

6TL0FB001J
24-09229

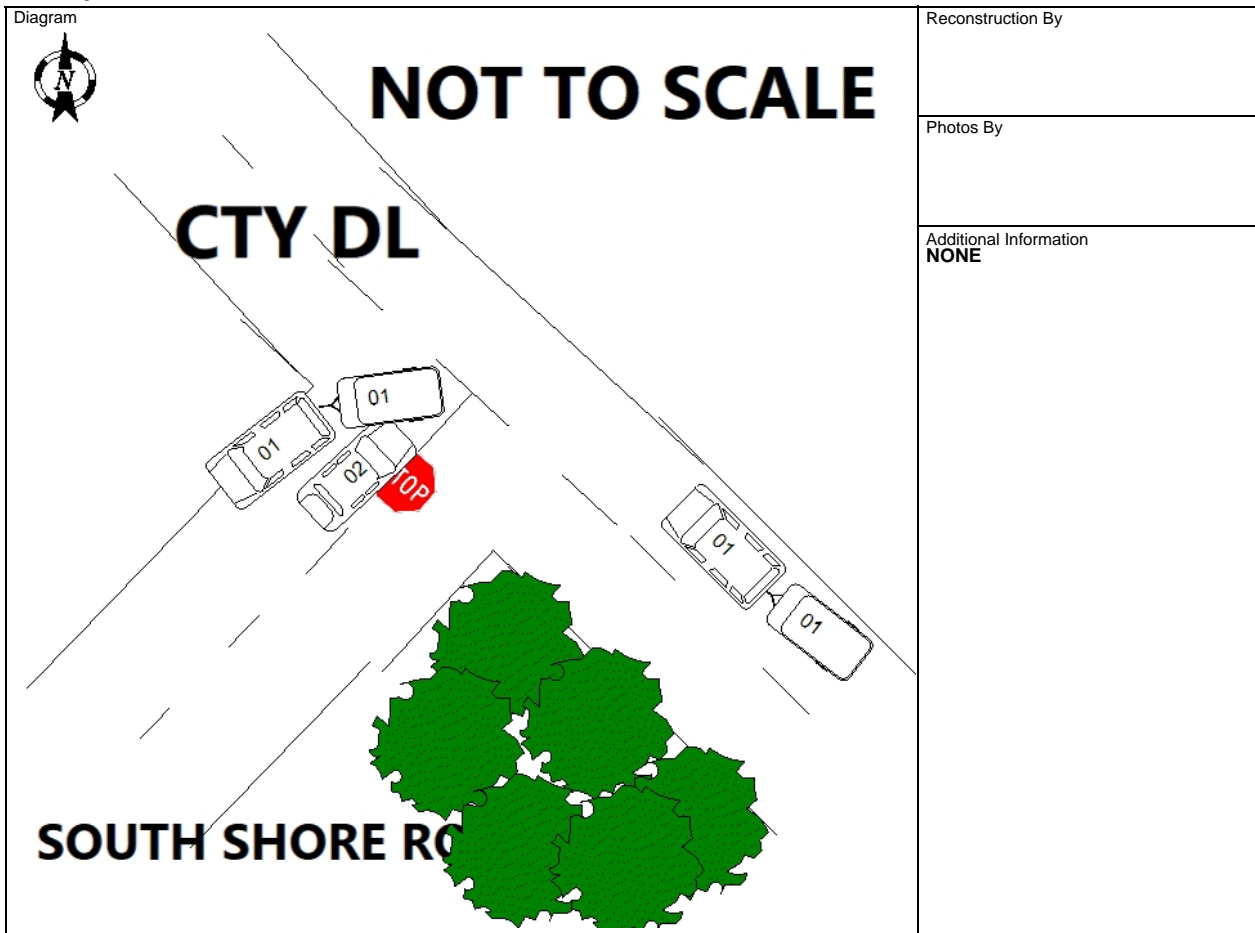
WISCONSIN MOTOR VEHICLE
CRASH REPORT

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 24-09229		Investigating Officer/Deputy DEPUTY W. NEUBAUER	
Crash Date 08/20/2024		Crash Time 02:35 PM		Date Arrived 08/20/2024		Time Arrived 02:50 PM	
Date Notified 08/20/2024		Time Notified 02:38 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



