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24-08925

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 24-08925	Investigating Officer/Deputy DEPUTY B. BRUNKEN	
Crash Date 08/12/2024		Crash Time 99:99	Date Arrived 08/12/2024	Time Arrived 03:01 PM	
Date Notified 08/12/2024		Time Notified 02:34 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 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 <p>08/12/2024 SC24-08925 CTH S near Thieman Hill Road</p>	Reconstruction By Photos By DEPUTY BRUNKEN 9106 Additional Information PHOTOS
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I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

ON 08/12/2024, AT APPROXIMATELY 1434 HOURS, UNIT ONE WAS TRAVELING WESTBOUND ON CTH S, NEAR THIEMAN HILL ROAD, IN SAUK COUNTY WI. DRIVER ADMITTED THAT HE HAD BENT DOWN TO GET A WATER BOTTLE THAT HAD FELL WHICH CAUSED HIM TO COME UP ON THE CURVE FASTER THAN HE EXPECTED. DRIVER ATTEMPTED TO NEGOTIATE THE CURVE BUT LOST CONTROL AS THE REAR END OF THE VEHICLE LOST TRACTION ON THE ROADWAY. THE VEHICLE SKIDDED INTO THE DITCH, STRIKING A CULVERT AND CAME TO A STOP IN THE DRIVEWAY OF E5454 CTH S. THE VEHICLE WAS DISABLED DUE TO DAMAGE TO THE REAR DRIVER'S SIDE WHEEL. END OF REPORT. 9106

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Location

ON CTHS WB 415 FT S OF THIEMAN HILL RD IN THE TOWN OF REEDSBURG IN SAUK COUNTY	Latitude 43.492187535	Longitude -90.046243259
	X Coordinate 253690.484375	Y Coordinate 4819982.5
	Structure Type	

Crash Scene

First Harmful Event CULVERT	First Harmful Event Location ROADSIDE	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLEAR		
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 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 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel WESTBOUND	<input checked="" type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With CULVERT	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 CURVE LEFT		Road Grade LEVEL	
	Truck Bus or HazMat NO				

UNIT 01 VEHICLE	Vehicle			
	License Plate Number AUU9874	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 4S3BD6559S7225970	Make SUBARU	Year 1995	Model LEGACY
	Color WHI - WHITE	Body Style SD - SEDAN		Bus Use
	Initial Contact Point 08 - LEFT SIDE REAR	Vehicle Damage 08 - LEFT SIDE REAR		
Extent Of Damage DISABLING DAMAGE				



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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By STEVES AUTO SERVICE	
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER			
01 01	Owner Name EVAN VENITSKY		Owner Address E4681 WOODLAWN DR LOGANVILLE, WI 53943 , US	
	Sequence Of Events			
01 02 03 04	Event MOTOR VEH IN TRANSPORT			
	Event CULVERT			
	Event			
	Event			
UNIT	Policy Holder			
	Insurance Company HARTFORD-UNDERWRITERS-INS-CO		Individual MURRAY VENITSKY	
UNIT INDIVIDUAL	Individual			
	Driver EVAN VENITSKY		Citations Issued 0	Sex MALE
	Address E4681 WOODLAWN DR LOGANVILLE, WI 53943 , US		Date of Birth	Race WHITE
	Driver License Number 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 OTHER DISTRACTION (ANIMAL, FOOD, GROOMING)		
Distracted By Action OTHER ACTION (LOOKING AWAY FROM TASK ETC)				

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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			