

6TL0F8QXZ6  
25-03579

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 <b>SC25-03579</b>		Investigating Officer/Deputy <b>DEPUTY J. GREENWOOD</b>	
Crash Date <b>04/15/2025</b>		Crash Time <b>09:30 AM</b>		Date Arrived <b>04/15/2025</b>		Time Arrived <b>09:42 AM</b>	
Date Notified <b>04/15/2025</b>		Time Notified <b>09:34 AM</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 type="checkbox"/> Trailer or Towed	<input 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 type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram	Reconstruction By
	Photos By <b>DEPUTY GREENWOOD</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 1 WAS SB ON CTH BD AT THE INTERSECTION OF STH 33/PIT ROAD. UNIT 2 WAS OPERATING A DUMP TRUCK, STOP AT THE INTERSECTION STH 33/PIT ROAD. UNIT 2 ADVISED HE WAS TURNING SB ON CTH BD. UNIT 2 ADVISED HE DID NOT SEE THE VEHICLE, AND PROCCED WITH THE RIGHT TURN, SIDE SWIPING THE VEHICLE. OPERATOR OF UNIT 2 ISSUED FTR FROM THE STOP SIGN.

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Location

INTERSECTION ON CTHBD SB AT PIT RD IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude <b>43.513584385</b>	Longitude <b>-89.778050606</b>
	X Coordinate <b>275456.03125</b>	Y Coordinate <b>4821599.5</b>
	Structure Type <b>NO STRUCTURE</b>	

Crash Scene

First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>	First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>07 - SIDESWIPE/SAME DIRECTION</b>	Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>DRY</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>		
Weather Condition(s) <b>CLOUDY</b>		
Animal Type	Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>	Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land	Access Control <b>FULL CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>INTERSECTION</b>	Intersection Type <b>T-INTERSECTION</b>

Unit Summary

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

<b>UNIT</b>	<b>01</b>	<b>Vehicle</b>			
		License Plate Number <b>351WZR</b>	Plate Type <b>AUT</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>1FMHK8D82BGA41764</b>	Make <b>FORD</b>	Year <b>2011</b>	Model <b>EXPLORER</b>
		Color <b>GLD - GOLD</b>	Body Style <b>UT - SPORT UTILITY VEHICLE</b>		Bus Use
		Initial Contact Point <b>02 - RIGHT SIDE FRONT</b>	Vehicle Damage <b>01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE</b>		
		Extent Of Damage <b>MINOR DAMAGE</b>			

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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OWNER</b>
	What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors <b>NOT APPLICABLE</b>
	Driver Prior Action Other	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>	
01 01	Owner Name <b>TRISHA WEGNER</b>	Owner Address <b>E8515 N REEDSBURG RD REEDSBURG, WI 53959 , US</b>
	<b>Sequence Of Events</b>	
01 02 03 04	Event <b>MOTOR VEH IN TRANSPORT</b>	
	Event	
	Event	
	Event	
UNIT	<b>Policy Holder</b>	
	Insurance Company <b>AMERICAN-ECONOMY-INS-CO</b>	INDIVIDUAL <b>TRISHA WEGNER</b>
UNIT INDIVIDUAL	<b>Individual</b>	
	DRIVER <b>TRISHA WEGNER</b>	Citations Issued <b>0</b>
		Sex <b>FEMALE</b>
		Date of Birth <b>WHITE</b>
	Address <b>E8515 N REEDSBURG RD REEDSBURG, WI 53959 , US</b>	Driver License Number
01 001	<b>Safety Equipment</b>	On Duty Crash
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>
	Helmet Use	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>
	Eye Protection	Helmet Compliance
	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>
	Medical Transport <b>NOT TRANSPORTED</b>	Trapped/Extricated <b>NOT TRAPPED</b>
	Hospital	EMS Agency Identifier
		EMS Run #
		Date of Death
		Time of Death
	<b>Distracted By</b>	Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>
	Distracted By Action <b>NOT DISTRACTED</b>	