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

UNIT 1 WAS TRAVELING N/B ON CTY DL, HAULING A CAMPER TRAILER. UNIT 2 WAS STOPPED AT THE POSTED STOP SIGN AT THE INTERSECTION OF SOUTH SHORE RD @ CTY DL. UNIT 2 WAS BEYOND THE DESIGNATED STOPPING AREA AND BEYOND THE POSTED STOP SIGN. THE INTERSECTION IS A T INTERSECTION WITH A MEDIAN DIVIDING THE RIGHT AND LEFT TURN LANES WITH THE POSTED STOP SIGN IN THE MEDIAN. UNIT 1 WAS TURNING LEFT. UNIT 1 NEGOTIATED TURN AND STRUCK UNIT 2 WITH THE RV TRAILER CAUSING MINOT DAMAGE TO THE TRAILER AND UNIT 2.

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Location

ON S SHORE RD 32 FT S OF BREEZY KNOLL LN/ STH136 EB IN THE TOWN OF BARABOO IN SAUK COUNTY	Latitude 43.436448859	Longitude -89.743453076
	X Coordinate 277970.125	Y Coordinate 4812940
	Structure Type	

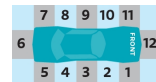
Crash Scene

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 YES	Junction Location INTERSECTION	Intersection Type T-INTERSECTION	

Unit Summary

UNIT	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type TRUCK	
	Vehicle Type (SPORT) UTILITY VEHICLE				Operating As Endorsements	
	Total Occs 4	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 1	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 45	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 TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature CURVE RIGHT		Road Grade DOWNHILL	
	Truck Bus or HazMat NO					

UNIT	01	Vehicle			
		License Plate Number ASV6256	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 3GNGC26U94G232276	Make CHEVROLET	Year 2004	Model SUBURBAN
		Color WHI - WHITE	Body Style UT - SPORT UTILITY VEHICLE		Bus Use
		Initial Contact Point 00 - NON-COLLISION	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 LEFT TURN		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions OTHER CONTRIBUTING ACTION			
01	Owner Name JOHN ZIMMERMAN (608) 214-6946		Owner Address N3205 COUNTY ROAD N MONROE, WI 53566 , US	
Sequence Of Events				
01	Event LEFT TURN			
02	Event MOTOR VEH IN TRANSPORT			
03	Event			
04	Event			
UNIT	Policy Holder			
	Insurance Company HARTFORD-INS-CO-OF-THE-MIDWEST		Individual JOHN ZIMMERMAN	
UNIT TRAILER/	Trailer/Towed			
	Trailer Plate # 15414RV	Plate Type RVT - REC	Make SPMN	State WI
	Country of Issuance UNITED STATES			
	Unit Type RECREATIONAL	Individual JOHN ZIMMERMAN (608) 214-6946		Address N3205 COUNTY ROAD N MONROE, WI 53566 , US
	Vehicle Identification Number 4EZTS272594014748			
UNIT INDIVIDUAL	Individual			
	Driver JOHN ZIMMERMAN (608) 214-6946		Citations Issued 0	Sex MALE
	Date of Birth		Race WHITE	
	Address N3205 COUNTY ROAD N MONROE, WI 53566 , US		Driver License Number	
01 001	Safety Equipment		On Duty Crash	
	Safety Equipment SHOULDER & LAP BELT			
	Row 01 - FRONT ROW	Seat Position 07 - LEFT		
	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

