24-09148

WISCONSIN MOTOR VEHICLE CRASH REPORT

	Document Number Override	Primary Crash	Document #	Agency 24-091	r Crash Number 148	Investigating DEPUTY B				
5R	Crash Date 08/18/2024	Crash Time 99:99 Time Notified 12:03 PM		Date Ar 08/18/		Time Arrived 12:10 PM				
6TL0D6N05R	Date Notified 08/18/2024			Total U 01	nits	Total Injured Total Killed 01 00		illed		
0D(On Emergency	t and Run	Lane Clos	ure	Work Zone	Trailer	or Towed	Reporting Threshold		
6TL	Government Property	Active Sc	hool Zone	School NO	Bus Related	Tags				
•	Reportable	Crash Type DT4000 (STA		H)		Amend	ed	Secondary Crash		
l	Description						Reconstruction By Photos By DEPUTY MESSNER 9134			
	Diagram 08/18/2024 HY 136, near Sc SC24-09148	enic Road	, Sauk Cou	nty W		>E				
		130	E E O 2 C	A 13			Additional In PHOTOS	formation		
	✔ I, a sworn law enforceme	ent officer, agr	ee that I have n	ot addeo	d any CJIS data in this	report.				
	ON THE ABOVE DATE AND TIME, HAND CURVE. PER WITNESS STA THAT HE BELIEVES THAT THE OP CURVE. UNIT ONE TRAVELED OF UNIT ONE REMOVED MY CRAIG'S HAD NOT APPARENT INJURY AND	ATEMENT, UNIT C ERATOR'S FOOT F OF THE ROAD TOWING. OPER	DNE OPERATOR A SLIPPED OFF OF WAY AND ENDED A ATOR TRANSPORT	ITEMPTEI The Brah Approxin Fed by An	D TO BRAKE AS HE WAS GO KE PEDAL AND UNIT ONE W MATELY 30 TO 45 OFF OF T MBULANCE TO ST. CLARE H	OING TOO FAS /AS ABLE TO T HE ROADWAY,	T FOR THE C URN SHARP DOWN THE	CURVE. WITNESS STATED ENOUGH TO MAKE THE SIDE OF A STEEP INCLINE.		

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L	ocation											
C	ON STH136 WB						Latitude			Longitud	le	
	1067 FT W						43.47734	4382		-89.861	638971	
							X Coordinate Y Coordinate					
	IN THE TOWN OF EXCEL IN SAUK COUNTY	SIOR					268560.96875 4817804					
1	N SAON COUNT I						Structure Type					
								-				
С	rash Scene 📃											
F	First Harmful Event						First Harm	nful Event L	ocation			
0	DITCH						SHOULD	DER LEFT	-			
Ν	Manner of Collision						Light Cond	dition				
0								нт				
F								Factor(s)				
0	DRY											
E	Environment Factor(s)						•					
٢	NONE						NONE					
٧	Weather Condition(s)						1					
C	CLOUDY											
A	Animal Type							o Trafficwa	-			
							TRAFFICWAY - ON ROAD Crash Classification - Jurisdiction NO SPECIAL JURISDICTION					
	Crash Classification - Locatior PUBLIC PROPERTY	1										
-	Tribal Land						Access Co			Special Study		
'							NO CONTROL					
۷	Within Interchange Area	Junction Loca	ation			Intersectio	on Type					
	NO NON-JUNCTION					NOT AN	N INTERSECTION					
		Closure Type				ons for Clos	Josure					
	FULL CLOSURE											
	Date Initial Lane/Rd Closed Time Initial Lane/Rd Closed			ed				EMENT, TOW TRUCK, FIRE/EMS				
-	08/18/2024 Date All Lanes Open	12:16 P	Lanes Open		Data			Time Scene Cleared				
	08/18/2024	01:35 P	•						I:35 PM			
U	Init Summary											
	Unit Status			Vehi	cle Ope	erating As C	lassification	1	Unit Type			
I	IN TRANSIT			мс	LASS				MOTORCY	CLE		
٧	Vehicle Type								Operating As	s Endorsei	nents	
N	MOTORCYCLE											
	Total Occs	Train/Bus #	Recorded		l # Cita	tions Issued		Total Trai 0	lers	Total Haz 0	Mat Types	
	2 Insurance?	Direction O	f Travel	0		• ·		U Speed Lir	nit	U Total Lan	es	
	YES WESTBOUND					CrashTire Mark		5peeu Lii 55				
	Most Harmful Event: Collision			Spee	cial Fun				Emergency Motor Vehicle Use			
	DITCH			NO	SPEC	IAL FUNC	TION		NOT APPLICABLE			
	Traffic Way				fic Cont				Traffic Contr	ol Inopera	tive/Missing	
	TWO-WAY, NOT DIVIDED NO CON				-	-			NO			
Surface Type Road Curvature BLACKTOP (BITUMINOUS) CURVE RIGHT Truck Bus or HazMat								Road Grade		_		
				IGHT	LEVEL							
	Truck Bus or HazMat NO											
Ľ	Vehicle											
License Plate Number Plate Type							St	Country of Iss	suance			
	4825L			CYC - CYCLE					UNITED STATES			
	Vehicle Identification Nu	mber		Mal	ke			Year	Model			
Ċ	Б 1HD1TCL18KB9608	70		HA	RLEY	DAVIDSC	N	2019	FLTRXSE			
2	IHD1TCL18KB9608	/U		HA	RLEY	DAVIDSC	N	2019	FLTRXSE			

