vehicle Present			
Measured Height	Measured Length	Measured Width	Measured Weight
<b>Unit Summary</b>			
Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>TRUCK</b>

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02 UNIT	Vehicle Type <b>UTILITY TRUCK/PICKUP TRUCK</b>			Operating As Endorsements	
	Total Occs <b>1</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 checked="" 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>				

02 UNIT VEHICLE	<b>Vehicle</b>			
	License Plate Number <b>RN5624</b>	Plate Type <b>LTK - LIGHT TRUCK</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>1GCHK29U03E271033</b>	Make <b>CHEVROLET</b>	Year <b>2003</b>	Model <b>SLV</b>
	Color <b>GRY - GRAY</b>	Body Style <b>PK - PICKUP</b>	Bus Use	
	Initial Contact Point <b>11 - LEFT FRONT CORNER</b>	Vehicle Damage <b>01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT</b>		
	Extent Of Damage <b>FUNCTIONAL DAMAGE</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 <b>NOT APPLICABLE</b>	Driver Prior Action Other		
	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
	Owner Name <b>VICKI LYNN RADTKE (608) 574-0070</b>	Owner Address <b>S11553 WEIDNER RD SPRING GREEN, WI 53588 , US</b>		

04 UNIT VEHICLE	<b>Sequence Of Events</b>	
	Event <b>MOTOR VEH IN TRANSPORT</b>	
	Event	
	Event	

04 UNIT	<b>Policy Holder</b>	
	Insurance Company <b>LIBERTY-MUTUAL-INS-CO</b>	Individual <b>VICKI RADTKE</b>

<b>Individual</b>	
Citations Issued <b>0</b>	Sex <b>FEMALE</b>

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UNIT	INDIVIDUAL	Driver VICKI LYNN RADTKE (608) 574-0070		Date of Birth [REDACTED]	Race WHITE	
		Address S11553 WEIDNER RD SPRING GREEN, WI 53588 , US		Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES		
02	002	<b>Safety Equipment</b>		On Duty Crash		
		Safety Equipment		SHOULDER & LAP BELT		
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	Helmet Use		Helmet Compliance
		Eye Protection		Tint Compliance		
		<b>Injury</b>		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	
		<b>Distracted By</b>		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
		Distracted By Action NOT DISTRACTED				
<b>Non Motorist</b>		Striking Unit #	Location			
UNIT	INDIVIDUAL	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			
02	002	Drug Type				
Individual Condition APPEARED NORMAL						