

6TL0D942BV  
SC24-09051

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

6TL0D942BV

|  |                                      |  |                                    |  |   |   |  |
|--|--------------------------------------|--|------------------------------------|--|---|---|--|
| Document Number Override                       |                                      | Primary Crash Document #                     |                                    | Agency Crash Number<br><b>SC24-09051</b> |   | Investigating Officer/Deputy<br><b>DEPUTY M. PETERSON</b> |  |
| Crash Date<br><b>08/15/2024</b>                |                                      | Crash Time<br><b>10:00 PM</b>                |                                    | Date Arrived<br><b>08/15/2024</b>        |   | Time Arrived<br><b>10:36 PM</b>                           |  |
| Date Notified<br><b>08/15/2024</b>             |                                      | Time Notified<br><b>10:11 PM</b>             |                                    | Total Units<br><b>02</b>                 |   | Total Injured<br><b>00</b>                                | Total Killed<br><b>00</b>                |
| <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<br><b>NO</b>          |   | Tags  |  |
| <input checked="" type="checkbox"/> Reportable |                                      | Crash Type<br><b>DT4000 (STANDARD CRASH)</b> |                                    |  |   | <input type="checkbox"/> Amended                          | <input type="checkbox"/> Secondary Crash |

Description

|         |                                       |
|---------|---------------------------------------|
| Diagram | Reconstruction By                     |
|         | Photos By                             |
|         | Additional Information<br><b>NONE</b> |

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

UNIT ONE WAS TRAVELING SOUTH ON USH 12 AND CROSSED THE CENTER LINE. AT THAT TIME UNIT TWO WAS TRAVELING NORTH ON USH 12 AND WAS STRUCK BY UNIT ONE IN A SIDE SWIPE COLLISION. BOTH VEHICLES SUSTAINED DAMAGE TO THEIR DRIVER SIDE MIRROR AND WINDOW. UNIT TWO OPERATOR SAID THAT UNIT ONE CROSSED OVER THE CENTER LINE AND THAT'S WHAT CAUSED THE COLLISION. UNIT TWO FOLLOWED UNIT ONE AND WAS ABLE TO OBTAIN THE REGISTRATION. UNIT ONE OPERATOR REPORTED NO INJURIES AND WAS WEARING HIS SEATBELT. UNIT ONE DID NOT STOP AT THE SCENE AND CONTINUED TO HIS HOME ADDRESS. I MADE PHONE CONTACT WITH UNIT ONE OPERATOR WHO ADMITTED HE WAS DRIVING AND KNEW HE AS INVOLVED IN AN CRASH. HE BELIEVED THAT HE WAS STRUCK BY UNIT TWO AND DENIED CROSSING OVER THE CENTER LINE. THE OPERATOR WAS AWARE THAT HE WAS SUPPOSED TO STOP AND INVESTIGATE A CRASH BUT COULDN'T AS HE WAS BEHIND A SEMI AND THERE WAS A CAR BEHIND HIM. UNIT ONE OPERATOR DID NOT REPORT ANY INJURIES AND SAID HE WAS NOT WEARING HIS SEATBELT AT THE TIME OF THE CRASH. UNIT ONE OPERATOR WAS CITED FOR OPERATING LEFT OF CENTER, NOT WEARING A SEATBELT AND FAILURE TO REPORT A CRASH TO LAW ENFORCEMENT. BOTH VEHICLES WERE DRIVEN FROM THE SCENE.

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Location

|  |                                       |                                   |
|--|---------------------------------------|-----------------------------------|
| ON USH12 EB<br>0.31 MI N<br>OF USH12 EB<br>IN THE TOWN OF PRAIRIE DU SAC<br>IN SAUK COUNTY | Latitude<br><b>43.297538525</b>       | Longitude<br><b>-89.759026502</b> |
|  | X Coordinate<br><b>276199.1875</b>    | Y Coordinate<br><b>4797553.5</b>  |
|  | Structure Type<br><b>NO STRUCTURE</b> |                                   |

