

6TL0B3P3G4

20-02229

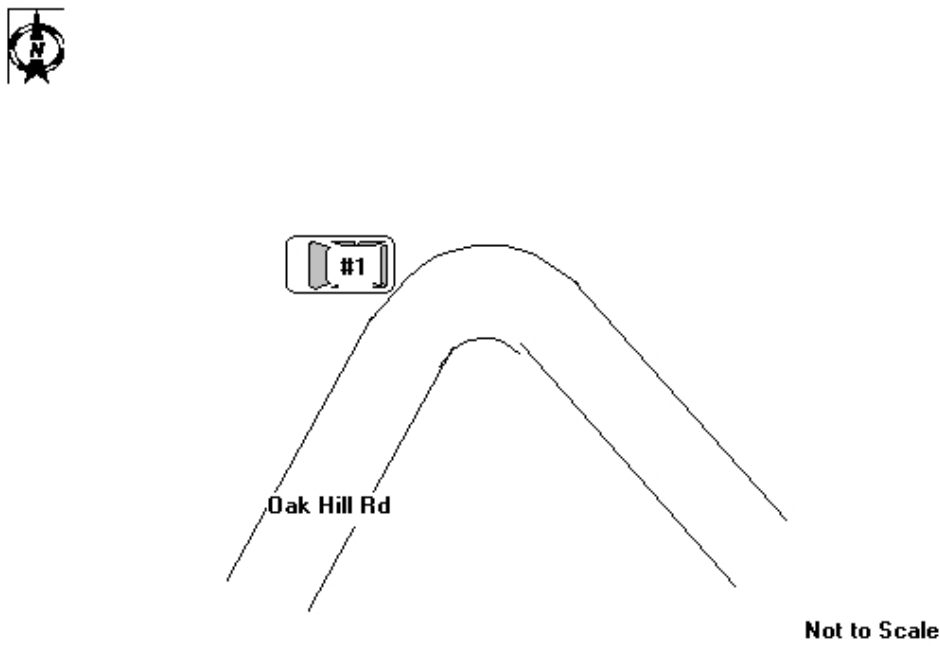
WISCONSIN MOTOR VEHICLE CRASH REPORT

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 20-02229	Investigating Officer/Deputy DEPUTY S. PARKHURST	
Crash Date 02/28/2020		Crash Time 02:15 AM	Date Arrived 02/28/2020	Time Arrived 02:45 AM	
Date Notified 02/28/2020		Time Notified 02:18 AM	Total Units 01	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 9135
	Additional Information PHOTOS

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

UNIT 1 WAS WESTBOUND ON OAK HILL RD. THE VEH WAS TRAVELING AROUND A LEFT CORNER. THE VEH LEFT THE ROADWAY AND ENTERED THE DITCH

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Location

ON LAGE RD 808 FT E OF OAK HILL RD IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude 43.638135101	Longitude -89.835576452
	X Coordinate 271278.4375	Y Coordinate 4835590
	Structure Type	

Crash Scene

First Harmful Event DITCH	First Harmful Event Location ROADSIDE	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DARK/UNLIT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLEAR		
Animal Type	Relation To Trafficway TRAFFICWAY - NOT 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 D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR				Operating As Endorsements	
	Total Occs 4	Train/Bus # Recorded	Total # Citations Issued 3	Total Trailers 0	Total HazMat Types 0	
	Insurance? NO	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 35	Total Lanes 2	
	Most Harmful Event: Collision With DITCH		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 LEVEL	
	Truck Bus or HazMat NO					

UNIT 01	Vehicle						
	01	License Plate Number 967XYT		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
		Vehicle Identification Number 1G3WS52H5YF344503		Make OLDSMOBILE	Year 2000	Model INTRIGUE	
	VEHICLE	Color SIL - SILVER (ALUMINUM)		Body Style 4D - 4DR		Bus Use	
		Initial Contact Point 12 - FRONT		Vehicle Damage			
		Extent Of Damage FUNCTIONAL DAMAGE		12 - FRONT, 14 - UNDERCARRIAGE			

