

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

6TL0B8M7WM

Document Number Override		Primary Crash Document #	Agency Crash Number <b>20-03575</b>	Investigating Officer/Deputy <b>DEPUTY B. MEARS</b>	
Crash Date <b>04/13/2020</b>		Crash Time <b>12:30 AM</b>	Date Arrived <b>04/13/2020</b>	Time Arrived <b>03:10 PM</b>	
Date Notified <b>04/13/2020</b>		Time Notified <b>02:46 PM</b>	Total Units <b>01</b>	Total Injured <b>00</b>	Total Killed <b>00</b>
<input type="checkbox"/> On Emergency	<input checked="" 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 checked="" 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 MEARS</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 WAS NB ON CTH K AND HAD COME AROUND A RIGHT HAND CURVE AND OPERATOR LOST CONTROL. OPERATOR WAS BRAKING AND SLID OFF THE EAST SIDE OF THE ROADWAY AND SLID ABOUT 75 FEET WHERE IT STRUCK A CULVERT AT THE CORNER OF CTH K AND GILES RD. UNIT CONTINUED ACROSS GILES RD WHERE IT STRUCK A WOODEN SPLIT RAIL FENCE AND A METAL POST. OPERATOR CONTACTED HIS FATHER, THE REGISTERED OWNER WHO PULLED THE UNIT OUT ONTO CTH K, DAMAGING MORE OF THE FENCE AND A CABLE BOX. UNIT WAS THEN DRIVEN FROM THE SCENE AND HAD HEAVY DAMAGE. THERE WERE NO KNOWN INJURIES. NEITHER THE OPERATOR NOR THE OWNER REPORTED THE ACCIDENT. DRIVER WAS LATER IDENTIFIED AND CITED.

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

Location

Table with 3 columns: Address (ON CTHK NB 54 FT S OF GILES RD IN THE TOWN OF WINFIELD IN SAUK COUNTY), Latitude (43.56511563), Longitude (-90.000112418), X Coordinate (257713.03125), Y Coordinate (4827947), Structure Type (NO STRUCTURE)

Crash Scene

Table with 4 columns: First Harmful Event (DITCH), First Harmful Event Location (SHOULDER RIGHT), Manner of Collision (00 - NO COLLISION W/VEHICLE IN TRANSPORT), Light Condition (DARK/UNLIT), Road Surface Condition(s) (UNKNOWN), Roadway Factor(s) (NONE), Environment Factor(s) (NONE), Weather Condition(s) (UNKNOWN), 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

Table with 5 columns: Unit Status (HIT AND RUN), Vehicle Operating As Classification (D CLASS), Unit Type (AUTOMOBILE), Vehicle Type (PASSENGER CAR), Operating As Endorsements, Total Occs (1), Train/Bus # Recorded, Total # Citations Issued (3), Total Trailers (0), Total HazMat Types (0), Insurance? (UNKNOWN), Direction Of Travel (NORTHBOUND), Pre Crash Tire Mark (checked), Speed Limit (55), Total Lanes (2), Most Harmful Event: Collision With (FENCE), Special Function (NO SPECIAL FUNCTION), Emergency Motor Vehicle Use (NOT APPLICABLE), Traffic Way (TWO-WAY, NOT DIVIDED), Traffic Control (WARNING SIGN), Traffic Control Inoperative/Missing (NO), Surface Type (BLACKTOP (BITUMINOUS)), Road Curvature (CURVE RIGHT), Road Grade (LEVEL), Truck Bus or HazMat (NO)

Table with 4 columns: License Plate Number (AGZ2145), Plate Type (AUT - AUTOMOBILE), St (WI), Country of Issuance (UNITED STATES), Vehicle Identification Number (JF1GD29634G517866), Make (SUBARU), Year (2004), Model (IMPREZA WR), Color (BLK - BLACK), Body Style (4D - 4DR), Bus Use, Initial Contact Point (12 - FRONT), Vehicle Damage (15 - ALL AREAS), Extent Of Damage (FUNCTIONAL DAMAGE)