Crash Scene

|   |   |   |
|---|---|---|
| First Harmful Event<br><b>MOTOR VEH IN TRANSPORT</b>            | First Harmful Event Location<br><b>ON ROADWAY</b>                     |   |
| Manner of Collision<br><b>06 - SIDESWIPE/OPPOSITE DIRECTION</b> | Light Condition<br><b>DARK/UNLIT</b>                                  |   |
| Road Surface Condition(s)<br><b>DRY</b>                         | Roadway Factor(s)<br><br><b>NONE</b>                                  |   |
| Environment Factor(s)<br><b>NONE</b>                            |   |   |
| Weather Condition(s)<br><b>CLEAR</b>                            |   |   |
| Animal Type   | Relation To Trafficway<br><b>TRAFFICWAY - ON ROAD</b>                 |   |
| Crash Classification - Location<br><b>PUBLIC PROPERTY</b>       | Crash Classification - Jurisdiction<br><b>NO SPECIAL JURISDICTION</b> |   |
| Tribal Land   | Access Control<br><b>NO CONTROL</b>                                   | Special Study                                   |
| Within Interchange Area<br><b>NO</b>                            | Junction Location<br><b>NON-JUNCTION</b>                              | Intersection Type<br><b>NOT AN INTERSECTION</b> |

Unit Summary

|                |   |   |  |                            |  |  |
|----------------|---|---|--|----------------------------|--|--|
| <b>UNIT 01</b> | Unit Status<br><b>IN TRANSIT</b>                                    | Vehicle Operating As Classification<br><b>D CLASS</b> |  | Unit Type<br><b>TRUCK</b>  |  |  |
|                | Vehicle Type<br><b>UTILITY TRUCK/PICKUP TRUCK</b>                   |   |  | Operating As Endorsements  |  |  |
|                | Total Occs<br><b>1</b>  | Train/Bus # Recorded                                  | Total # Citations Issued<br><b>3</b>           | Total Trailers<br><b>0</b> | Total HazMat Types<br><b>0</b>                       |  |
|                | Insurance?<br><b>YES</b>  | Direction Of Travel<br><b>SOUTHBOUND</b>              | <input type="checkbox"/> Pre CrashTire Mark    | Speed Limit<br><b>55</b>   | Total Lanes<br><b>2</b>                              |  |
|                | Most Harmful Event: Collision With<br><b>MOTOR VEH IN TRANSPORT</b> |   | Special Function<br><b>NO SPECIAL FUNCTION</b> |                            | Emergency Motor Vehicle Use<br><b>NOT APPLICABLE</b> |  |
|                | Traffic Way<br><b>TWO-WAY, NOT DIVIDED</b>                          |   | Traffic Control<br><b>NO CONTROL</b>           |                            | Traffic Control Inoperative/Missing<br><b>NO</b>     |  |
|                | Surface Type<br><b>BLACKTOP (BITUMINOUS)</b>                        |   | Road Curvature<br><b>STRAIGHT</b>              |                            | Road Grade<br><b>LEVEL</b>                           |  |
|                | Truck Bus or HazMat<br><b>NO</b>                                    |   |  |                            |  |  |

|                |                   |   |  |                     |   |
|----------------|-------------------|---|--|---------------------|---|
| <b>UNIT 01</b> | <b>VEHICLE 01</b> | <b>Vehicle</b>  |  |                     |   |
|                |                   | License Plate Number<br><b>UH9465</b>                     | Plate Type<br><b>LTK - LIGHT TRUCK</b> | St<br><b>WI</b>     | Country of Issuance<br><b>UNITED STATES</b> |
|                |                   | Vehicle Identification Number<br><b>1FTEW1EP8LFB67028</b> | Make<br><b>FORD</b>                    | Year<br><b>2020</b> | Model<br><b>F150</b>                        |
|                |                   | Color<br><b>BLU - BLUE</b>                                | Body Style<br><b>PK - PICKUP</b>       |                     | Bus Use                                     |
|                |                   | Initial Contact Point<br><b>10 - LEFT SIDE FRONT</b>      | Vehicle Damage                         |                     |   |
|                |                   | Extent Of Damage<br><b>FUNCTIONAL DAMAGE</b>              | <b>10 - LEFT SIDE FRONT</b>            |                     |   |



