6TL0D2XVPC 21-07745

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash [Document#	Agency 21-077	/ Crash Number 745		Investigating Officer/Deputy DEPUTY B. SCHLOUGH			
ָז	Crash Date 08/16/2021	Crash Time 01:37 PM			rived 2021	Time Arrived	Time Arrived 01:52 PM			
O I LUDZXVPC	Date Notified 08/16/2021				nits	Total Injured	Total Injured Total K		illed	
<u>`</u>	On Emergency	Hit and Run	Lane Closu		Work Zone	Trailer	or Towe		Reporting Threshold	
֡֓֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֓֡֓֜֓֓֓֡֓֜֡֓֡֓֡֓֡֓֡֓֡֓֡֓֡֡֡֡֡֡	Government Property	Active Sc	hool Zone	School Bus Related NO						
	▼ Reportable	Crash Type DT4000 (STA	NDARD CRASH	1)		Amend	led	ed Secondary Crash		
Ī	Description Diagram							truction By		
		lun',	UT	DEV	IL'S DELIGHT RD		Addition NONE	al Information		
	DRAWING NOT	ement officer, agr	DELIGHT RD APP	ROACHIN	IG A SHARP CURVE. TH	IE OPERATOR A				

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Crash Time 01:37 PM

	ocation ====										
=	ON DEVILS DELIGHT RD					Latitude			Longitud	łe	
).43 MI N		43.409337123 -89.651470803								
(OF CTHDL NB	X Coordin			Y Coordi						
	N THE TOWN OF MERRIM	285318.78125 4809687.5									
1	N SAUK COUNTY		Structure								
						NO STR					
C	rash Scene										
Ţ	First Harmful Event					FirstHarm	ıful Event Lo	cation			
ď	OVERTURN/ROLLOVER		ER RIGH								
٨	Manner of Collision	Light Cond	dition								
C	00 - NO COLLISION W/VEH	DAYLIGHT									
F	Road Surface Condition(s)	Roadway Factor(s)									
E	DRY						, ,				
E	Environment Factor(s)					1					
١	NONE					NONE					
V	Veather Condition(s)					1					
0	CLEAR										
A	Animal Type	1	o Trafficwa								
Ļ						WAY - OI					
1 -	Crash Classification - Location PUBLIC PROPERTY				1	ssification - CIAL JURI	SDICTION				
T	ribal Land		Access Control NO CONTROL					Special Study			
	Within Interchange Area Junction Location Intersec						CTION				
L		NON-JUNCTION		I 5		INTERSE	CHON				
	Closure Type Reasons for Clos										
	FULL CLOSURE	Time Initial Lane/Rd Close	1	LAW ENFORCEMENT, FIRE/EMS							
C	Date Initial Lane/Rd Closed 08/16/2021	ea	LAVV	ENFORC	LWEIT, I INCLEMO						
	Date All Lanes Open	Time All Lanes Open			Scene Clea	red		me Scene Cleared 5:20 PM			
Ľ	08/16/2021	06:20 PM		08/16	5/2021		06	:20 PM			
	nit Summary ===		11/1		: 4 0	1 16 0					
	Jnit Status	- 1		erating As C	lassification		Unit Type TRUCK				
	N TRANSIT	0 0	LASS								
- 1	Vehicle Type STRAIGHT TRUCK (INSERT TRUCK)						Operating As Endorsements				
_	Total Occs	Tota	l# Cita	tions lesued	† Total Traile		 ilers		Mat Types		
2		Train/Bus#Recorded	0	Total # Citations Issued 0		0		0		Zinat rypos	
-	nsurance?	Direction Of Travel		Pre	CrashTire	1 2 11		nit	Total Lane	 es	
١	(ES	SOUTHBOUND	V	1 10	Mark		20		2		
l	Most Harmful Event: Collision W		cial Fur	nction IAL FUNC	L			Emergency Motor Vehicle Use			
\vdash			fic Con				Traffic Control Inoperative/Missing				
	Traffic Way TWO-WAY, NOT DIVIDED				ROL			NO			
5	Surface Type				ature	- 1		Road Grade			
E	BLACKTOP (BITUMINOUS	CUI	RVE LI	EFT			DOWNHIL	L			
	ruck Bus or HazMat	NATION > 10 0001 BS GV	WR/GC	WR							
	Vehicle										
	License Plate Number		Pla	te Type			St	Country of lss	suance		
	QB17251				AVY TRU	ск	WI	UNITED ST			
	Vehicle Identification Num	ber	Ma	ke			Year	Model			
	5 3HAWGTAT1JL327104 INTERNATIONAL						2018	7000			

