

6TL0CTJN01  
20-04773

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<br><b>20-04773</b> | Investigating Officer/Deputy<br><b>DEPUTY A. KULAS</b> |  |
| Crash Date<br><b>05/23/2020</b>                |   | Crash Time<br><b>03:39 AM</b>                | Date Arrived<br><b>05/23/2020</b>      | Time Arrived<br><b>04:00 AM</b>                        |  |
| Date Notified<br><b>05/23/2020</b>             |   | Time Notified<br><b>03:39 AM</b>             | Total Units<br><b>01</b>               | Total Injured<br><b>00</b>                             | Total Killed<br><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<br><b>NO</b>              |  | Tags   |  |
| <input checked="" type="checkbox"/> Reportable |   | Crash Type<br><b>DT4000 (STANDARD CRASH)</b> |  | <input type="checkbox"/> Amended                       | <input type="checkbox"/> Secondary Crash     |

Description

|                |                                       |
|----------------|---------------------------------------|
| <p>Diagram</p> | Reconstruction By                     |
|                | Photos By                             |
|                | Additional Information<br><b>NONE</b> |

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

UNIT 1 WAS WB ON MILL RD. THE OPERATOR FAILED TO NEGOTIATE A RIGHT CURVE. UNIT 1 ENTERED THE SW DITCH AND STRUCK AND EMBANKMENT. UNIT 1 TRAVELED UP THE EMBANKMENT AND CAME TO A REST IN A FIELD.

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**Location**

|   |                                       |                                  |
|---|---------------------------------------|----------------------------------|
| ON MILL RD<br>0.65 MI W<br>OF FACTORY RD<br>IN THE TOWN OF TROY<br>IN SAUK COUNTY | Latitude<br><b>43.268359359</b>       | Longitude<br><b>-89.96762429</b> |
|   | X Coordinate<br><b>259162.515625</b>  | Y Coordinate<br><b>4794893.5</b> |
|   | Structure Type<br><b>NO STRUCTURE</b> |                                  |

**Crash Scene**

|  |   |   |
|--|---|---|
| First Harmful Event<br><b>EMBANKMENT</b>                               | First Harmful Event Location<br><b>ON ROADWAY</b>                     |   |
| Manner of Collision<br><b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b> | Light Condition<br><b>DARK/UNLIT</b>                                  |   |
| Road Surface Condition(s)<br><b>DRY</b>                                | Roadway Factor(s)<br><br><b>NONE</b>                                  |   |
| Environment Factor(s)<br><b>NONE</b>                                   |   |   |
| Weather Condition(s)<br><b>CLOUDY</b>                                  |   |   |
| Animal Type  | Relation To Trafficway<br><b>TRAFFICWAY - ON ROAD</b>                 |   |
| Crash Classification - Location<br><b>PUBLIC PROPERTY</b>              | Crash Classification - Jurisdiction<br><b>NO SPECIAL JURISDICTION</b> |   |
| Tribal Land  | Access Control<br><b>NO CONTROL</b>                                   | Special Study                                   |
| Within Interchange Area<br><b>NO</b>                                   | Junction Location<br><b>NON-JUNCTION</b>                              | Intersection Type<br><b>NOT AN INTERSECTION</b> |

**Unit Summary**

|                              |   |   |   |                                |  |  |
|------------------------------|---|---|---|--------------------------------|--|--|
| <b>UNIT</b><br><br><b>01</b> | Unit Status<br><b>IN TRANSIT</b>                        | Vehicle Operating As Classification<br><b>D CLASS</b> |   | Unit Type<br><b>AUTOMOBILE</b> |  |  |
|                              | Vehicle Type<br><b>(SPORT) UTILITY VEHICLE</b>          |   |   | Operating As Endorsements      |  |  |
|                              | Total Occs<br><b>1</b>                                  | Train/Bus # Recorded                                  | Total # Citations Issued<br><b>2</b>                | Total Trailers<br><b>0</b>     | Total HazMat Types<br><b>0</b>                       |  |
|                              | Insurance?<br><b>YES</b>                                | Direction Of Travel<br><b>WESTBOUND</b>               | <input type="checkbox"/> <b>Pre Crash Tire Mark</b> | Speed Limit<br><b>45</b>       | Total Lanes<br><b>2</b>                              |  |
|                              | Most Harmful Event: Collision With<br><b>EMBANKMENT</b> |   | Special Function<br><b>NO SPECIAL FUNCTION</b>      |                                | Emergency Motor Vehicle Use<br><b>NOT APPLICABLE</b> |  |
|                              | Traffic Way<br><b>TWO-WAY, NOT DIVIDED</b>              |   | Traffic Control<br><b>NO CONTROL</b>                |                                | Traffic Control Inoperative/Missing<br><b>NO</b>     |  |
|                              | Surface Type<br><b>BLACKTOP (BITUMINOUS)</b>            |   | Road Curvature<br><b>CURVE RIGHT</b>                |                                | Road Grade<br><b>LEVEL</b>                           |  |
|                              | Truck Bus or HazMat<br><b>NO</b>                        |   |   |                                |  |  |

|   |                |   |                                       |   |   |         |
|---|----------------|---|---------------------------------------|---|---|---------|
| <b>UNIT</b><br><br><b>01</b>                | <b>Vehicle</b> |   |                                       |   |   |         |
|   | <b>01</b>      | License Plate Number<br><b>ADY9413</b>  | Plate Type<br><b>AUT - AUTOMOBILE</b> | St<br><b>WI</b>                                 | Country of Issuance<br><b>UNITED STATES</b> |         |
|   |                | Vehicle Identification Number<br><b>2FMTK4APXFBB89852</b>   | Make<br><b>FORD</b>                   | Year<br><b>2015</b>                             | Model<br><b>EDGE</b>                        |         |
|   | <b>VEHICLE</b> | Color<br><b>WHI - WHITE</b>   |                                       | Body Style<br><b>UT - SPORT UTILITY VEHICLE</b> |   | Bus Use |
|   |                | Initial Contact Point<br><b>12 - FRONT</b>  |                                       | Vehicle Damage                                  |   |         |
| Extent Of Damage<br><b>DISABLING DAMAGE</b> |                | <b>01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT, 14 - UNDERCARRIAGE</b> |                                       |   |   |         |

