

6TL0BFKDFM
21-08961

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

6TL0BFKDFM

Document Number Override		Primary Crash Document#		Agency Crash Number 21-08961		Investigating Officer/Deputy DEPUTY H. VOLZ	
Crash Date 09/19/2021		Crash Time 01:50 PM		Date Arrived 09/19/2021		Time Arrived 02:23 PM	
Date Notified 09/19/2021		Time Notified 01:53 PM		Total Units 01		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	
		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 WEST BOUND ON WALNUT ST. UNIT 1 OPERATOR ADMITTED TO LOOKING DOWN AT HIS CELL PHONE. UNIT 1 STRUCK THE CURB AND WENT ONTO THE SIDEWALK AREA. UNIT 1 STRUCK TWO MAILBOXES.

WISCONSIN MOTOR VEHICLE
CRASH REPORT

Location

ON WALNUT ST/ STH154 WB 476 FT W OF WEST ST IN THE VILLAGE OF LOGANVILLE IN SAUK COUNTY	Latitude 43.440405738	Longitude -90.039840028
	X Coordinate 253998.15625	Y Coordinate 4814212.5
	Structure Type	

Crash Scene

First Harmful Event MAILBOX	First Harmful Event Location ROADSIDE	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	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 NON-JUNCTION	Intersection Type NOT AN 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 WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 35	Total Lanes 2
	Most Harmful Event: Collision With MAILBOX	Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED	Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)	Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO				

Vehicle

UNIT VEHICLE 01	License Plate Number 8J34K6	Plate Type LTK - LIGHT TRUCK	St TN	Country of Issuance UNITED STATES
	Vehicle Identification Number 1C6RR7PT4DS571773	Make DODGE	Year 2013	Model RAM 1500
	Color WHI - WHITE	Body Style TK - TRUCK	Bus Use	
	Initial Contact Point 01 - RIGHT FRONT CORNER	Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 12 - FRONT		
Extent Of Damage FUNCTIONAL DAMAGE				

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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 OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER			
01	Owner Name KELLY EDWARD LONG (615) 979-1181		Owner Address 391 E 1ST ST RICHLAND CENTER, WI 53581 , US	
	Sequence Of Events			
01	01	Event CURB		
	02	Event MAILBOX		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company GEICO-GENERAL-INS-CO		Individual KELLY LONG	
UNIT INDIVIDUAL	Driver KELLY EDWARD LONG (615) 979-1181		Citations Issued 1	Sex MALE
	Address 391 E 1ST ST RICHLAND CENTER, WI 53581 , US		Date of Birth [REDACTED]	Race WHITE
	Driver License Number [REDACTED]		STATE: WISCONSIN COUNTRY: UNITED STATES	
	Safety Equipment			
01	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 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 HAND-HELD MOBILE PHONE		
Distracted By Action MANUALLY OPERATING(TEXTING,DIALING,PLAYING GAME ETC)				

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT INDIVIDUAL 01 001	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	UTC Number BD758965	Issue To? 001	Statute Number 346.89(1)	Description INATTENTIVE DRIVING		

Property Owner

PROP OWNER 01	Individual DENNIS R BRENEMAN (608) 963-7259		Address 205 WALNUT ST LOGANVILLE, WI 53943 , US		
------------------------------	--	--	---	--	--

Fixed Objects Struck

01	Striking Unit	Struck Object	Structure Number	Damage Tag Number
	01	MAILBOX		0000

Property Owner

PROP OWNER 02	Individual AMANDA R OKELLO (715) 205-3007		Address 210 WALNUT ST LOGANVILLE, WI 53943 , US		
------------------------------	--	--	---	--	--

Fixed Objects Struck

02	Striking Unit	Struck Object	Structure Number	Damage Tag Number
	01	MAILBOX		0000