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|  |  |   |   |  |  |
|--|--|---|---|--|--|
| UNIT                                   | VEHICLE                                    | Towed Due To Damage<br><b>NOT TOWED</b>                             | Vehicle Removed By<br><b>OWNER</b>  |  |  |
|  |  | What Driver Was Doing<br><b>GOING STRAIGHT</b>                      | Vehicle Factors   |  |  |
|  |  | Driver Prior Action Other   | <b>NOT APPLICABLE</b>   |  |  |
|  |  | Driver Actions<br><b>WRONG SIDE OR WRONG WAY</b>                    |   |  |  |
| 01                                     | 01   | Owner Name<br><b>GARY MASON<br/>(608) 295-9780</b>                  | Owner Address<br><b>3527 S STATE ROAD 104<br/>BRODHEAD, WI 53520 , US</b> |  |  |
| <b>Sequence Of Events</b>              |  |   |   |  |  |
|  | 01   | Event<br><b>MOTOR VEH IN TRANSPORT</b>                              |   |  |  |
|  | 02   | Event   |   |  |  |
|  | 03   | Event   |   |  |  |
|  | 04   | Event   |   |  |  |
| UNIT                                   | <b>Policy Holder</b>                       |   |   |  |  |
|  | Insurance Company<br><b>ETNA INSURANCE</b> |   | Individual<br><b>GARY MASON</b>   |  |  |
|  | <b>Individual</b>                          |   |   |  |  |
| UNIT                                   | INDIVIDUAL                                 | Driver<br><b>GARY MASON<br/>(608) 295-9780</b>                      | Citations Issued<br><b>3</b>  | Sex<br><b>MALE</b>                     |  |
|  |  |   | Date of Birth   | Race<br><b>WHITE</b>                   |  |
|  |  | Address<br><b>3527 S STATE ROAD 104<br/>BRODHEAD, WI 53520 , US</b> |   | Driver License Number                  |  |
|  |  |   |   |  |  |
| 01                                     | 001  | <b>Safety Equipment</b>   |   | On Duty Crash                          |  |
|  |  |   |   | Safety Equipment                       |  |
|  |  | Row<br><b>01 - FRONT ROW</b>  | Seat Position<br><b>07 - LEFT</b>   | <b>NONE USED - VEHICLE OCCUPANT</b>    |  |
|  |  | Helmet Use  |   | Helmet Compliance                      |  |
|  |  | Eye Protection  |   | Tint Compliance                        |  |
|  |  | <b>Injury</b>   | Injury Severity<br><b>NO APPARENT INJURY</b>                              | Airbag<br><b>NON DEPLOYED</b>          |  |
|  |  | Ejected<br><b>NOT EJECTED</b>                                       | Ejection Path<br><b>NOT EJECTED/NOT APPLICABLE</b>                        |  | Trapped/Extricated<br><b>NOT TRAPPED</b> |
|  |  | Medical Transport<br><b>NOT TRANSPORTED</b>                         |   | EMS Agency Identifier                  | EMS Run #                                |
|  |  | Hospital  |   | Date of Death                          | Time of Death                            |
|  |  | <b>Distracted By</b>  |   | Distracted By Source<br><b>UNKNOWN</b> |  |
| Distracted By Action<br><b>UNKNOWN</b> |  |   |   |  |  |