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UNIT VEHICLE	Towed Due To Damage TOWED BUT NOT DUE TO DISABLING DAMAG		Vehicle Removed By STEVES AUTO SERVICE	
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions SPEED TOO FAST/COND, OTHER CONTRIBUTING ACTION			
01	01	Owner Name DAKOTA J BRENDT (608) 495-9392		Owner Address 618 BOOSTER BLVD REEDSBURG, WI 53959 , US
Sequence Of Events				
	01	Event DITCH		
	02	Event		
	03	Event		
	04	Event		
Individual				
UNIT INDIVIDUAL	Driver SHIANNE NICOLE CHRISTIAN (608) 495-9392		Citations Issued 3	Sex FEMALE
	Address 618 BOOSTER BLVD REEDSBURG, WI 53959 , US		Date of Birth	Race WHITE
			Driver License Number	STATE: WISCONSIN COUNTRY: UNITED STATES
Safety Equipment		On Duty Crash	Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
01	001	Injury	Injury Severity NO APPARENT 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)		
Distracted By Action		NOT DISTRACTED		
Non Motorist		Striking Unit #	Location	

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT	Individual			Prior Action			
	Action						
	Action Other					To/From School	
01	001	Drug & Alcohol		Suspected Alcohol Use YES		Suspected Drug Use NO	
		Alcohol Test Given TEST GIVEN		Alcohol Test Type BLOOD		Alcohol Test Results PENDING	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	
		Drug Type					
		Individual Condition PHYSICALLY IMPAIRED					
		Individual					
		Passenger DAKOTA JOSEPH BERNDT (608) 495-3169			Citations Issued 0		Sex MALE
		Address 618 BOOSTER BLVD REEDSBURG, WI 53959 , US			Date of Birth		
		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			Race WHITE		
		01	002	Safety Equipment		On Duty Crash	
Row 01 - FRONT ROW				Seat Position 09 - RIGHT		SHOULDER & LAP BELT	
Helmet Use				Helmet Compliance			
Eye Protection				Tint Compliance			
Injury				Injury Severity NO APPARENT 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			
Distracted By Action							
Non Motorist		Striking Unit #		Location			
Prior Action							

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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 PHYSICALLY IMPAIRED		
	Individual		
	Passenger AMANDA LEA LUND	Citations Issued 0	Sex FEMALE
	Date of Birth	Race WHITE	
Address 629 1/2 N PINE ST REEDSBURG, WI 53959 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
UNIT INDIVIDUAL	Safety Equipment	On Duty Crash	Safety Equipment SHOULDER & LAP BELT
	Row 02 - SECOND ROW	Seat Position 09 - RIGHT	Helmet Compliance
	Helmet Use		Tint Compliance
	Eye Protection		Airbag NON DEPLOYED
	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	
	Distracted By Action		
UNIT INDIVIDUAL	Non Motorist	Striking Unit #	Location
	Prior Action		

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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		
	Individual		
	Passenger ROBERT D BROTHERS	Citations Issued 0	Sex MALE
	Date of Birth		Race WHITE
Address 629 1/2 N PINE ST REEDSBURG, WI 53959 , US		Driver License Number STATE: NEW YORK COUNTRY: UNITED STATES	
Safety Equipment	On Duty Crash		Safety Equipment NONE USED - VEHICLE OCCUPANT
	Row 02 - SECOND 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		
	Distracted By Action		
Non Motorist	Striking Unit #	Location	
	Prior Action		

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UNIT	INDIVIDUAL	Action				
		Action Other			To/From School	
	01	004	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 PHYSICALLY IMPAIRED			
	01	01	Violations			
			UTC Number BB338355	Issue To? 001	Statute Number 343.05(3)(a)	Description OPERATE W/O VALID LICENSE (1ST VIOLATION)
			UTC Number BB338356	Issue To? 001	Statute Number 344.62(1)	Description OPERATE MOTOR VEHICLE W/O INSURANCE
03	02	UTC Number BB338357	Issue To? 001	Statute Number 346.63(1)(a)	Description OPERATING WHILE UNDER THE INFLUENCE	