

6TL0D5DZ2R
24-13677

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 24-13677	Investigating Officer/Deputy DEPUTY J. HUNTER	
Crash Date 12/15/2024		Crash Time 06:20 AM	Date Arrived 12/15/2024	Time Arrived 06:30 AM	
Date Notified 12/15/2024		Time Notified 06:20 AM	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 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 DEPUTY HUNTER
	Additional Information PHOTOS

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

UNIT 2 WAS ON HY 136, IN AN AREA WHERE THE ROADWAY GOES S/B THEN CURVES E/B. AS THIS CURVE ENDS, THE ROAD BEGINS GOING UPHILL. THERE WAS SNOW AND GLARE ICE ON THE ROADWAY. UNIT 2 WAS EXITING THE CURVE AND TRAVELING UPHILL, WHEN UNIT 2 LOST TRACTION AND DRIFTED ACROSS THE CENTERLINE AND CAME TO REST, POINTING E/B ALONG THE W/B SHOULDER AND PARTLY IN THE TRAFFIC LANE. WHILE THE OPERATOR OF UNIT 2 WAS WORKING ON FREEING HIMSELF AND CONTINUING ON HIS WAY, UNIT 1 WAS SPREADING SALT AND SAND ALONG THE ROADWAY DUE TO ICE IN MULTIPLE AREAS IN THE COUNTY. UNIT 1 TRAVELED THE SAME DIRECTION, FIRST S/B ON HY 136, THEN CURVED TO TRAVEL E/B. AS UNIT 1 EXITED THE CURVE AND CONTINUED UPHILL, THE SAME THING HAPPENED AND UNIT 1 LOST TRACTION, DRIFTED ACROSS THE LANE AND SLID INTO UNIT 2, CONTACTING IT AND CAUSING MINOR DAMAGE. THERE WAS NO DAMAGE TO UNIT 1. THE UNITS WERE ABLE TO DISENGAGE FROM EACH OTHER BY SLOWLY DRIVING FORWARD AND AWAY FROM EACH OTHER. BOTH VEHICLES WERE REMOVED BY THE OPERATORS.

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Location

ON CTH DL/ STH136 EB 192 FT S OF S SHORE RD IN THE TOWN OF BARABOO IN SAUK COUNTY	Latitude 43.436120215	Longitude -89.742939703
	X Coordinate 278010.46875	Y Coordinate 4812902
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 07 - SIDESWIPE/SAME DIRECTION		Light Condition DARK/UNLIT	
Road Surface Condition(s) SLUSH, ICE		Roadway Factor(s) NONE	
Environment Factor(s) WEATHER CONDITIONS			
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 C CLASS		Unit Type TRUCK	
	Vehicle Type STRAIGHT TRUCK (INSERT TRUCK)				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 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 LEFT		Road Grade UPHILL	
	Truck Bus or HazMat TRUCK OR TRUCK COMBINATION > 10,000LBS GVWR/GCWR					

UNIT 01 VEHICLE	Vehicle					
	License Plate Number C23070		Plate Type MUN	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number 1HTWDAZR19J176085		Make INTL	Year 2009	Model INTERNATIO	
	Color ONG - ORANGE		Body Style CB - CAB CHASSIS		Bus Use	
	Initial Contact Point 09 - LEFT SIDE MIDDLE		Vehicle Damage 00 - NO DAMAGE			
Extent Of Damage NO DAMAGE						



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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
01 01	Owner Name SAUK COUNTY HIGHWAY DEPARTMENT (608) 355-4855		Owner Address 620 LINN ST. BARABOO, WI 53913 , US	
	Sequence Of Events			
01 01	01	Event CROSS CENTERLINE		
	02	Event MOTOR VEH IN TRANSPORT		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company SELF-INSURED		GOVERNMENT SAUK COUNTY HIGHWAY DEPARTMENT	
UNIT INDIVIDUAL	Individual			
	DRIVER KYLE STEINHORST (407) 421-8583		Citations Issued 0	Sex MALE
	Address 620 LINN ST BARABOO, WI 53913 , US		Date of Birth	Race WHITE
		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
01 001	Safety Equipment		On Duty Crash WINTER-HWY-MAINTENANC	
			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					
	UNIT	01	001	Carrier		
<input checked="" type="checkbox"/> Use Vehicle Owner Same as Carrier				Source DRIVER		
Name SAUK COUNTY HIGHWAY DEPARTMENT		Address 620 LINN ST. BARABOO, WI 53913 , US				
GVWR 10,001-26,000 LBS		Vehicle Configuration SINGLE UNIT TRUCK (3 OR MORE AXLES)		Cargo Body Type DUMP		
US DOT #		Carrier Type NOT IN COMMERCE/GOVERNMENT		Permitted Load NOT APPLICABLE		
<input 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						
UNIT	TRUCK	BUS	Measured Height	Measured Length	Measured Width	Measured Weight

Unit Summary

UNIT	02	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 0	Total Trailers 0	Total HazMat Types 0			
	Insurance? YES	Direction Of Travel EASTBOUND	<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 LEFT		Road Grade UPHILL			

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Truck Bus or HazMat NO				
Vehicle				
02 02 UNIT VEHICLE	License Plate Number MVR1743	Plate Type LTK	St TX	Country of Issuance UNITED STATES
	Vehicle Identification Number 2GCEK19K8N1203353	Make CHEV	Year 1992	Model PICKUP
	Color BGE - BEIGE	Body Style PK - PICKUP	Bus Use	
	Initial Contact Point 03 - RIGHT SIDE MIDDLE	Vehicle Damage 03 - RIGHT SIDE MIDDLE		
	Extent Of Damage MINOR DAMAGE			
	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR		
	What Driver Was Doing NEGOTIATING CURVE	Vehicle Factors NOT APPLICABLE		
Driver Prior Action Other				
02 02 UNIT VEHICLE	Driver Actions NO CONTRIBUTING ACTION			
	Owner Name JAMES HICKS (630) 287-8555	Owner Address 336 S. CENTRAL AVE WOOD DELL, IL 60191 0000, US		
Sequence Of Events				
01 02 03 04 UNIT	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
	Event			
Policy Holder				
Insurance Company USAA-CASUALTY-INS-CO		INDIVIDUAL JAMES HICKS		
Individual				
01 02 UNIT INDIVIDUAL	DRIVER JAMES HICKS (630) 287-8555	Citations Issued 0	Sex MALE	
		Date of Birth	Race WHITE	
	Address 336 S. CENTRAL AVE WOOD DELL, IL 60191 0000, US		Driver License Number STATE: TEXAS COUNTRY: UNITED STATES	
Safety Equipment		On Duty Crash Safety Equipment SHOULDER & LAP BELT		
Row 01 - FRONT ROW	Seat Position 07 - LEFT	Helmet Compliance		
Helmet Use				

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02	002	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					
		Non Motorist	Striking Unit #		Location			
			Prior Action					
		UNIT	INDIVIDUAL	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								
02	002							