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24-08979

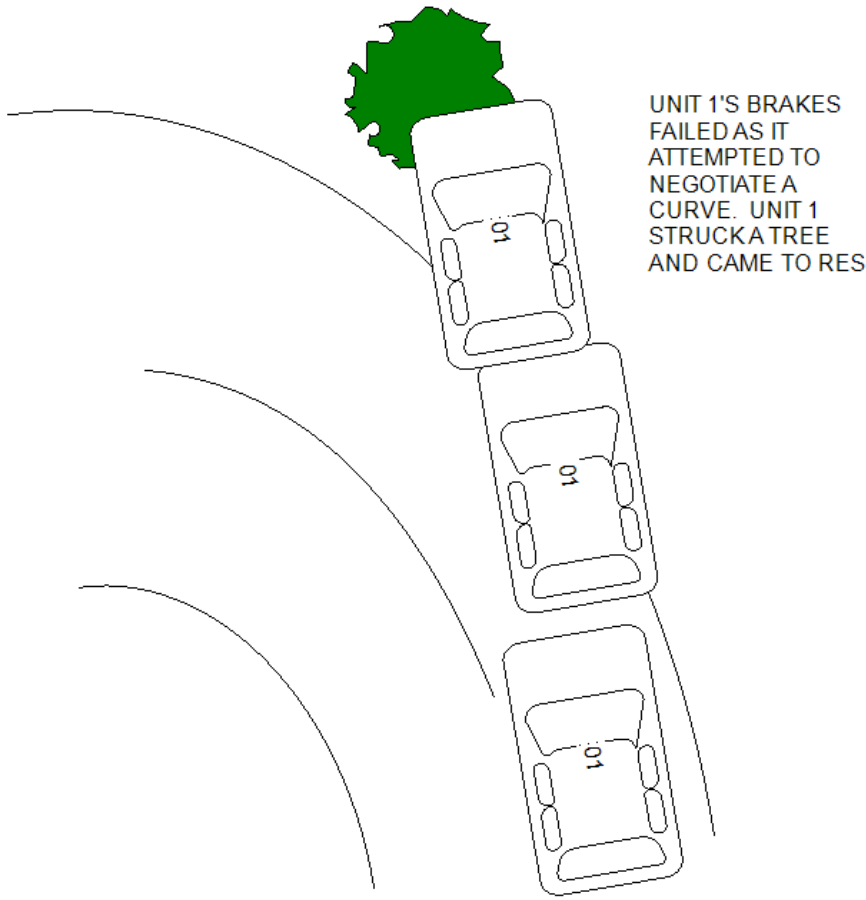
WISCONSIN MOTOR VEHICLE CRASH REPORT

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 24-08979		Investigating Officer/Deputy DEPUTY D. HORN	
Crash Date 08/13/2024		Crash Time 10:18 PM		Date Arrived 08/13/2024		Time Arrived 10:37 PM	
Date Notified 08/13/2024		Time Notified 10:18 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 PRIVATE PROPERTY/PARKING LOT				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram 	Reconstruction By
	Photos By
	Additional Information NONE

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

UNIT 1 WAS TRAVELING DOWN THE DRIVEWAY OF ISHNALA. UNIT 1'S BRAKES FAILED AS THE OPERATOR TRIED TO NEGOTIATE A CURVE. UNIT 1 LEFT THE DRIVEWAY AND STRUCK A TREE. UNIT 1 CAME TO REST OFF OF THE DRIVEWAY.

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Location

ON S2011 ISHNALA RD 397 FT S OF IH90 EB (HOUSE/BUILDING S2011) IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude 43.571534352	Longitude -89.79852819
	X Coordinate 274017.53125	Y Coordinate 4828091.5
	Structure Type HOUSE/BUILDING	

Crash Scene

First Harmful Event TREE	First Harmful Event Location OFF ROADWAY, LOCATION UNKNOWN	
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	Relation To Trafficway NON TRAFFICWAY - PARKING LOT	
Crash Classification - Location PRIVATE PROPERTY	Crash Classification - Jurisdiction PRIVATE PROPERTY	
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 EASTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit	Total Lanes 2
	Most Harmful Event: Collision With TREE	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	Vehicle				
	01	License Plate Number AUX7871	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 2CKD173F766167823	Make PONTIAC	Year 2016	Model TORRENT
	VEHICLE	Color BLU - BLUE		Body Style 4D - 4DR	Bus Use
		Initial Contact Point 12 - FRONT	Vehicle Damage		
Extent Of Damage DISABLING DAMAGE		12 - FRONT, 14 - UNDERCARRIAGE			



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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By PLATTS WRECKER	
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors	
	Driver Prior Action Other		BRAKES	
	Driver Actions NO CONTRIBUTING ACTION			
01 01	Owner Name FEDERICO CALDERON		Owner Address 819 BROADWAY WISCONSIN DELLS, WI 53965 , US	
	Sequence Of Events			
01 02 03 04	Event TREE			
	Event			
	Event			
	Event			
UNIT INDIVIDUAL	Individual			
	Driver VICTOR OSORIO PISCIOTTI		Citations Issued 1	Sex MALE
	Address 819 BROADWAY WISCONSIN DELLS, WI 53965 , US		Date of Birth	Race HISPANIC
	On Duty Crash		Driver License Number	
01 001	Safety Equipment		Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
01 001	Injury		Airbag	
	Injury Severity NO APPARENT INJURY		DEPLOYED-FRONT	
	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	
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	Prior Action			
	Action			
INDIVIDUAL	Action Other			To/From School
	Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use NO	
01	001	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		
01	Violations			
	UTC Number BD759770	Issue To? 001	Statute Number 343.05(3)(a)	Description OPERATE W/O VALID LICENSE (1ST VIOLATION)