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|      |   |                               |                                    |  |  |                |
|------|---|-------------------------------|------------------------------------|--|--|----------------|
| UNIT | INDIVIDUAL                                  | <b>Non Motorist</b>           |                                    | Striking Unit #                        | Location   |                |
|      |   | Prior Action                  |                                    |  |  |                |
|      |   | Action                        |                                    |  |  |                |
|      | Action Other                                |                               |                                    |  |  | To/From School |
|      | <b>Drug &amp; Alcohol</b>                   |                               | Suspected Alcohol Use<br><b>NO</b> |  | Suspected Drug Use<br><b>NO</b>  |                |
|      | Alcohol Test Given<br><b>TEST NOT GIVEN</b> |                               | Alcohol Test Type                  |  | Alcohol Test Results   |                |
|      | Drug Test Given<br><b>TEST NOT GIVEN</b>    |                               | Drug Test Type                     |  | Drug Test Results  |                |
|      | Drug Type                                   |                               |                                    |  |  |                |
|      | Individual Condition<br><b>NOT OBSERVED</b> |                               |                                    |  |  |                |
|      | <b>Violations</b>                           |                               |                                    |  |  |                |
| 01   | 001   | UTC Number<br><b>BG943748</b> | Issue To?<br><b>001</b>            | Statute Number<br><b>346.05(1)</b>     | Description<br><b>OPERATING LEFT OF CENTER</b>                         |                |
|      |   | UTC Number<br><b>BG943749</b> | Issue To?<br><b>001</b>            | Statute Number<br><b>347.48(2m)(b)</b> | Description<br><b>VEHICLE OPERATOR FAIL/WEAR SEAT BELT</b>             |                |
|      |   | UTC Number<br><b>BG943750</b> | Issue To?<br><b>001</b>            | Statute Number<br><b>346.70(1)</b>     | Description<br><b>FAILURE OF OPERATOR TO NOTIFY POLICE OF ACCIDENT</b> |                |

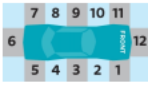
**Unit Summary**

|   |    |   |  |  |  |  |  |   |  |
|---|----|---|--|--|--|--|--|---|--|
| UNIT  | 02 | Unit Status<br><b>IN TRANSIT</b>                                    |  | Vehicle Operating As Classification<br><b>D CLASS</b>  |  | Unit Type<br><b>TRUCK</b>                        |  |   |  |
|   |    | Vehicle Type<br><b>CARGO VAN (10,000 LBS OR LESS)</b>               |  |  |  |  | Operating As Endorsements                            |   |  |
|   |    | Total Occs<br><b>1</b>  | Train/Bus # Recorded                     | Total # Citations Issued<br><b>0</b>                   | Total Trailers<br><b>0</b>                     | Total HazMat Types<br><b>0</b>                   |  |   |  |
|   |    | Insurance?<br><b>YES</b>  | Direction Of Travel<br><b>NORTHBOUND</b> | <input type="checkbox"/> Pre Crash<br><b>Tire Mark</b> | Speed Limit<br><b>55</b>                       | Total Lanes<br><b>2</b>                          |  |   |  |
|   |    | Most Harmful Event: Collision With<br><b>MOTOR VEH IN TRANSPORT</b> |  |  | Special Function<br><b>NO SPECIAL FUNCTION</b> |  | Emergency Motor Vehicle Use<br><b>NOT APPLICABLE</b> |   |  |
|   |    | Traffic Way<br><b>TWO-WAY, NOT DIVIDED</b>                          |  | Traffic Control<br><b>NO CONTROL</b>                   |  | Traffic Control Inoperative/Missing<br><b>NO</b> |  |   |  |
|   |    | Surface Type<br><b>BLACKTOP (BITUMINOUS)</b>                        |  | Road Curvature<br><b>STRAIGHT</b>                      |  | Road Grade<br><b>LEVEL</b>                       |  |   |  |
|   |    | Truck Bus or HazMat<br><b>NO</b>                                    |  |  |  |  |  |   |  |
|   |    | <b>Vehicle</b>  |  |  |  |  |  |   |  |
|   |    | 02  | 02                                       | License Plate Number<br><b>XE30945</b>                 |  | Plate Type<br><b>HTK - HEAVY TRUCK</b>           | St<br><b>WI</b>                                      | Country of Issuance<br><b>UNITED STATES</b> |  |
| Vehicle Identification Number<br><b>1N6BF0LY4MN802307</b> |    |   |  | Make<br><b>NISSAN</b>                                  | Year<br><b>2021</b>                            | Model<br><b>NV</b>                               |  |   |  |

