

6TL0DWMLXH

Document Number Override <b>6TL0D7W17D</b>		Primary Crash Document #	Agency Crash Number <b>24-11935</b>	Investigating Officer/Deputy <b>DEPUTY K. MUELLER</b>	
Crash Date <b>10/26/2024</b>		Crash Time <b>04:33 PM</b>	Date Arrived <b>10/26/2024</b>	Time Arrived <b>04:39 PM</b>	
Date Notified <b>10/26/2024</b>		Time Notified <b>04:33 PM</b>	Total Units <b>02</b>	Total Injured <b>00</b>	Total Killed <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 checked="" type="checkbox"/> Trailer or Towed	<input checked="" type="checkbox"/> Reporting Threshold
<input type="checkbox"/> Government Property	<input type="checkbox"/> Active School Zone	School Bus Related <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>		<input checked="" type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

**Description**

<p>Diagram</p>	Reconstruction By
	Photos By <b>KMUELLER</b>
	Additional Information <b>PHOTOS</b>

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

UNIT 2 (SEMI+TRAILER) AND UNIT 1 (SUV) WERE ENTERING THE ROUNDABOUT WITH UNIT 2 IN FRONT OF UNIT 1. BOTH UNITS CONTINUED IN TO THE ROUNDABOUT AND WHEN IN THE ROUNDABOUT, THE TWO UNITS COLLIDED. UNIT 1 DID NOT YIELD TO UNIT 2 AS REQUIRED AND WAS THEREFORE CITED FOR FAILURE TO YIELD.

UNIT 1 VEHICLE WAS INCORRECT

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Location

Table with 3 columns: Location details (INTERSECTION ON STH136 WB AT STH33 WB IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY), Latitude (43.474935707), Longitude (-89.773906062), X Coordinate (275647.875), Y Coordinate (4817296), Structure Type (NO STRUCTURE)

Crash Scene

Table with 3 columns: First Harmful Event (MOTOR VEH IN TRANSPORT), First Harmful Event Location (ON ROADWAY), Manner of Collision (07 - SIDESWIPE/SAME DIRECTION), Light Condition (DAYLIGHT), Road Surface Condition(s) (DRY), 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-RELATED), Intersection Type (ROUNDBOUT)

Unit Summary

Table with 5 columns: Unit Status (IN TRANSIT), Vehicle Operating As Classification (D CLASS), Unit Type (AUTOMOBILE), Vehicle Type ((SPORT) UTILITY VEHICLE), Operating As Endorsements, Total Occs (3), Train/Bus # Recorded, Total # Citations Issued (1), Total Trailers (0), Total HazMat Types (0), Insurance? (YES), Direction Of Travel (WESTBOUND), Pre Crash Tire Mark, Speed Limit (35), Total Lanes (4), 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 (YIELD SIGN), Traffic Control Inoperative/Missing (NO), Surface Type (BLACKTOP (BITUMINOUS)), Road Curvature (STRAIGHT), Road Grade (LEVEL), Truck Bus or HazMat (NO)

Vehicle

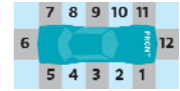
Table with 4 columns: License Plate Number (DRN122), Plate Type (AUT - AUTOMOBILE), St (MI), Country of Issuance (UNITED STATES), Vehicle Identification Number (1C4SDJCT2KC744922), Make (DODGE), Year (2019), Model (DURANGO), Color (BLK - BLACK), Body Style (UT - SPORT UTILITY VEHICLE), Bus Use, Initial Contact Point (01 - RIGHT FRONT CORNER)