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WISCONSIN MOTOR VEHICLE **CRASH REPORT**

		Color		Body Style		Bus Use				
		GRY - GRAY		CR - CRANE						
⊢	Ц	Initial Contact Point 00 - NON-COLLISION		Vehicle Damage			7 8 9 10 11			
UNIT	₽	Extent Of Damage		01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 04 - RIGHT SIDE						
	VEHICLE	DISABLING DAMAGE		REAR, 05 - RIGHT REAR CORNER						
	-	Towed Due To Damage		Vehicle Removed By						
		TOWED DUE TO DISABL	ING DAMAGE	CRAIGS TOWING						
		What Driver Was Doing		Vehicle Factors						
		NEGOTIATING CURVE Driver Prior Action Other		NOT APPLICABLE						
	Щ	SPEED TOO FAST/COND, RAN OFF ROADWAY								
UNIT	VEHICLE									
	μ									
	-									
		Owner Name		Owner Address						
2	6	JOHN WHITE		N7173 COUNTY R BEAVER DAM, WI						
	0									
		Sequence Of Events								
		Event								
	0	DITCH								
	02	Event								
	03	Event								
	04	Event								
E	1	Policy Holder								
UNIT		Insurance Company STATE-FARM-MUTUAL-/	AUTOMOBILE-INS-CO	Individual JOHN WHITE						
	I	Individual								
		Driver JOHN WHITE		Citations Issued 0	Sex	Sex MALE				
	AL			Date of Birth	Race					
⊢	DUAL				WHITE					
N.	Σ	Address		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES Protective Gear						
 	INDIVI	N7173 COUNTY ROAD A BEAVER DAM, WI 53916								
		,	,							
		On Dut	y Crash							
	Sai	fety Equipment								
		Row 98 - NOT APPLICABLE	Seat Position	NONE						
		Helmet Use		Helmet Compliance						
		NO		UNKNOWN						
		Eye Protection		Tint Compliance						
	_	NO	Severity	UNKNOWN						
9	001		ECTED SERIOUS INJUR							
		Ejected	Ejection Path NOT EJECTED/NOT APF	PLICABLE		Trapped/Extricated				
		Medical Transport	L	EMS Agency Identifier		EMS Run #				
		EMS GROUND		6000368 2408181224						
I			-	ort does not include any C II		0.10	ate 08/18/2024			

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Hospital ST CLARE HOSP				Date of Death		Time of Death				
	l		Distracted E	By Source								
		Distracted By NOT APPLICABLE (NOT DISTRACTED)										
		Distracted By Action NOT DISTRACTED										
		Non Motorist	Striking Unit	t #	Location							
		Prior Action		I								
		Action										
	Ļ											
⊢	NDIVIDUAL											
	IVI											
	ND											
		Action Other							To/From School			
			Suspected /		<u>م</u>	Suspected Drug Use						
	Ľ	Drug & Alcohol	NO			NO						
		Alcohol Test Given			Alcohol Test Type			Alcohol Test Results				
		TEST NOT GIVEN Drug Test Given			Drug Test Type	Drug Test Res						
	_	TEST NOT GIVEN										
5 6 Drug Type												
		Individual Condition										
		APPEARED NORM	ΔΙ									
	ļ	ndividual				Citations Issued	Sex					
		Passenger CINDY WHITE				0 FEMALE						
	NA	(920) 296-8994				Date of Birth	Race WHITE					
UNIT	DIVIDUAL	Address				Driver License Number						
		N7173 COUNTY ROBEAVER DAM, WI		s		STATE: WISCONSIN COUNTRY: UNITED STATES						
	_	,	,.	-								
	Saf	ety Equipment	On Duty Crash			Protective Gear						
		Row Seat Position				NONE						
		98 - NOT APPLICA	BLE	oourr oo								
		Helmet Use				Helmet Compliance UNKNOWN						
		Eye Protection				Tint Compliance						
NO UNKNOWN												
2	O O INJURY NO APPARENT INJURY NOT APPL					NOT APPLICABLE						
		Ejected NOT APPLICABLE		ection Patl	י TED/NOT APPL			Trapped/Extricated NOT TRAPPED				
		Medical Transport				EIGABLE INOT TRAFFED EMS Agency Identifier EMS Run #						
		NOT TRANSPORTED Hospital				Date of Death Time of Death						
								Crach Data	08/48/2024			

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			Distant at a Div C	_				
		Distracted By	Distracted By Source	9				
		Distracted By Action						
	l	Non Motorist	Striking Unit #	Location				
		Prior Action						
		Action						
	Ļ							
<u></u>	INDIVIDUAL							
LINU	NIC							
	ND							
	-							
		Action Other						To/From School
		-						
	L	Drug & Alcohol	Suspected Alcohol U NO	lse	Suspected Drug Use			
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	5	
6	002	Drug Type						
		Individual Condition						
			MAL					