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		Color		Body Style Bus Use							
		WHI - WHITE		GG - GARBAGE OR I	REFUSE						
١.		Initial Contact Point	Vehicle Damage			7 8 9 10 11					
UNIT	9	00 - NON-COLLISION					6 17				
5	I	Extent Of Damage		15 - ALL AREAS							
_	VEHICLE	DISABLING DAMAGE					5 4 8 2 1				
		Towed Due To Damage	1	Vehicle Removed By							
		TOWED DUE TO DISABLING		WEGNER'S AUTO SERVICE							
		What Driver Was Doing		Vehicle Factors							
		GOING STRAIGHT		venicle i actors							
				DRAVEC							
		Driver Prior Action Other	['	BRAKES							
		District of the Control of the Contr									
		Driver Actions NO COMPRISION ACTION									
	ш	NO CONTRIBUTING ACTION									
╘	o .										
¥	I										
–	VEHIC										
		Owner Name		L Overs on Andrews							
		PETERSON SANITATION IN	r	Owner Address 104 PARK ST							
7	5	(608) 524-6603	•	BOSCOBEL, WI 53805 , US							
9		(****,****									
		Sequence Of Events									
		Event									
	5	OVERTURN/ROLLOVER									
		Event									
	8	E 4 6 1 1									
		_									
	8	Event									
	8	Event									
l∟		Policy Holder									
N		Insurance Company		Organization/Compan							
5		COVERRA INSURANCE		PETERSON SANIT							
		Individual									
		Driver		Citations Issued Sex							
		ERIC FLETCHER FLANSBU	RGH	0	MALE						
	4	(608) 632-7432		Date of Birth	Race						
⊨	3				WHITE						
Š		Address		Driver License Number							
\supset	NON N	E7923 GREEN ACRES RD		Sitt of Cloud 3 to thing 1							
		VIROQUA, WI 54665 , US		STATE: WISCONSIN COUNTRY: UNITED STATES							
	Ç.,	On Duty Cr fety Equipment	asn	Safety Equipment							
	va:	-									
		Row	Seat Position	NONE USED - VEH	IICLE OCCUPANT						
		01 - FRONT ROW	07 - LEFT								
		HelmetUse	•	Helmet Compliance							
		Eye Protection		Tint Compliance							
		-									
	4	Injury Seve	erity	Airbag							
5	8		TED SERIOUS INJUR	NON DEPLOYED							
		(COMPANY CONTROL CONTR	ection Path			Trapped/Extricated					
		'	Jection Path OT EJECTED/NOT APPI	ICADI E							
		1	O EVECTED/NOT APP			NOT TRAPPED					
		Medical Transport		EMS Agency Identifie	r	EMS Run#					
		EMS GROUND		6000555							

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		Hospital SAUK PRAIRIE HOS		Date of Death			Time of Death					
		Distracted By N	istracted By	y Source .ICABLE	(NOT DISTRAC							
		Distracted By Action NOT DISTRACTED										
		Non Motorist	triking Unit	#	Location							
		Prior Action										
		Action										
	4											
LIND	INDIVIDUAL											
_	2											
		Action Other								To/From School		
	ı	Drug & Alcohol NO			Suspected Drug Use NO	€						
		AlcoholTestGiven TEST NOT GIVEN			Alcohol Test Type				Alcohol Test Results			
		Drug Test Given Drug Test Type TEST NOT GIVEN		Drug Test Type	Drug Test Result			5				
5	8	Drug Type										
		Individual Condition										
		APPEARED NORMAL										
		individual										
		Passenger JACOB DEAN KUCKKAHN (608) 391-0541				Citations issued 0		Sex MALE				
⊨	DIVIDUAL				Date of Birth		Race WHITE					
ENO.		Address 28193 KICKAPOO VALLEY RD STEUBEN, WI 54657 , US On Duty Crash			Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES							
	=				STATE: WISCONSIN COUNTRY: UNITED STATES							
	Sai				Safety Equipment							
		Row 01 - FRONT ROW		Seat Pos		NONE USED - VEHICLE OCCUPANT						
		HelmetUse				Helmet Compliance						
		Eye Protection			Tint Compliance							
2	8	Injury Severity Injury Suspected Serious INJUR			Airbag NON DEPLOYED							
		Ejection Path				1			Trapped/Extricated			
		NOT EJECTED Medical Transport	NO	ıı EJEC	TED/NOT APPL	EMS Agency Identif	ler		NOT TRAPPED EMS Run#			
		EMS GROUND Hospital				6000555 Date of Death			Time of Death			
		SAUK PRAIRIE HOSP										

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		Distracted By Distracted	By Source	e								
		Distracted By Action										
		Non Motorist Striking U	nit#	Location								
		Prior Action										
		Action										
_	UAL											
LIND	INDIWIDUAL											
	INI											
		Action Other								To/From School		
	Ĺ	Orug & Alcohol NO	d Alcohol U	Jse	Suspe 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					
2	002	Drug Type										
		le dicide al Com differen										
		Individual Condition APPEARED NORMAL										
	(Sarrier ggedekene de de de de de de		engengengengengengengengenge	\$\$*\$\$*\$\$*\$\$			·\$\\$\\$\\$	ka na	aktiko kokokokokokokokokokokokokokokokokoko		
		Use Vehicle O	wner Sar	ne as Carrîer		Source VEHICLE-SIDI	E	XIONONOIZXIONOII	nure anni shume e u un samue e arme supre e u un samue e un i samue e anni samue e anni samue e	uunsimine enginsimuse enginsimuse anadamine enginsimuse enginsimuse enginsimuse enginsimuse enginsimuse engins		
0	101	PETERSON SANITAT USDOT# 1366690	ION INC	C		Address 104 PARK ST BOSCOBEL, WI 53805 , US						
	US	GVWR		Configuration			Cargo Body Type					
N	В	MORE THAN 26,000 LB SINGLE US DOT# Carrier Ty		-UNIT TRUCK (2-AXLE AND GVWR M			IORE THA GARBAGE/REFUSE Permitted Load					
_	ΣK	1366690	OTHER	OPERATION/NOT				APPLICABLE				
	TRUCK	OS/OW Load Wi Permit		Per Per		ehicle On I Route			ermit L	Scort Vehicle Present		
		Measured Height	Measu	ired Length		Measured Width	1		Measured Weight			
	vennesiiiiiiiii					•			•			