

6TL09XQZ38  
21-07207

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 21-07207		Investigating Officer/Deputy DEPUTY I. GALVAN	
Crash Date 08/01/2021		Crash Time 01:41 AM		Date Arrived 08/01/2021		Time Arrived 01:44 AM	
Date Notified 08/01/2021		Time Notified 01:44 AM		Total Units 02		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

Diagram		Reconstruction By	
		Photos By ISAAC GALVAN	
		Additional Information PHOTOS	

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

UNIT 2 AND UNIT 1 WERE TRAVELING WESTBOUND ON USH 12. UNIT 2 DESCRIBED UNIT 1 COMING UP QUICKLY BEHIND HIM. UNIT 1 FOLLOWED TOO CLOSE AND WAS DRIVING IN A AGRESSIVE MANNER ATTEMPTING TO PASS. UNIT 1 STRUCK A POLE IN THE MEDIAN WITH ITS DRIVER SIDE MIRROR THEN STRUCK UNIT 2'S REAR BUMPER. UNIT 2 ALLOWED UNIT 1 TO PASS AND FOLLOWED IT UNTIL LAW ENFORCEMENT MADE CONTACT WITH THEM BOTH ON CTH PF WEST OF USH 12. OPERATOR OF UNIT 1 ARRESTED FOR OWI 4 AND WAS ISSUED SEVERAL OTHER TRAFFIC CITATIONS. OPERATOR OF UNIT 2 RECEIVED A CITATION FOR NOT HAVING INSURANCE. UNIT 1 WAS REMOVED BY EVERETT'S TOWING.

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Location

ON USH12 WB 10 FT W OF BALLWEG DR IN THE TOWN OF PRAIRIE DU SAC IN SAUK COUNTY	Latitude 43.27144433	Longitude -89.756465084
	X Coordinate 276311.28125	Y Coordinate 4794648.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event <b>OTHER POST, POLE OR SUPPORT</b>	First Harmful Event Location <b>MEDIAN</b>	
Manner of Collision <b>03 - FRONT TO REAR</b>	Light Condition <b>DARK/LIGHTED</b>	
Road Surface Condition(s) <b>DRY</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>		
Weather Condition(s) <b>CLOUDY</b>		
Animal Type	Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>	Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land	Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>INTERSECTION-RELATED</b>	Intersection Type <b>T-INTERSECTION</b>

Unit Summary

UNIT 01	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>TRUCK</b>		
	Vehicle Type <b>UTILITY TRUCK/PICKUP TRUCK</b>	Operating As Endorsements			
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>5</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>YES</b>	Direction Of Travel <b>WESTBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>55</b>	Total Lanes <b>2</b>
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>	Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>TWO-WAY, DIVIDED, UNPROTECTED (PAINTED &gt; 4</b>	Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>	Road Curvature <b>CURVE RIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>				

Vehicle

UNIT VEHICLE 01	License Plate Number <b>SG5425</b>	Plate Type <b>LTK - LIGHT TRUCK</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>1FT7W2B6XGEA83220</b>	Make <b>FORD</b>	Year <b>2016</b>	Model <b>F250</b>
	Color <b>WHI - WHITE</b>	Body Style <b>PK - PICKUP</b>		Bus Use
	Initial Contact Point <b>10 - LEFT SIDE FRONT</b>	Vehicle Damage <b>10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT</b>		
	Extent Of Damage <b>FUNCTIONAL DAMAGE</b>			



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UNIT VEHICLE	Towed Due To Damage <b>TOWED BUT NOT DUE TO DISABLING DAMAG</b>		Vehicle Removed By <b>EVERETTS TOWING</b>			
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors			
	Driver Prior Action Other		<b>NOT APPLICABLE</b>			
	Driver Actions <b>EXCEED SPEED LIMIT, SPEED TOO FAST/COND, FOLLOWING TOO CLOSE, FAILURE TO CONTROL, IMPROPER OVERTAKING / PASSING LEFT, FAILED TO KEEP IN DESIGNATED LANE, OPERATED MOTOR VEHICLE IN AGGRESSIVE/RECKLESS MANNER, OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER</b>					
01	01	Owner Name <b>IRWIN T JOHNSON (920) 257-0514</b>		Owner Address <b>PO BOX 343 MAZOMANIE, WI 53560 , US</b>		
		<b>Sequence Of Events</b>				
01	01	01	Event <b>OTHER POST, POLE OR SUPPORT</b>			
		02	Event <b>MOTOR VEH IN TRANSPORT</b>			
		03	Event			
		04	Event			
UNIT	<b>Policy Holder</b>					
	Insurance Company <b>PROGRESSIVE-UNIVERSAL-INSURANCE-COMP</b>		Individual <b>IRWIN JOHNSON</b>			
UNIT	INDIVIDUAL	<b>Individual</b>				
		Driver <b>IRWIN T JOHNSON (920) 257-0514</b>		Citations Issued <b>5</b>	Sex <b>MALE</b>	
		Date of Birth [REDACTED]		Race <b>WHITE</b>		
		Address <b>PO BOX 343 MAZOMANIE, WI 53560 , US</b>		Driver License Number [REDACTED] <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
01	001	<b>Safety Equipment</b>		On Duty Crash	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		
		<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>	
		Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</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>NOT APPLICABLE (NOT DISTRACTED)</b>				
<b>Distracted By Action</b>		<b>NOT DISTRACTED</b>				