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|---|--|---|--|--|
| UNIT<br>VEHICLE                             | Towed Due To Damage<br><b>TOWED DUE TO DISABLING DAMAGE</b>  |   | Vehicle Removed By<br><b>GEORGES AUTO BODY</b> |  |
|   | What Driver Was Doing<br><b>NEGOTIATING CURVE</b>            |   | Vehicle Factors                                |  |
|   | Driver Prior Action Other                                    |   | <b>NOT APPLICABLE</b>                          |  |
|   | Driver Actions<br><b>FAILURE TO CONTROL</b>                  |   |  |  |
| 01  | 01   | Owner Name<br><b>MIGUEL A ROJAS FLORES<br/>(608) 459-5160</b> |  | Owner Address<br><b>S1005 MARKLEIN RD<br/>PLAIN, WI 53577 , US</b> |
| <b>Sequence Of Events</b>                   |  |   |  |  |
|   | 01   | Event<br><b>EMBANKMENT</b>                                    |  |  |
|   | 02   | Event   |  |  |
|   | 03   | Event   |  |  |
|   | 04   | Event   |  |  |
| UNIT  | <b>Policy Holder</b>   |   |  |  |
|   | Insurance Company<br><b>PROGRESSIVE-CASUALTY-INS-CO</b>      |   | Individual<br><b>GONZALO ROJAS ALVARADO</b>    |  |
| UNIT<br>INDIVIDUAL                          | <b>Individual</b>  |   |  |  |
|   | Driver<br><b>GONZALO ROJAS ALVARADO<br/>(608) 459-5160</b>   |   | Citations Issued<br><b>2</b>                   | Sex<br><b>MALE</b>   |
|   | Address<br><b>S1005 MARKLEIN RD<br/>PLAIN, WI 53577 , US</b> |   | Date of Birth                                  | Race<br><b>HISPANIC</b>  |
|   | Driver License Number  |   | <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b> |  |
| UNIT<br>INDIVIDUAL                          | <b>Safety Equipment</b>                                      |   | On Duty Crash                                  |  |
|   | Safety Equipment   |   | <b>SHOULDER &amp; LAP BELT</b>                 |  |
|   | Row<br><b>01 - FRONT ROW</b>                                 | Seat Position<br><b>07 - LEFT</b>                             |  |  |
|   | Helmet Use   |   | Helmet Compliance                              |  |
|   | Eye Protection   |   | Tint Compliance                                |  |
|   | UNIT<br>INDIVIDUAL   | <b>Injury</b>   |  | Injury Severity<br><b>NO APPARENT INJURY</b>                       |
| Airbag                                      |  | <b>DEPLOYED-FRONT</b>   |  |  |
| Ejected<br><b>NOT EJECTED</b>               |  | Ejection Path<br><b>NOT EJECTED/NOT APPLICABLE</b>            |  | Trapped/Extricated<br><b>NOT TRAPPED</b>                           |
| Medical Transport<br><b>NOT TRANSPORTED</b> |  | EMS Agency Identifier   | EMS Run #                                      |  |
| Hospital                                    |  | Date of Death   | Time of Death                                  |  |
| UNIT<br>INDIVIDUAL                          | <b>Distracted By</b>   |   |  |  |
|   | Distracted By Source   |   |  |  |
| Distracted By Action<br><b>UNKNOWN</b>      |  |   |  |  |

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|-------------------|--|-----------------|------------------------------------|---------------------------------|--|--|
| <b>UNIT</b>       | <b>Non Motorist</b>                            |                 | Striking Unit #                    | Location                        |  |  |
|                   | Prior Action                                   |                 |                                    |                                 |  |  |
|                   | Action   |                 |                                    |                                 |  |  |
|                   | Action Other                                   |                 |                                    |                                 |  |  |
|                   | To/From School                                 |                 |                                    |                                 |  |  |
|                   | <b>Drug &amp; Alcohol</b>                      |                 | Suspected Alcohol Use<br><b>NO</b> | Suspected Drug Use<br><b>NO</b> |  |  |
|                   | Alcohol Test Given<br><b>TEST NOT GIVEN</b>    |                 | Alcohol Test Type                  |                                 | Alcohol Test Results                         |  |
|                   | Drug Test Given<br><b>TEST NOT GIVEN</b>       |                 | Drug Test Type                     |                                 | Drug Test Results                            |  |
|                   | Drug Type                                      |                 |                                    |                                 |  |  |
|                   | Individual Condition<br><b>APPEARED NORMAL</b> |                 |                                    |                                 |  |  |
| <b>Violations</b> |  |                 |                                    |                                 |  |  |
| <b>01</b>         | <b>01</b>                                      | UTC Number      | Issue To?                          | Statute Number                  | Description                                  |  |
|                   |  | <b>BG021018</b> | <b>001</b>                         | <b>343.44(1)(a)</b>             | <b>OPERATING WHILE SUSPENDED</b>             |  |
| <b>02</b>         | <b>01</b>                                      | UTC Number      | Issue To?                          | Statute Number                  | Description                                  |  |
|                   |  | <b>BG021019</b> | <b>001</b>                         | <b>346.57(2)</b>                | <b>FAILURE TO KEEP VEHICLE UNDER CONTROL</b> |  |