

6TL0D7W13V
21-00039

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 21-00039		Investigating Officer/Deputy DEPUTY K. MUELLER	
Crash Date 01/01/2021		Crash Time 08:59 PM		Date Arrived 01/01/2021		Time Arrived 09:01 PM	
Date Notified 01/01/2021		Time Notified 08:59 PM		Total Units 02		Total Injured 03	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 KMUELLER/JKIRKENG	
		Additional Information PHOTOS	

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

UNIT 1 WAS DRIVING ON 3RD AVENUE BETWEEN BROADWAY AND OAK ST. UNIT 1 WAS DRIVING WEST, THE WRONG WAY DOWN A ONE WAY ROAD. UNIT 1 CAUSED A COLLISION WITH UNIT 2 UNIT 1 DROVE THE WRONG WAY THROUGH THE INTERSECTION AT BROADWAY ST. UNIT 1 WAS AT FAULT AS IT WAS DRIVING THE WRONG WAY WHICH CAUSED THE ACCIDENT.

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Location

ON 3RD AVE 39 FT W OF S BROADWAY ST/ STH113 NB IN THE CITY OF BARABOO IN SAUK COUNTY	Latitude 43.469908571	Longitude -89.744410165
	X Coordinate 278015.1875	Y Coordinate 4816658.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 01 - ANGLE	Light Condition DARK/LIGHTED	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLOUDY		
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 YES	Junction Location INTERSECTION	Intersection Type T-INTERSECTION

Unit Summary

01 UNIT	Unit Status IN TRANSIT	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 1	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 25	Total Lanes 1
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT	Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE		
	Traffic Way ONE-WAY TRAFFIC	Traffic Control NO CONTROL	Traffic Control Inoperative/Missing NO		
	Surface Type BLACKTOP (BITUMINOUS)	Road Curvature STRAIGHT	Road Grade LEVEL		
	Truck Bus or HazMat NO				

Vehicle

01 UNIT VEHICLE	License Plate Number ACC5311	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1YVHP80D955M14205	Make MAZDA	Year 2005	Model 6
	Color BLK - BLACK	Body Style SD - SEDAN	Bus Use	
	Initial Contact Point 10 - LEFT SIDE FRONT	Vehicle Damage		
	Extent Of Damage DISABLING DAMAGE	09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER		

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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By BILLS TOWING	
	What Driver Was Doing GOING STRAIGHT	Vehicle Factors	
	Driver Prior Action Other	NOT APPLICABLE	
	Driver Actions DISREGARDED OTHER TRAFFIC CONTROL , WRONG SIDE OR WRONG WAY		
01 01	Owner Name RAUL EVAN ARELLANES (608) 415-3234	Owner Address 1200 SILVER DR APT 9 BARABOO, WI 53913 , US	
	Sequence Of Events		
01 02 03 04	Event MOTOR VEH IN TRANSPORT		
	Event		
	Event		
	Event		
UNIT	Policy Holder		
	Insurance Company ALLSTATE-INS-CO	Individual RAUL ARELLANES	
UNIT INDIVIDUAL	Individual		
	Driver RAUL EVAN ARELLANES (608) 415-3234	Citations Issued 1	Sex MALE
	Address 1200 SILVER DR APT 9 BARABOO, WI 53913 , US	Date of Birth [REDACTED]	Race HISPANIC
		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 POSSIBLE INJURY
		Airbag NON DEPLOYED	
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier
	Hospital		EMS Run #
	Date of Death		Time of Death
Distracted By		Distracted By Source HANDS-FREE MOBILE PHONE	
Distracted By Action OTHER ACTION (LOOKING AWAY FROM TASK ETC)			

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UNIT INDIVIDUAL	Non Motorist		Striking Unit #	Location		
	Prior Action					
	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					
	Violations					
01	001	UTC Number BG111195	Issue To? 001	Statute Number 346.04(2)	Description FAIL/OBEY TRAFFIC SIGN/SIGNAL	

Unit Summary

UNIT 02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type TRUCK
	Vehicle Type UTILITY TRUCK/PICKUP TRUCK				Operating As Endorsements
	Total Occs 2	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 25	Total Lanes 2
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function POLICE		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 STRAIGHT		Road Grade LEVEL
	Truck Bus or HazMat NO				

Vehicle

02 02	License Plate Number E1385		Plate Type OFF - MUNICIPAL OFFICIAL	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1FTEW1EF7HKD47722		Make FORD	Year 2017	Model F150
	Color BLK - BLACK		Body Style PK - PICKUP		Bus Use
	Initial Contact Point 12 - FRONT				

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UNIT VEHICLE	Vehicle Damage	
	Extent Of Damage DISABLING DAMAGE	12 - FRONT
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By BILLS TOWING
	What Driver Was Doing GOING STRAIGHT	Vehicle Factors
UNIT VEHICLE	Driver Prior Action Other	NOT APPLICABLE
	Driver Actions NO CONTRIBUTING ACTION	
02 02	Owner Name CITY OF BARABOO (608) 355-2700	Owner Address 135 4TH ST BARABOO, WI 53913 , US
	Sequence Of Events	
01 02 03 04	Event MOTOR VEH IN TRANSPORT	
	Event	
	Event	
	Event	
UNIT	Policy Holder	
	Insurance Company CITIES-&VILLAGES-MUTUAL-INS-CO	Organization/Company CITY OF BARABOO
UNIT INDIVIDUAL	Individual	
	Driver NICHOLAS MICHAEL SMITH (608) 963-1556	Citations Issued 0
		Sex MALE
		Date of Birth [REDACTED]
	Race WHITE	
	Address [REDACTED] WI [REDACTED], US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES
02 002	Safety Equipment	
	On Duty Crash POLICE	Safety Equipment SHOULDER & LAP BELT
	Row 01 - FRONT ROW	Seat Position 07 - LEFT
	Helmet Use	Helmet Compliance
	Eye Protection	Tint Compliance
02 002	Injury	
	Injury Severity POSSIBLE INJURY	Airbag DEPLOYED-FRONT
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE
	Trapped/Extricated NOT TRAPPED	
	Medical Transport OTHER	EMS Agency Identifier
	Hospital ST CLARE HOSP	Date of Death
		EMS Run#
		Time of Death

WISCONSIN MOTOR VEHICLE
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UNIT INDIVIDUAL	Distracted By Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
	Distracted By Action NOT DISTRACTED		
	Non Motorist	Striking Unit # Location	
	Prior Action		
	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			
UNIT INDIVIDUAL	Individual		
	Passenger BRIAN ARTHUR VOLTZ (608) 386-7458	Citations Issued 0	Sex MALE
		Date of Birth [REDACTED]	Race WHITE
	Address [REDACTED] WI [REDACTED], US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
	Safety Equipment	On Duty Crash POLICE	Safety Equipment SHOULDER & LAP BELT
	Row 01 - FRONT ROW	Seat Position 09 - RIGHT	
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	Injury	Injury Severity POSSIBLE INJURY	Airbag DEPLOYED-FRONT
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
Medical Transport OTHER		EMS Agency Identifier	EMS Run #
Hospital ST CLARE HOSP		Date of Death	Time of Death
Distracted By Distracted By Source			

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UNIT INDIVIDUAL 02 003	Distracted By Action		
	Non Motorist	Striking Unit #	Location
	Prior Action		
	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		