

6TL0F3SSGN

Document Number Override		Primary Crash Document #		Agency Crash Number 24-06479		Investigating Officer/Deputy DEPUTY A. KING	
Crash Date 06/21/2024		Crash Time 05:58 AM		Date Arrived 06/21/2024		Time Arrived 06:24 AM	
Date Notified 06/21/2024		Time Notified 05:59 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

Diagram		Reconstruction By	
<p>Not to scale</p>		Photos By	
		Additional Information NONE	

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

U1 WAS TRAVELING EASTBOUND ON D&W RD., WHEN THE OPERATOR STATED SHE WAS NOT FROM THE AREA AND DID NOT SEE THE STOP SIGN. OPERATOR DENIED USING ANYTHING TO BE DISTRACTED. U1 STATED NEXT THING SHE KNEW SHE WAS THROUGH THE INTERSECTION AND THROUGH THE FENCE AND IN THE FIELD. OPERATOR WAS ID'D BE WI DL AND PROVIDED PROOF OF INSURANCE. OPERATOR WAS CITED FOR FAILURE TO KEEP VEHICLE UNDER CONTROL AND FAILURE TO STOP AT STOP SIGN. LAND OWNER, ROBERT HORKAN, STATED HE WOULD HANDLE THE FENCE REPAIRS CIVILLY WITH THE OPERATOR. U1 WAS TOWED FROM THE SCENE BY STEVE'S TOWING. OPERATOR ALSO DENIED ANY INJURIES.

Location

INTERSECTION ON D AND W RD AT CTHH EB IN THE TOWN OF DELLONA IN SAUK COUNTY	Latitude 43.587388567	Longitude -89.953453482
	X Coordinate 261569.328125	Y Coordinate 4830285.5
	Structure Type	

Crash Scene

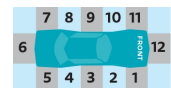
First Harmful Event DITCH	First Harmful Event Location SHOULDER RIGHT	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAWN	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLOUDY		
Animal Type	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location INTERSECTION	Intersection Type T-INTERSECTION

Unit Summary

UNIT	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type TRUCK	
	Vehicle Type UTILITY TRUCK/PICKUP TRUCK	Operating As Endorsements			
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 2	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 45	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 STOP SIGN		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 UH5144	Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES	
		Vehicle Identification Number 1C6SRFMTXKN701972	Make RAM	Year 2019	Model 1500	
		Color GRY - GRAY	Body Style PK - PICKUP		Bus Use	
		Initial Contact Point 12 - FRONT	Vehicle Damage			
		Extent Of Damage FUNCTIONAL DAMAGE	12 - FRONT			



WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT	Towed Due To Damage TOWED BUT NOT DUE TO DISABLING DAMAG		Vehicle Removed By STEVES AUTO SERVICE		
	What Driver Was Doing LEFT TURN		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions FAILURE TO CONTROL, RAN OFF ROADWAY, DISREGARDED STOP SIGN				
01	01	Owner Name MONTANNA KIEL (920) 973-8444		Owner Address 665 GALENA ST DARLINGTON, WI 53530 , US	
		Sequence Of Events			
UNIT	01	Event DITCH			
		Event FENCE			
		Event			
		Event			
UNIT	Policy Holder				
	Insurance Company PROGRESSIVE-CLASSIC-INS-CO		Individual MONTANNA KIEL		
UNIT	Individual				
	INDIVIDUAL	Driver MONTANNA KIEL (920) 973-8444		Citations Issued 2	Sex FEMALE
		Address 665 GALENA ST DARLINGTON, WI 53530 , US		Date of Birth	Race WHITE
	Driver License Number				
Safety Equipment					
01	001	On Duty Crash		Safety Equipment	
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	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 UNKNOWN			
Distracted By Action UNKNOWN					

UNIT		Non Motorist		Striking Unit #	Location	
		Prior Action				
INDIVIDUAL		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	
01		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results	
		Drug Type				
		Individual Condition APPEARED NORMAL				
		Violations				
01		UTC Number BK261491	Issue To? 001	Statute Number 346.57(2)	Description FAILURE TO KEEP VEHICLE UNDER CONTROL	
		UTC Number BK261492	Issue To? 001	Statute Number 346.04(2)	Description FAIL/OBEY TRAFFIC SIGN/SIGNAL	
Property Owner						
PROP OWNER 01		Individual ROBERT HORKAN			Address E7344A COUNTY ROAD H LYNDON STATION, WI 53944 , US	
Fixed Objects Struck						
01		Striking Unit 01	Struck Object FENCE		Structure Number	Damage Tag Number NONE