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UNIT	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				
	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					
UNIT	Individual				
	Passenger LINDSAY DODGE (608) 705-3770		Citations Issued 0	Sex FEMALE	
	Address N3205 COUNTY ROAD N MONROE, WI 53566 , US		Date of Birth	Race WHITE	
	Driver License Number				
	Safety Equipment		On Duty Crash		
	Row 01 - FRONT ROW		Seat Position 09 - RIGHT	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 #		

Wisconsin Motor Vehicle Crash
Form DT4000

This report does not include any CJIS data.
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Crash Date **08/20/2024**
Crash Time **02:35 PM**

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UNIT	Hospital		Date of Death		Time of Death	
	Distracted By		Distracted By Source			
	Distracted By Action					
	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	
01 002	Drug Type					
	Individual Condition APPEARED NORMAL					
	Individual					
	Passenger CARSON ZIMMERMAN (608) 214-6946			Citations Issued 0	Sex MALE	
	Address N3205 COUNTY ROAD N MONROE, WI 53566 , US			Date of Birth	Race WHITE	
	Driver License Number					
	Safety Equipment		On Duty Crash		Safety Equipment	
	Row 02 - SECOND ROW	Seat Position 09 - RIGHT	SHOULDER & LAP BELT			
	Helmet Use			Helmet Compliance		
	Eye Protection			Tint Compliance		
01 003	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	

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UNIT	Distracted By Distracted By Source	
	Distracted By Action	
	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	
UNIT	Individual	
	Passenger WYATT ZIMMERMAN (608) 214-6946	Citations Issued 0 Sex MALE
		Date of Birth Race WHITE
	Address N3205 COUNTY ROAD N MONROE, WI 53566 , US	Driver License Number
	Safety Equipment	On Duty Crash Safety Equipment BOOSTER SEAT
	Row 02 - SECOND ROW	Seat Position 07 - LEFT
	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	

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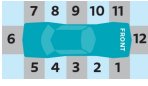
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UNIT 01 004	Distracted By Action		
	Non Motorist	Striking Unit #	Location
	Prior Action		
	Action		
	Action Other		To/From School
	Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use NO
	Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	Alcohol Test Results
	Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results
	Drug Type		
	Individual Condition APPEARED NORMAL		

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	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 35	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 TWO-WAY, NOT DIVIDED		Traffic Control STOP SIGN	Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT	Road Grade LEVEL	
	Truck Bus or HazMat NO				

Vehicle

UNIT 02 VEHICLE	License Plate Number 2694675	Plate Type AUT - AUTOMOBILE	St IL	Country of Issuance UNITED STATES
	Vehicle Identification Number 1HGCR3F80GA019560	Make HONDA	Year 2016	Model ACCORD
	Color BLK - BLACK	Body Style 4D - 4DR	Bus Use	
	Initial Contact Point 11 - LEFT FRONT CORNER	Vehicle Damage		
	Extent Of Damage MINOR DAMAGE	11 - LEFT FRONT CORNER		

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UNIT	VEHICLE	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR		
		What Driver Was Doing OTHER	Vehicle Factors NOT APPLICABLE		
		Driver Prior Action Other STOPPED AT POSTED STOP SIGN, STOPPED			
		Driver Actions OTHER CONTRIBUTING ACTION			
02	02	Owner Name ERIC NELSON (630) 877-0512	Owner Address 760 CHANDLER AVE GENEVA, IL 60134 , US		
		Sequence Of Events			
UNIT	INDIVIDUAL	01 Event MOTOR VEH IN TRANSPORT			
		02 Event			
		03 Event			
		04 Event			
Policy Holder					
02	005	Insurance Company PROGRESSIVE-CASUALTY-INS-CO	Individual ERIC NELSON		
		Individual			
		Driver ERIC NELSON (630) 877-0512	Citations Issued 0	Sex MALE	
		Address 760 CHANDLER AVE GENEVA, IL 60134 , US	Date of Birth	Race WHITE	
Safety Equipment		Driver License Number			
On Duty Crash		Safety Equipment SHOULDER & LAP BELT			
Row 01 - FRONT ROW	Seat Position 07 - LEFT				
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				