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SAUK COUNTY SHERIFFS DEPARTMENT  
1300 LANGE COURT  
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UNIT VEHICLE	Vehicle Damage	
	01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 12 - FRONT	
	Extent Of Damage <b>DISABLING DAMAGE</b>	
	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>	
UNIT VEHICLE	Vehicle Removed By <b>CRAIGS TOWING</b>	
	What Driver Was Doing <b>GOING STRAIGHT</b>	
	Driver Prior Action Other <b>NOT APPLICABLE</b>	
	Vehicle Factors	
UNIT VEHICLE	Driver Actions	
	Owner Name <b>KATHLEEN TUTTLE (608) 844-0398</b>	
	Owner Address <b>1004 ROSEMARY LN BARABOO, WI 53913 , US</b>	
	<b>Sequence Of Events</b>	
UNIT VEHICLE	Event <b>MOTOR VEH IN TRANSPORT</b>	
	Event	
	Event	
	Event	
UNIT VEHICLE	<b>Policy Holder</b>	
	Insurance Company <b>AUTO-OWNERS-INS-CO</b>	
	Individual <b>KATHLEEN TUTTLE</b>	
	<b>Individual</b>	
UNIT INDIVIDUAL	Driver <b>KATHLEEN TUTTLE (608) 844-0398</b>	
	Citations Issued <b>1</b>	Sex <b>FEMALE</b>
	Date of Birth	Race <b>WHITE</b>
	Address <b>1004 ROSEMARY LN BARABOO, WI 53913 , US</b>	
Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
UNIT INDIVIDUAL	<b>Safety Equipment</b>	
	On Duty Crash	
	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>
Helmet Use		
Helmet Compliance		
Eye Protection		
Tint Compliance		
UNIT INDIVIDUAL	<b>Injury</b>	
	Injury Severity <b>NO APPARENT INJURY</b>	
	Airbag <b>NON DEPLOYED</b>	
	Ejected <b>NOT EJECTED</b>	
Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		
Trapped/Extricated <b>NOT TRAPPED</b>		
Medical Transport <b>NOT TRANSPORTED</b>		
EMS Agency Identifier		
EMS Run #		
Hospital		
Date of Death		
Time of Death		

WISCONSIN MOTOR VEHICLE CRASH REPORT

UNIT	INDIVIDUAL	<b>Distracted By</b> Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>	
		Distracted By Action <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 <b>NO</b>
		Suspected Drug Use <b>NO</b>	
		Alcohol Test Given <b>TEST NOT GIVEN</b>	
Alcohol Test Type			
Alcohol Test Results			
Drug Test Given <b>TEST NOT GIVEN</b>			
Drug Test Type			
Drug Test Results			
Drug Type			
Individual Condition <b>APPEARED NORMAL</b>			
UNIT	INDIVIDUAL	<b>Individual</b>	
		Passenger <b>GWYNNE PETERSON (608) 356-4391</b>	Citations Issued <b>0</b>
			Sex <b>FEMALE</b>
			Date of Birth
			Race <b>WHITE</b>
		Address <b>606 3RD AVE BARABOO, WI 53913 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>
		<b>Safety Equipment</b>	On Duty Crash
		Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
		Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</b>
		Helmet Use	
Helmet Compliance			
Eye Protection			
Tint Compliance			
UNIT	INDIVIDUAL	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>
		Airbag <b>NON DEPLOYED</b>	
		Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>
		Trapped/Extricated <b>NOT TRAPPED</b>	
		Medical Transport <b>NOT TRANSPORTED</b>	
		EMS Agency Identifier	
		EMS Run #	
		Hospital	
		Date of Death	
		Time of Death	
UNIT	INDIVIDUAL	<b>Distracted By</b> Distracted By Source	

WISCONSIN MOTOR VEHICLE CRASH REPORT

UNIT	INDIVIDUAL	Distracted By Action		
		<b>Non Motorist</b>	Striking Unit #	Location
		Prior Action		
		Action		
		Action Other		To/From School
		<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
		Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results
		Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results
		Drug Type		
		Individual Condition <b>APPEARED NORMAL</b>		
UNIT	INDIVIDUAL	<b>Individual</b>		
		Passenger <b>JOELLEN WADDELL (608) 963-5355</b>	Citations Issued <b>0</b>	Sex <b>FEMALE</b>
			Date of Birth	Race <b>WHITE</b>
		Address <b>607 NARAGANSETT AVE BARABOO, WI 53913 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
		<b>Safety Equipment</b>	On Duty Crash	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>
		Row <b>02 - SECOND ROW</b>	Seat Position <b>09 - RIGHT</b>	Helmet Compliance
		Helmet Use	Tint Compliance	
		Eye Protection	Airbag <b>NON DEPLOYED</b>	
		<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	
		Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier	EMS Run #		
Hospital	Date of Death	Time of Death		
<b>Distracted By</b>	Distracted By Source			
Distracted By Action				

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

Form with sections: Non Motorist, Action, Drug & Alcohol, Suspected Alcohol Use, Suspected Drug Use, Alcohol Test Given, Drug Test Given, Individual Condition, Violations.

