

6TL0F3SSH4
24-10855

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 24-10855		Investigating Officer/Deputy DEPUTY A. KING	
Crash Date 09/28/2024		Crash Time 10:45 AM		Date Arrived 09/28/2024		Time Arrived 10:59 AM	
Date Notified 09/28/2024		Time Notified 10:46 AM		Total Units 02		Total Injured 01	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 checked="" 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>Reconstruction By</p> <p>Photos By</p> <p>Additional Information NONE</p>
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I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

OPERATOR OF U1 STATED HE STOPPED BEHIND THE STOP LINE ON PIT RD., THEN PULLED FORWARD AND STOPPED. OPERATOR OF U1 STATED THAT WAS WHEN U2 APPROACHED HIM AND SWERVED TO THE LEFT AND STRUCK THE UTILITY POLE THAT WAS IN THE MEDIAN. OPERATOR OF U1 STATED HE DID NOT BELIEVE HE WAS IN THE LANE OF TRAVEL.

OPERATOR OF U2 STATED HE WAS SOUTHBOUND ON CH BD WHEN U1 PULLED FORWARD FROM THE STOP LINE INTO HIS LANE AND THEN STOPPED IN THE LANE OF TRAFFIC. OPERATOR OF U2 STATED HE HAD TO SWERVE TO AVOID COLLIDING WITH U1. OPERATOR OF U2 STATED HE SLAMMED ON THE BRAKES TRYING TO STOP BUT WAS UNABLE TO. I DID LOCATED TIRE MARKS IN THE LANE CONSISTENT WITH OPERATOR OF U2'S STORY. OPERATOR OF U2 STATED HIS RIGHT HAND HURT SLIGHTLY BUT DENIED EMS ATTENTION. OPERATOR WAS COUNSELED ON BEING SEEN FOR THE INJURY.

WITNESS TO THE CRASH SAID SHE WAS IN THE RIGHT TURN LANE FROM PIT RD., TO CH BD WHEN SHE SAW U2 SOUTHBOUND. WITNESS SAID THAT U1 "JUST PULLED OUT" IN FRONT OF U2 AND U2 ATTEMPTED TO AVOID A COLLISION.

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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 FAILED TO YIELD RIGHT-OF-WAY			
01	01	Owner Name DALE JAEDIKE (608) 669-1001		Owner Address E8390A COUNTY ROAD C NORTH FREEDOM, WI 53951 , US	
		Sequence Of Events			
UNIT	INDIVIDUAL	Event OTHER NON-COLLISION			
		Event			
		Event			
		Event			
01	001	Policy Holder			
		Insurance Company SECURA-INS-CO		Individual DALE JAEDIKE	
01	001	Driver DALE JAEDIKE		Citations Issued 1	Sex MALE
		Address E8390A COUNTY ROAD C NORTH FREEDOM, WI 53951 , US		Date of Birth	Race WHITE
01	001	On Duty Crash		Safety Equipment	
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
01	001	Helmet Use		Helmet Compliance	
		Eye Protection		Tint Compliance	
01	001	Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
		Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
01	001	Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #
		Hospital		Date of Death	Time of Death
01	001	Distracted By			
		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)			
01	001	Distracted By Action NOT DISTRACTED			

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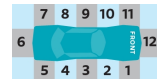
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UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
		Action Other					
		To/From School					
		Drug & Alcohol		Suspected Alcohol Use NO		Suspected Drug Use NO	
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type		Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	
		Drug Type					
		Individual Condition APPEARED NORMAL					
01	001	Violations					
		UTC Number BK261534	Issue To? 001	Statute Number 346.18(3)	Description FAIL/YIELD RIGHT/WAY FROM STOP SIGN		

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? NO		Direction Of Travel SOUTHBOUND		Speed Limit 55	
		Total Lanes 2		Most Harmful Event: Collision With OTHER POST, POLE OR SUPPORT		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							
		02	02	Vehicle					
				License Plate Number		Plate Type		St	
Vehicle Identification Number 1G2MB33B76Y109418				Make PONTIAC		Year 2006		Model SOLSTICE	
Color SIL - SILVER (ALUMINUM)				Body Style CV - CONVERTIBLE		Bus Use			
Initial Contact Point 12 - FRONT									



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UNIT VEHICLE	Extent Of Damage DISABLING DAMAGE		Vehicle Damage 12 - FRONT
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By CRAIGS TOWING
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors
	Driver Prior Action Other		NOT APPLICABLE
UNIT VEHICLE	Driver Actions NO CONTRIBUTING ACTION		
	Owner Name TODD HINZ (608) 408-7554	Owner Address S1975 COUNTY ROAD A # 16 BARABOO, WI 53913 , US	
UNIT VEHICLE	Sequence Of Events		
	01	Event OTHER POST, POLE OR SUPPORT	
	02	Event	
	03	Event	
	04	Event	
UNIT INDIVIDUAL	Individual		
	Driver TODD HINZ (608) 408-7554	Citations Issued 0	Sex MALE
		Date of Birth	Race WHITE
	Address S1975 COUNTY ROAD A # 16 BARABOO, WI 53913 , US	Driver License Number	
UNIT INDIVIDUAL	Safety Equipment		On Duty Crash
			Safety Equipment
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	NONE USED - VEHICLE OCCUPANT
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	Injury	Injury Severity POSSIBLE INJURY	Airbag DEPLOYED-FRONT
	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)	

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UNIT	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			
Property Owner				
PROP OWNER	01	Government SAUK COUNTY HWY DEPT (608) 356-3855		Address 620 STH 136 PO BOX 26 BARABOO, WI 53913 , US
		Fixed Objects Struck		
01	Striking Unit	Struck Object	Structure Number	Damage Tag Number
	02	OTHER POST, POLE OR SUPPORT		322790
Witness				
WITN ESS	01	Individual GERALDINE PETERSEN (608) 617-3486		Address 719 OAK ST BARABOO, WI 53913 , US
				Date of Birth