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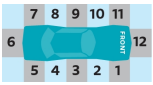
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UNIT INDIVIDUAL          01 001	<b>Non Motorist</b>		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other			To/From School	
	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use NO	Suspected Drug Use NO	
	Alcohol Test Given <b>TEST NOT 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 Summary

UNIT 02	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>B CLASS</b>		Unit Type <b>TRUCK</b>	
	Vehicle Type <b>STRAIGHT TRUCK (INSERT TRUCK)</b>			Operating As Endorsements		
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>1</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>YES</b>	Direction Of Travel <b>SOUTHBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>N/A</b>	Total Lanes <b>2</b>	
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>DIVIDED HWY W/TRAFFIC BARRIER</b>		Traffic Control <b>STOP SIGN</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>TRUCK OR TRUCK COMBINATION &gt; 10,000LBS GVWR/GCWR</b>					

UNIT VEHICLE 02 02	<b>Vehicle</b>				
	License Plate Number <b>RB31769</b>		Plate Type <b>HTK</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>4V5KC9EHXKN218553</b>		Make <b>VOLV</b>	Year <b>2019</b>	Model <b>VHD</b>
	Color <b>WHI - WHITE</b>		Body Style <b>ST - STAKE TRUCK</b>		Bus Use
	Initial Contact Point <b>09 - LEFT SIDE MIDDLE</b>		Vehicle Damage <b>09 - LEFT SIDE MIDDLE</b>		
	Extent Of Damage <b>MINOR DAMAGE</b>				
	Towed Due To Damage <b>NOT TOWED</b>				

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UNIT	VEHICLE	What Driver Was Doing <b>RIGHT TURN</b>	Vehicle Factors	
		Driver Prior Action Other	<b>NOT APPLICABLE</b>	
02	02	Driver Actions <b>FAILED TO YIELD RIGHT-OF-WAY</b>		
		Owner Name <b>LYNN DONALD WINGERS</b>	Owner Address <b>W1910 HWY 146 RANDOLPH, WI 53956 , US</b>	
<b>Sequence Of Events</b>				
UNIT	VEHICLE	01	Event <b>RIGHT TURN</b>	
		02	Event <b>MOTOR VEH IN TRANSPORT</b>	
		03	Event	
		04	Event	
<b>Policy Holder</b>				
UNIT	INDIVIDUAL	Insurance Company <b>PEKIN-INS-CO</b>	INDIVIDUAL <b>LYNN WINGERS</b>	
		<b>Individual</b>		
UNIT	INDIVIDUAL	DRIVER <b>RICHARD JACOB</b>	Citations Issued <b>1</b>	Sex <b>MALE</b>
			Date of Birth	Race <b>WHITE</b>
02	002	Address <b>116 SPRING ST PARDEEVILLE, WI 53954 , US</b>		Driver License Number
		<b>Safety Equipment</b>		Safety Equipment
		On Duty Crash	<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	
		<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
		<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

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UNIT	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>				
	<b>Violations</b>				
	UTC Number <b>BK741498</b>	Issue To? <b>002</b>	Statute Number <b>346.18(3)</b>	Description <b>FAIL/YIELD RIGHT/WAY FROM STOP SIGN</b>	
02	<b>Carrier</b>				
	<input checked="" type="checkbox"/> Use Vehicle Owner Same as Carrier		Source <b>DRIVER</b>		
	Name <b>LYNN DONALD WINGERS USDOT# 999975</b>		Address <b>W1910 HWY 146 RANDOLPH, WI 53956 , US</b>		
	GVWR <b>MORE THAN 26,000 LB</b>	Vehicle Configuration <b>SINGLE UNIT TRUCK (3 OR MORE AXLES)</b>		Cargo Body Type <b>GRAIN/CHIPS/GRAVEL</b>	
	US DOT # <b>999975</b>	Carrier Type <b>INTERSTATE CARRIER</b>		Permitted Load <b>NOT APPLICABLE</b>	
	<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				
	Measured Height	Measured Length	Measured Width	Measured Weight	
	01	<b>TRUCK BUS</b>			