

6TL0CJWD6P
20-13405

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	Investigating Officer/Deputy LIEUTENANT E. VANDENHEUVEL	
Crash Date 11/24/2020		Crash Time 02:16 PM	Date Arrived 11/24/2020	Time Arrived 02:22 PM	
Date Notified 11/24/2020		Time Notified 02:17 PM	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 checked="" 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

<p>Diagram</p>	Reconstruction By
	Photos By LT VAN DEN HEUVEL
	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 USH 12 NEGOTIATING A LEFT HAND CURVE IN THE ROADWAY ON WET AND SLUSH COVERED ROADWAY. OPERATOR OF UNIT 1 STATED HE ENCOUNTERED A PATCH OF SLUSH WHICH CAUSED HIM TO LOSE CONTROL. UNIT 1 SPUN SIDWAYS AND STRUCK A CONCRETE BARRIER ON THE MEDIAN SIDE OF THE HIGHWAY WITH THE FRONT END OF UNIT 1 CAUSING DAMAGE TO THE BUMPER. UNIT 1 WAS ABLE TO BE DRIVEN FROM THE SCENE AFTER THE DAMAGED HANGING BUMPER WAS REMOVED. NO INJURIES REPORTED OR OBSERVED. MODERATE DAMAGE TO FRONT END OF UNIT 1. NO DAMAGE OBSERVED TO THE CONCRETE BARRIER.

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Location

ON USH12 WB 843 FT N OF MOON RD IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude 43.563604189	Longitude -89.778236076
	X Coordinate 275626.75	Y Coordinate 4827155.5
	Structure Type	

Crash Scene

First Harmful Event CONCRETE TRAFFIC BARRIER	First Harmful Event Location SHOULDER LEFT	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAYLIGHT	
Road Surface Condition(s) WET, SLUSH	Roadway Factor(s) ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)	
Environment Factor(s) WEATHER CONDITIONS		
Weather Condition(s) RAIN		
Animal Type	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control PARTIAL 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 3	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 65	Total Lanes 2	
	Most Harmful Event: Collision With CONCRETE TRAFFIC BARRIER		Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE		
	Traffic Way DIVIDED HWY W/TRAFFIC BARRIER		Traffic Control NO CONTROL	Traffic Control Inoperative/Missing NO		
	Surface Type CONCRETE		Road Curvature CURVE LEFT	Road Grade LEVEL		
	Truck Bus or HazMat NO					

Vehicle

UNIT VEHICLE 01	License Plate Number AHW3807	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number 1C3CCBAB2DN606316	Make CHRYSLER	Year 2013	Model 200	
	Color BLK - BLACK	Body Style SD - SEDAN	Bus Use		
	Initial Contact Point 12 - FRONT	Vehicle Damage			
	Extent Of Damage FUNCTIONAL DAMAGE	01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT			

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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions SPEED TOO FAST/COND			
01	01	Owner Name JOSE EDUARDO CASTANEDA (608) 630-5086		Owner Address S10532 FACTORY RD SPRING GREEN, WI 53588 , US
		Sequence Of Events		
01	01	Event RUN OFF ROADWAY LEFT		
		Event CONCRETE TRAFFIC BARRIER		
		Event		
		Event		
UNIT	01	Policy Holder		
		Insurance Company PROGRESSIVE-ADVANCED-INSURANCE-CO	Individual JOSE CASTANEDA	
UNIT	01	Individual		
		Driver JOSE EDUARDO CASTANEDA (608) 630-5086	Citations Issued 0	Sex MALE
			Date of Birth [REDACTED]	Race HISPANIC
		Address S10532 FACTORY RD SPRING GREEN, WI 53588 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
01	001	Safety Equipment		On Duty Crash
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	Safety Equipment SHOULDER & LAP BELT
		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 NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				

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UNIT	INDIVIDUAL	Non Motorist		Striking Unit#	Location		
		Prior Action					
		Action					
		Action Other				To/From School	
01	001	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 BRITTANY LEZAMA (608) 370-4876			Citations Issued 0	Sex FEMALE	
		Address 326 MADISON ST SAUK CITY, WI 53583 , US			Date of Birth [REDACTED]	Race HISPANIC	
		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
		Safety Equipment		On Duty Crash	Safety Equipment		
Row 02 - SECOND ROW	Seat Position 09 - RIGHT	SHOULDER & LAP BELT					
Helmet Use		Helmet Compliance					
Eye Protection		Tint Compliance					
01	002	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				

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UNIT	INDIVIDUAL	Prior Action	
		Action	
		Action Other	To/From School
01	002	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	
		UNIT	INDIVIDUAL
Passenger EDUARDO A NUNEZ CARDENAS (608) 370-0470	Citations Issued 0		
	Sex MALE		
	Date of Birth [REDACTED]		
	Race HISPANIC		
Address S7559 USH 12 APT A16 NORTH FREEDOM, WI 53951 , US	Driver License Number		
Safety Equipment			
On Duty Crash	Safety Equipment		
Row 01 - FRONT ROW	Seat Position 09 - RIGHT		
SHOULDER & LAP BELT			
Helmet Use	Helmet Compliance		
Eye Protection	Tint Compliance		
01	003	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 01 003	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		

Property Owner

PROP OWNER 01	Government WISCONSIN DEPT OF TRANSPORTATION (608) 246-3800	Address 2101 WRIGHT ST MADISON, WI 53705 2583, US

Fixed Objects Struck

01	Striking Unit	Struck Object	Structure Number	Damage Tag Number
	01	CONCRETE TRAFFIC BARRIER		