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<b>UNIT INDIVIDUAL</b>	<b>Non Motorist</b>		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other			To/From School	
	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>YES</b>	Suspected Drug Use <b>NO</b>	
	Alcohol Test Given <b>TEST GIVEN</b>		Alcohol Test Type <b>BLOOD</b>		Alcohol Test Results <b>PENDING</b>
	Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type	Drug Test Results	
	Drug Type				
	Individual Condition  <b>UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL</b>				
	<b>Violations</b>				
01	01	UTC Number <b>AE757768</b>	Issue To? <b>001</b>	Statute Number <b>346.63(1)(a)</b>	Description <b>OWI (4th)</b>
02	02	UTC Number <b>AE757769</b>	Issue To? <b>001</b>	Statute Number <b>343.44(1)(b)</b>	Description <b>OPERATING WHILE REVOKED (REV DUE TO ALC/CONT SUBST/REFUSAL)</b>
03	03	UTC Number <b>AE757770</b>	Issue To? <b>001</b>	Statute Number <b>346.935(2)</b>	Description <b>POSSESS OPEN INTOXICANTS IN MV-DRIVER</b>
04	04	UTC Number <b>AE757771</b>	Issue To? <b>001</b>	Statute Number <b>346.70(1)</b>	Description <b>FAILURE OF OPERATOR TO NOTIFY POLICE OF ACCIDENT</b>
05	05	UTC Number <b>AE757772</b>	Issue To? <b>001</b>	Statute Number <b>341.03(1)</b>	Description <b>OPERATE AFTER REV/SUSP OF REGISTRATION</b>

### Unit Summary

<b>UNIT</b>	02	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>	
	Vehicle Type <b>PASSENGER CAR</b>				Operating As Endorsements	
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>1</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>NO</b>	Direction Of Travel <b>WESTBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>55</b>	Total Lanes <b>2</b>	
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>			Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>
	Traffic Way <b>TWO-WAY, DIVIDED, UNPROTECTED (PAINTED &gt; 4</b>			Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>			Road Curvature <b>CURVE RIGHT</b>		Road Grade <b>LEVEL</b>
	Truck Bus or HazMat <b>NO</b>					

### Vehicle

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02	UNIT	02	VEHICLE	License Plate Number <b>AMF2885</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
				Vehicle Identification Number <b>2G1WF52K4Y9183031</b>	Make <b>CHEVROLET</b>	Year <b>2000</b>	Model <b>IMPALA</b>
02	UNIT	02	VEHICLE	Color <b>WHI - WHITE</b>	Body Style <b>4D - 4DR</b>	Bus Use	
				Initial Contact Point <b>06 - REAR</b>	Vehicle Damage <b>06 - REAR, 07 - LEFT REAR CORNER</b>		
02	UNIT	02	VEHICLE	Extent Of Damage <b>FUNCTIONAL DAMAGE</b>			
				Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OWNER</b>		
02	UNIT	02	VEHICLE	What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors		
				Driver Prior Action Other	<b>NOT APPLICABLE</b>		
02	UNIT	02	VEHICLE	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
				Owner Name <b>ANGEL JESUS RIOS-SVEUM (608) 606-9016</b>	Owner Address <b>1049B STATE ROAD 82 WISCONSIN DELLS, WI 53965 , US</b>		

### Sequence Of Events

02	UNIT	02	01	Event <b>MOTOR VEH IN TRANSPORT</b>
				Event
				Event
				Event

### Individual

02	UNIT	02	INDIVIDUAL	Driver <b>ANGEL JESUS RIOS-SVEUM (608) 606-9016</b>	Citations Issued <b>1</b>	Sex <b>MALE</b>
					Date of Birth [REDACTED]	Race
02	UNIT	02	INDIVIDUAL	Address <b>1049B STATE ROAD 82 WISCONSIN DELLS, WI 53965 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	

### Safety Equipment

02	UNIT	02	002	On Duty Crash	Safety Equipment		
				Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>SHOULDER &amp; LAP BELT</b>	
				Helmet Use		Helmet Compliance	
				Eye Protection		Tint Compliance	

### Injury

02	UNIT	02	002	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
				Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>

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UNIT INDIVIDUAL           02 002           06	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>NOT APPLICABLE (NOT DISTRACTED)</b>	
	<b>Distracted By Action</b> <b>NOT DISTRACTED</b>		
	<b>Non Motorist</b>	Striking Unit #	Location
	Prior Action		
	Action		
	Action Other		To/From School
	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
	Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results
Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results	
Drug Type			
Individual Condition <b>APPEARED NORMAL</b>			
<b>Violations</b>			
UTC Number <b>AE757767</b>	Issue To? <b>002</b>	Statute Number <b>344.62(1)</b>	Description <b>OPERATE MOTOR VEHICLE W/O INSURANCE</b>