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|   |   |  |   |  |
|---|---|--|---|--|
| UNIT<br>VEHICLE                             | Color<br><b>WHI - WHITE</b>                                 | Body Style<br><b>VN - VAN</b>  | Bus Use   |  |
|   | Initial Contact Point<br><b>10 - LEFT SIDE FRONT</b>        | Vehicle Damage<br><b>10 - LEFT SIDE FRONT</b>                        |  |  |
|   | Extent Of Damage<br><b>FUNCTIONAL DAMAGE</b>                |  |   |  |
|   | Towed Due To Damage<br><b>NOT TOWED</b>                     | Vehicle Removed By<br><b>OPERATOR</b>                                |   |  |
|   | What Driver Was Doing<br><b>GOING STRAIGHT</b>              | Vehicle Factors<br><b>NOT APPLICABLE</b>                             |   |  |
| UNIT<br>VEHICLE                             | Driver Prior Action Other                                   |  |   |  |
|   | Driver Actions<br><b>NO CONTRIBUTING ACTION</b>             |  |   |  |
|   | Owner Name<br><b>ACTION PLUMBING AND HEATING</b>            | Owner Address<br><b>899 S BIRD ST<br/>SUN PRAIRIE, WI 53590 , US</b> |   |  |
| UNIT<br>02                                  | <b>Sequence Of Events</b>                                   |  |   |  |
|   | 01  | Event<br><b>MOTOR VEH IN TRANSPORT</b>                               |   |  |
|   | 02  | Event  |   |  |
|   | 03  | Event  |   |  |
|   | 04  | Event  |   |  |
| UNIT<br>02                                  | <b>Policy Holder</b>  |  |   |  |
|   | Insurance Company<br><b>AMERISURE-INS-CO</b>                | Organization/Company<br><b>ACTION PLUMBING AND HEATING</b>           |   |  |
|   | <b>Individual</b>   |  |   |  |
| UNIT<br>INDIVIDUAL                          | Driver<br><b>MICHAEL OTT<br/>(608) 434-0889</b>             | Citations Issued<br><b>0</b>   | Sex<br><b>MALE</b>  |  |
|   | Date of Birth   |  | Race<br><b>WHITE</b>  |  |
|   | Address<br><b>455 RUSSELL ST<br/>BARABOO, WI 53913 , US</b> |  | Driver License Number   |  |
| UNIT<br>02                                  | <b>Safety Equipment</b>                                     |  |   |  |
|   | On Duty Crash   |  | Safety Equipment<br><b>SHOULDER &amp; LAP BELT</b>                                  |  |
|   | Row<br><b>01 - FRONT ROW</b>                                | Seat Position<br><b>07 - LEFT</b>                                    |   |  |
|   | Helmet Use  |  | Helmet Compliance   |  |
|   | Eye Protection  |  | Tint Compliance   |  |
| UNIT<br>02                                  | <b>Injury</b>   |  | Airbag  |  |
|   | <b>NO APPARENT INJURY</b>                                   |  | <b>NON DEPLOYED</b>   |  |
|   | Ejected<br><b>NOT EJECTED</b>                               | Ejection Path<br><b>NOT EJECTED/NOT APPLICABLE</b>                   | Trapped/Extricated<br><b>NOT TRAPPED</b>  |  |
| Medical Transport<br><b>NOT TRANSPORTED</b> |   | EMS Agency Identifier  | EMS Run #   |  |

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|      |  |  |  |  |                                 |  |
|------|--|--|--|--|---------------------------------|--|
| UNIT | Hospital                                       |  | Date of Death  |  | Time of Death                   |  |
|      | <b>Distracted By</b>                           |  | Distracted By Source<br><b>NOT APPLICABLE (NOT DISTRACTED)</b> |  |                                 |  |
|      | Distracted By Action<br><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<br><b>NO</b>                             |  | Suspected Drug Use<br><b>NO</b> |  |
|      | Alcohol Test Given<br><b>TEST NOT GIVEN</b>    |  | Alcohol Test Type  |  | Alcohol Test Results            |  |
|      | Drug Test Given<br><b>TEST NOT GIVEN</b>       |  | Drug Test Type   |  | Drug Test Results               |  |
|      | Drug Type                                      |  |  |  |                                 |  |
|      | Individual Condition<br><b>APPEARED NORMAL</b> |  |  |  |                                 |  |