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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>NEGOTIATING CURVE</b>		Vehicle Factors	
	Driver Prior Action Other		<b>UNKNOWN</b>	
	Driver Actions <b>SPEED TOO FAST/COND, FAILURE TO CONTROL, RAN OFF ROADWAY, FAILED TO KEEP IN DESIGNATED LANE, OPERATED MOTOR VEHICLE IN AGGRESSIVE/RECKLESS MANNER, OVER-CORRECTING/OVER-STEERING</b>			
01	Owner Name <b>CLINT E CARLSON (608) 495-0199</b>		Owner Address <b>305 HARRISON ST LAVALLE, WI 53941 , US</b>	
	<b>Sequence Of Events</b>			
01	01	Event <b>CULVERT</b>		
	02	Event <b>FENCE</b>		
	03	Event <b>OTHER POST, POLE OR SUPPORT</b>		
	04	Event <b>OTHER FIXED OBJECT</b>		
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>EVAN EUGENE CARLSON (000) 000-0000</b>		Citations Issued <b>3</b>	Sex <b>MALE</b>
	Address <b>102 N EAST ST LAVALLE, WI 53941 , US</b>		Date of Birth	Race <b>WHITE</b>
	On Duty Crash		Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01	<b>Safety Equipment</b>		Safety Equipment	
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>RESTRAINT USE UNKNOWN</b>	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
01	<b>Injury</b>		Airbag	
	Injury Severity <b>NO APPARENT INJURY</b>		<b>NOT APPLICABLE</b>	
	Ejected <b>NOT APPLICABLE</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT APPLICABLE</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>UNKNOWN</b>		
Distracted By Action <b>UNKNOWN</b>				
<b>Non Motorist</b>		Striking Unit #	Location	

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<b>UNIT</b>	<b>INDIVIDUAL</b>	Prior Action				
		Action				
		Action Other			To/From School	
	<b>01</b>	<b>001</b>	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use	Suspected Drug Use
			Alcohol Test Given	Alcohol Test Type	Alcohol Test Results	
			<b>TEST NOT GIVEN</b>			
			Drug Test Given	Drug Test Type	Drug Test Results	
			<b>TEST NOT GIVEN</b>			
			Drug Type			
			Individual Condition			
		<b>NOT OBSERVED</b>				
		<b>Violations</b>				
		UTC Number	Issue To?	Statute Number	Description	
		<b>AD981034</b>	<b>001</b>	<b>346.70(1)</b>	<b>FAILURE OF OPERATOR TO NOTIFY POLICE OF ACCIDENT</b>	
		UTC Number	Issue To?	Statute Number	Description	
		<b>AD981035</b>	<b>001</b>	<b>346.69</b>	<b>HIT AND RUN-PROPERTY ADJACENT TO HIGHWAY</b>	
		UTC Number	Issue To?	Statute Number	Description	
		<b>AD981036</b>	<b>001</b>	<b>346.57(3)</b>	<b>DRIVING TOO FAST FOR CONDITIONS</b>	

**Property Owner**

<b>PROP OWNER 01</b>	Government <b>SAUK COUNTY HWY DEPT</b> (608) 356-4855	Address <b>620 STH 136</b> <b>PO BOX 26</b> <b>BARABOO, WI 53913 , US</b>
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**Fixed Objects Struck**

<b>03</b>	Striking Unit	Struck Object	Structure Number	Damage Tag Number
	<b>01</b>	<b>CULVERT</b>		

**Property Owner**

<b>PROP OWNER 02</b>	Individual <b>KURT W MEISTER</b> (608) 381-6674	Address <b>E6712 N DEWEY AVE</b> <b>REEDSBURG, WI 53959 , US</b>
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**Fixed Objects Struck**

<b>01</b>	Striking Unit	Struck Object	Structure Number	Damage Tag Number
	<b>01</b>	<b>FENCE</b>		
<b>04</b>	Striking Unit	Struck Object	Structure Number	Damage Tag Number
	<b>01</b>	<b>OTHER POST, POLE OR SUPPORT</b>		

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## Property Owner

PROP OWNER	03	Organization/Company <b>FRONTIER COMMUNICATIONS</b> (800) 239-4430	Address <b>306 E CONANT ST</b> <b>PORTAGE, WI 53901 , US</b>

## Fixed Objects Struck

Fixed Objects Struck				
	Striking Unit	Struck Object	Structure Number	Damage Tag Number
02	01	OTHER FIXED OBJECT		