

6TL0BJ1GL3
21-05990

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 21-05990	Investigating Officer/Deputy DEPUTY J. MACASKILL	
Crash Date 07/01/2021		Crash Time 11:15 PM	Date Arrived 07/01/2021	Time Arrived 11:28 PM	
Date Notified 07/01/2021		Time Notified 11:20 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 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>Unit 2</p> <p>Storage Shed</p> <p>Unit 1</p> <p>USH 12</p> <p>Not Drawn 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.

ON 7/1/21 AT APPROXIMATELY 2315 UNIT 1 WAS DRIVING SOUTH BOUND ON USH 12 NEAR FERN DELL RD. UNIT 1 WAS HAULING A PLASTIC STORAGE SHED. UNIT 1 FAILED TO PROPERLY SECURE THE STORAGE SHED TO THE TRAILER. WHILE DRIVING THE SHED FLEW OFF UNIT 1 AND STRUCK UNIT 2, WHICH WAS DRIVING SOUTH BOUND BEHIND UNIT 1.

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Location

ON USH12 EB 0.41 MI N OF SHADY LANE RD IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude 43.552947158	Longitude -89.786714178
	X Coordinate 274902.3125	Y Coordinate 4825995
	Structure Type	

Crash Scene

First Harmful Event CARGO/EQUIPMENT LOSS OR SHIFT	First Harmful Event Location ON ROADWAY	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DARK/UNLIT	
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 NON-JUNCTION	Intersection Type NOT AN 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 SOUTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 65	Total Lanes 4	
	Most Harmful Event: Collision With CARGO/EQUIPMENT LOSS OR SHIFT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type CONCRETE		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

Vehicle

UNIT 01 VEHICLE 01	License Plate Number AHV3923		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number 1FMPU16L83LB05717		Make FORD	Year 2003	Model EXPEDITION	
	Color GRN - GREEN		Body Style 4D - 4DR		Bus Use	
	Initial Contact Point 15 - CARGO LOSS		Vehicle Damage			
	Extent Of Damage NO DAMAGE		00 - NO DAMAGE			

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UNIT VEHICLE	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR	
	What Driver Was Doing GOING STRAIGHT	Vehicle Factors	
	Driver Prior Action Other	NOT APPLICABLE	
	Driver Actions OTHER CONTRIBUTING ACTION		
01 01	Owner Name RAYMOND L FORLER (920) 740-2446	Owner Address 537 N LAWE ST APPLETON, WI 54911 , US	
	Sequence Of Events		
01 02 03 04	Event CARGO/EQUIPMENT LOSS OR SHIFT		
	Event		
	Event		
	Event		
UNIT	Policy Holder		
	Insurance Company PROGRESSIVE-CASUALTY-INS-CO	Individual RAYMOND FORLER	
UNIT INDIVIDUAL	Individual		
	Driver RAYMOND L FORLER (920) 740-2446	Citations Issued 1	Sex MALE
		Date of Birth [REDACTED]	Race WHITE
	Address 537 N LAWE ST APPLETON, WI 54911 , 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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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 BD754998	Issue To? 001	Statute Number 348.10(5)(a)	Description FAIL/SECURE LOADS IF TOWING A TRAILER	

Unit Summary

UNIT 02	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 0	
	Insurance? YES		Direction Of Travel SOUTHBOUND		Total Trailers 0	
			<input type="checkbox"/> Pre Crash Tire Mark		Total HazMat Types 0	
	Most Harmful Event: Collision With CARGO/EQUIPMENT LOSS OR SHIFT			Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE
	Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER			Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO
	Surface Type CONCRETE			Road Curvature STRAIGHT		Road Grade LEVEL
	Truck Bus or HazMat NO					

Vehicle

UNIT 02	02	License Plate Number 202ZXL		Plate Type AUT - AUTOMOBILE		St WI		Country of Issuance UNITED STATES	
		Vehicle Identification Number 1G1ZS58N38F147283		Make CHEVROLET		Year 2008		Model MALIBU LS	
		Color SIL - SILVER (ALUMINUM)		Body Style 4D - 4DR				Bus Use	
		Initial Contact Point 01 - RIGHT FRONT CORNER							

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UNIT VEHICLE	Vehicle Damage	
	01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT	
	Extent Of Damage FUNCTIONAL DAMAGE	
	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR
UNIT VEHICLE	What Driver Was Doing GOING STRAIGHT	Vehicle Factors
	Driver Prior Action Other	NOT APPLICABLE
UNIT VEHICLE	Driver Actions NO CONTRIBUTING ACTION	
	Owner Name JUAN MARTINEZ (608) 477-3066	Owner Address 902 MOORE ST # 58 BARABOO, WI 53913 , US
Sequence Of Events		
UNIT VEHICLE	Event CARGO/EQUIPMENT LOSS OR SHIFT	
	Event	
	Event	
	Event	
UNIT VEHICLE	Policy Holder	
	Insurance Company GENERAL-CASUALTY-INS-CO	Individual JUAN MARTINEZ
UNIT INDIVIDUAL	Individual	
	Driver JUAN MARTINEZ (608) 477-3066	Citations Issued 0
		Sex MALE
		Race WHITE
	Address 902 MOORE ST # 58 BARABOO, WI 53913 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES
UNIT VEHICLE	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 VEHICLE	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	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		