Unit Summary

Unit Summary table with fields: Unit Status, Vehicle Operating As Classification, Unit Type, Vehicle Type, Total Occs, Total Citations Issued, etc.

Vehicle section with fields: License Plate Number, Plate Type, St, Country of Issuance, Vehicle Identification Number, Make, Year, Model, Color, Body Style, Bus Use, Initial Contact Point.



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SAUK COUNTY SHERIFFS DEPARTMENT  
1300 LANGE COURT  
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(608) 356-4895

UNIT VEHICLE	Vehicle Damage	
	Extent Of Damage <b>NO DAMAGE</b>	<b>00 - NO DAMAGE</b>
	Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OPERATOR</b>
	What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors
UNIT VEHICLE	Driver Prior Action Other	<b>NOT APPLICABLE</b>
	Driver Actions <b>NO CONTRIBUTING ACTION</b>	
	Owner Name <b>LARSEN FARMS (608) 963-3211</b>	Owner Address <b>S4060 COUNTY ROAD T BARABOO, WI 53913 , US</b>
	<b>Sequence Of Events</b>	
UNIT VEHICLE	Event <b>MOTOR VEH IN TRANSPORT</b>	
	Event	
	Event	
	Event	
UNIT VEHICLE	<b>Policy Holder</b>	
	Insurance Company <b>AUTO-OWNERS-INS-CO</b>	Organization/Company <b>LARSEN FARMS</b>
UNIT INDIVIDUAL	<b>Individual</b>	
	Driver <b>EUGENE LARSEN (608) 963-3211</b>	Citations Issued <b>0</b>
		Sex <b>MALE</b>
		Date of Birth
UNIT INDIVIDUAL	Address <b>S4060 COUNTY ROAD T BARABOO, WI 53913 , US</b>	Race <b>WHITE</b>
	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
	<b>Safety Equipment</b>	
	On Duty Crash	Safety Equipment
UNIT INDIVIDUAL	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>
	<b>SHOULDER &amp; LAP BELT</b>	
	Helmet Use	
	Helmet Compliance	
UNIT INDIVIDUAL	Eye Protection	
	Tint Compliance	
	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>
	Airbag <b>NON DEPLOYED</b>	
UNIT INDIVIDUAL	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>
	Trapped/Extricated <b>NOT TRAPPED</b>	
	Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier
	EMS Run #	
UNIT INDIVIDUAL	Hospital	Date of Death
	Time of Death	

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT	<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>			
	Distracted By Action <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 <b>NO</b>		Suspected Drug Use <b>NO</b>	
	Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type		Alcohol Test Results	
	Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type		Drug Test Results	
	Drug Type					
02	004	Individual Condition <b>APPEARED NORMAL</b>				
		<b>Carrier</b>				
		<input checked="" type="checkbox"/> Use Vehicle Owner Same as Carrier		Source <b>VEHICLE-SIDE</b>		
		Name <b>LARSEN FARMS USDOT# 1376014</b>		Address <b>S4060 COUNTY ROAD T BARABOO, WI 53913 , US</b>		
		GVWR <b>MORE THAN 26,000 LB</b>		Vehicle Configuration <b>TRUCK TRACTOR/SEMI-TRAILER</b>		Cargo Body Type <b>VAN/ENCLOSED BOX</b>
		US DOT # <b>1376014</b>		Carrier Type <b>INTRASTATE CARRIER</b>		Permitted Load <b>OSOW</b>
		<input checked="" type="checkbox"/> OS/OW Load	WI Permit Number	<input type="checkbox"/> Permitted Vehicle On Permitted Route	<input type="checkbox"/> Escort Vehicle Required By Permit	<input type="checkbox"/> Escort Vehicle Present
		Measured Height		Measured Length		Measured Weight
		UNIT	TRUCK BUS	01		