

6TL092T5R0
21-04679

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

6TL092T5R0

| | | | | | | | |
|--|--------------------------------------|---|------------------------------------|---------------------------------|---|--|--|
| Document Number Override | | Primary Crash Document# | | Agency Crash Number 21-04679 | | Investigating Officer/Deputy DEPUTY A. KING | |
| Crash Date 05/29/2021 | | Crash Time 01:05 AM | | Date Arrived 05/29/2021 | | Time Arrived 01:23 AM | |
| Date Notified 05/29/2021 | | Time Notified 01:06 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

| | |
|------------------------------------|----------------------------------|
| <p>Diagram</p> <p>Not to scale</p> | Reconstruction By |
| | Photos By A. KING |
| | Additional Information PHOTOS |

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

I LOCATED THE VEHICLE ON HY33 NEAR CTH X. I WAS UNABLE TO LOCATE THE OPERATOR OF THE VEHICLE. THE REGISTERED OWNER OF THE VEHICLE IS ETHAN M PEREZ. I WAS UNABLE TO CONTACT ETHAN AT THE TIME OF THE ACCIDENT. BILL'S TOWING REMOVED THE VEHICLE FROM THE DITCH. ON 5-29-21 AT 6:00PM, I MADE PHONE CONTACT WITH ETHAN. ETHAN STATED HE DIDN'T KNOW WHO TO CALL AND LEFT THE VEHICLE. ETHAN STATED HE WENT TO PICK IT UP TODAY AND IT WAS ALREADY GONE. ETHAN STATED HE SWERVED TO AVOID A DEER AND WENT INTO THE DITCH. ETHAN STATED HE DID NOT CONSUME ANY INTOXICANTS AND WAS TRAVELING BETWEEN 50-55MPH IN A 55MPH ZONE.

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Location

| | | |
|---|----------------------------|----------------------------|
| ON STH33 EB 1071 FT W OF CTHX WB IN THE TOWN OF GREENFIELD IN SAUK COUNTY | Latitude 43.479524805 | Longitude -89.644403368 |
| | X Coordinate 286138.625 | Y Coordinate 4817464.5 |
| | Structure Type | |

Crash Scene

| | | |
|--|---|---|
| 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) DRY | Roadway Factor(s) NONE | |
| Environment Factor(s) NONE | | |
| Weather Condition(s) CLEAR | | |
| Animal Type DEER | 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 | 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? NO | Direction Of Travel WESTBOUND | <input checked="" type="checkbox"/> Pre Crash Tire Mark | Speed Limit 55 | 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 STRAIGHT | | Road Grade UPHILL | |
| | Truck Bus or HazMat NO | | | | |

Vehicle

| | | | | | | |
|-------------|----------------|---|---------------------------------------|---------------------|---|--|
| UNIT | VEHICLE | License Plate Number AKZ5859 | Plate Type AUT - AUTOMOBILE | St WI | Country of Issuance UNITED STATES | |
| | | Vehicle Identification Number 1N4AL11DX5C341467 | Make NISSAN | Year 2005 | Model ALTIMA | |
| | | Color GRY - GRAY | Body Style SD - SEDAN | | Bus Use | |
| | | Initial Contact Point 99 - UNKNOWN | Vehicle Damage | | | |
| | | Extent Of Damage MINOR DAMAGE | 06 - REAR | | | |

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|----------------------|--|--|---|-------------------------|
| UNIT VEHICLE | Towed Due To Damage TOWED BUT NOT DUE TO DISABLING DAMAG | | Vehicle Removed By BILLS TOWING | |
| | What Driver Was Doing GOING STRAIGHT | | Vehicle Factors | |
| | Driver Prior Action Other | | NOT APPLICABLE | |
| | Driver Actions | | | |
| 01 01 | Owner Name ETHAN MICHEAL PEREZ (608) 566-9012 | | Owner Address W10780 COUNTY ROAD X PORTAGE, WI 53901 , US | |
| | Sequence Of Events | | | |
| 01 02 03 04 | Event MOTOR VEH IN TRANSPORT | | | |
| | Event | | | |
| | Event | | | |
| | Event | | | |
| UNIT INDIVIDUAL | Driver ETHAN MICHEAL PEREZ (608) 566-9012 | | Citations Issued 1 | Sex MALE |
| | Address W10780 COUNTY ROAD X PORTAGE, WI 53901 , US | | Date of Birth [REDACTED] | Race HISPANIC |
| | On Duty Crash | | Safety Equipment | |
| | Driver License Number [REDACTED] | | STATE: WISCONSIN COUNTRY: UNITED STATES | |
| 01 001 | Safety Equipment | | RESTRAINT USE UNKNOWN | |
| | Row 01 - FRONT ROW | Seat Position 07 - LEFT | Helmet Compliance | |
| | Helmet Use | | Tint Compliance | |
| | Eye Protection | | Airbag NON DEPLOYED | |
| 01 001 | Injury Injury Severity NO APPARENT INJURY | | Trapped/Extricated NOT TRAPPED | |
| | Ejected NOT EJECTED | Ejection Path NOT EJECTED/NOT APPLICABLE | EMS Agency Identifier | |
| | Medical Transport NOT TRANSPORTED | | EMS Run # | |
| | Hospital | | Date of Death | Time of Death |
| 01 001 | Distracted By Distracted By Source NOT APPLICABLE (NOT DISTRACTED) | | | |
| | Distracted By Action NOT DISTRACTED | | | |
| | Non Motorist | | Striking Unit # | Location |

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| UNIT INDIVIDUAL | 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 NOT OBSERVED | | | |
| | Violations | | | |
| | 01 001 | UTC Number AD978558 | Issue To? 001 | Statute Number 346.70(1) |