

6TLOBZLVN5

20-00845

# 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>20-00845</b>	Investigating Officer/Deputy <b>SERGEANT S. SCHRAM</b>	
Crash Date <b>01/23/2020</b>		Crash Time <b>07:50 AM</b>	Date Arrived <b>01/23/2020</b>	Time Arrived <b>07:53 AM</b>	
Date Notified <b>01/23/2020</b>		Time Notified <b>07:50 AM</b>	Total Units <b>01</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 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
	Additional Information <b>NONE</b>

Non-reportable slide off

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

UNIT 1 WAS TRAVELING EB ON HWY 12 NEAR OLD BLUFF TRAIL WHEN OPERATOR LOST CONTROL DUE TO THE ICY/SNOWY ROAD CONDITIONS. UNIT 1 ENTERED THE NORTH DITCH AND CONTINUED IN THE DITCH UNTIL IT CAME TO A REST. UNIT 1 WAS REMOVED FROM DITCH BY OPERATOR AND DRIVEN AWAY WITH NO DAMAGE.

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**Location**

ON USH12 EB 951 FT E OF MOELY BRANCH RD IN THE TOWN OF SUMPTER IN SAUK COUNTY	Latitude <b>43.350992155</b>	Longitude <b>-89.761487725</b>
	X Coordinate <b>276196</b>	Y Coordinate <b>4803497</b>
	Structure Type	

**Crash Scene**

First Harmful Event <b>DITCH</b>	First Harmful Event Location <b>ROADSIDE</b>	
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>SNOW</b>	Roadway Factor(s)  <b>ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)</b>	
Environment Factor(s) <b>WEATHER CONDITIONS</b>		
Weather Condition(s) <b>SNOW</b>		
Animal Type	Relation To Trafficway <b>TRAFFICWAY - NOT ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>	Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land	Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>

**Unit Summary**

<b>UNIT</b>	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>TRUCK</b>	
	Vehicle Type <b>UTILITY TRUCK/PICKUP TRUCK</b>	Operating As Endorsements			
	Total Occs <b>02</b>	Train/Bus # Recorded	Total # Citations Issued <b>00</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>YES</b>	Direction Of Travel <b>EASTBOUND</b>	<input type="checkbox"/> <b>Pre Crash Tire Mark</b>	Speed Limit <b>55</b>	Total Lanes <b>04</b>
	Most Harmful Event: Collision With <b>DITCH</b>	Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>DIVIDED HWY W/O TRAFFIC BARRIER</b>	Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>	Road Curvature <b>CURVE LEFT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>				

<b>UNIT</b>	<b>Vehicle</b>				
	<b>01</b>	License Plate Number <b>512462</b>	Plate Type <b>LTK - LIGHT TRUCK</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>1FTEW1EG1GFD51927</b>	Make <b>FORD</b>	Year <b>2016</b>	Model <b>F150</b>
	<b>VEHICLE</b>	Color <b>WHI - WHITE</b>	Body Style <b>TK - TRUCK</b>		Bus Use
		Initial Contact Point <b>00 - NON-COLLISION</b>	Vehicle Damage		
		Extent Of Damage <b>NO DAMAGE</b>	<b>00 - NO DAMAGE</b>		

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<b>UNIT</b>	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>	
	What Driver Was Doing <b>NEGOTIATING CURVE</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>FAILURE TO CONTROL, RAN OFF ROADWAY</b>			
<b>01</b>	Owner Name <b>CAROLINA CASTRO</b>		Owner Address <b>E11025 ARMORY VIEW ROAD NORTH FREEDOM, WI 53951 , US</b>	
	<b>Sequence Of Events</b>			
<b>01</b>	Event <b>DITCH</b>			
	Event			
	Event			
	Event			
<b>02</b>	Event			
	Event			
	Event			
	Event			
<b>03</b>	Event			
	Event			
	Event			
	Event			
<b>04</b>	Event			
	Event			
	Event			
	Event			
<b>UNIT</b>	<b>Policy Holder</b>			
	Insurance Company <b>PROGRESSIVE-CLASSIC-INS-CO</b>		Individual <b>CAROLINA CASTRO</b>	
	<b>Individual</b>			
	Driver <b>ABRAHAN CASTRO</b>		Citations Issued <b>00</b>	Sex <b>MALE</b>
		Date of Birth	Race <b>HISPANIC</b>	
Address <b>E11025 ARMORY VIEW ROAD NORTH FREEDOM, WI 53951 , US</b>		Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
<b>UNIT</b>	<b>Safety Equipment</b>		On Duty Crash	
	Row <b>01 - FRONT ROW</b>		Seat Position	
	Helmet Use		Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
	Eye Protection		Helmet Compliance	
<b>01</b>	Injury <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 #
Distracted By <b>NOT APPLICABLE (NOT DISTRACTED)</b>		Distracted By Source		
Distracted By Action <b>NOT DISTRACTED</b>		Date of Death		
		Time of Death		

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

<b>UNIT</b>	<b>INDIVIDUAL</b>	<b>Non Motorist</b>		Striking Unit #	Location		
		Prior Action					
		Action					
		Action Other				To/From School	
<b>01</b>	<b>001</b>	<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>Individual</b>					
		Passenger <b>SAMANTHA CASTRO</b>			Citations Issued <b>00</b>	Sex <b>FEMALE</b>	
					Date of Birth	Race <b>HISPANIC</b>	
		Address <b>E11025 ARMORY VIEW ROAD NORTH FREEDOM, WI 53951 , US</b>			Driver License Number		
		<b>01</b>	<b>002</b>	<b>Safety Equipment</b>		On Duty Crash	Safety Equipment
Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</b>			<b>SHOULDER &amp; LAP BELT</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			
Distracted By Action							
<b>Non Motorist</b>		Striking Unit #	Location				

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<b>UNIT</b>	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>01</b>	<b>002</b>		