### WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT BARABOO, WI 53913 (608) 356-4895

<u>G</u> 2	Document Number Override	Primary Crash Document #		Agency Crash Number SC24-09445A		Investigating Officer/Deputy DEPUTY B. SONN		
	Crash Date 08/25/2024	Crash Time 04:46 AM		Date Arrived <b>08/25/2024</b>		Time Arrived 05:00 AM		
QPG	Date Notified <b>08/25/2024</b>	Time Notified 04:46 AM		Total Units <b>01</b>		Total Injured 00	Total Killed <b>00</b>	
	On Emergency	it and Run	and Run Lane Closur		Work Zone	Trailer or	☐ Trailer or Towed ☐ R	
eTL)	Government Property	Active School Zone		School Bus Related NO		Tags		
	<b>▼</b> Reportable	Crash Type DT4000 (STANI	TANDARD CRASH)			Amended		Secondary Crash
	<b>Description</b>							

Diagram

Locations are approximate and not exact
Drawing not to scale

Reconstruction By

Photos By 9104

Additional Information
MEASUREMENTS, PHOTOS, DASH
CAMERA VIDEO, BODY CAMERA
VIDEO

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

ON 8/25/24 AT APPROXIMATELY 4:46 A.M. SAUK COUNTY DEPUTIES WERE DISPATCHED TO A CRASH ON CTY TK H NEAR LYNDON RD CALLED IN BY SIRUSXM CVS TELEMATICS. THE VEHICLE WAS LOCATED ON THE SOUTH SIDE OF CTY TK H, WEST OF LYNDON RD. THE DRIVER WAS IDENTIFIED VIA WI PHOTO DL. THE DRIVER CLAIMED THERE WAS A DEER IN THE ROADWAY AND HE HAD SWERVED TO AVOID IT. THE DRIVER CLAIMED HE WAS TRAVELING WESTBOUND ON CTY TK H FROM THE WISCONSIN DELLS. THE DRIVER DISPLAYED SIGNS OF IMPAIRMENT, BUT DENIED ANYTHING TO DRINK. SFST WAS CONDUCTED AND THE DRIVER WAS ARRESTED FOR OW! 1ST AND CITED FOR FAILING TO KEEP CONTROL OF THE VEHICLE. THE VEHICLE APPEARED TO START TO LEAVE THE NORTHER SHOULDER FOR WESTBOUND TRAVEL, AND CROSSED OVER THE DOUBLE YELLOW CENTER LINES, INTO THE SOUTHERN DITCH LINE FOR EASTBOUND TRAVEL. MEASUREMENTS WERE OBTAINED. THE VEHICLE STARTED TO LEAVE THE ROADWAY AT 155 FEET 2 IN FROM THE LYNDON RD STOP LINE TO THE BEGINNING YAW MARK. THE YAW MARKS WENT FROM THE NORTH SHOULDER TO SOUTH SHOULDER OF CTY TK H, MEASURING 400 FT 3 IN. FROM THE END OF THE YAW MARKS TO VEHICLE RESTING LOCATION (LEFT REAR TIRE) MEASURED AT 218 FT 11 IN.

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Crash Date 08/25/2024
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Location

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•	100	CTHH WB B FT W LYNDON RD			Latitude 43.618981507				804545	
	IN T	HE TOWN OF DELLO	NA			X Coordinate 269815.59375			Y Coord 483351	
	IN S	AUK COUNTY			Structure Type					
(	Cra	sh Scene								
•	First	Harmful Event				First Harm	nful Event Lo	cation		
	DIT				ON ROA					
		ner of Collision	LUCLE IN TRANSPORT			Light Cond				
		d Surface Condition(s)	HICLE IN TRANSPORT				DARK/UNLIT			
	DRY	` '				Roadway Factor(s)				
	NO	ronment Factor(s)			NONE					
						NONE				
		ther Condition(s)								
	CLE	AR								
	Anim	al Type					o Trafficway			
	_						CWAY - OI			
		h Classification - Location BLIC PROPERTY				Crash Classification - Jurisdiction NO SPECIAL JURISDICTION				
		l Land				Access Co		Special Study		
						NO CON	TROL			
•		in Interchange Area	Intersection	tion Type IN INTERSECTION						
	NO		NON-JUNCTION		NOI AN I	NIERSE	CTION			
		t Summary Status		I Vahiala On		:f:4:		Lust		
		Status RANSIT			Vehicle Operating As Classification  D CLASS			Unit Type AUTOMOBILE		
	Vehicle Type							Operating As Endorsements		
5	PAS	SENGER CAR								
•		Occs		Total # Citations Issued			Total Trailers  0		Total HazMat Types	
	1 Incui	ance?	Direction Of Travel	2		Speed Limi		0 imit Total Lanes		98
_		(NOWN	WESTBOUND	<b>V</b> Pre				2		,3
E I	Most Harmful Event: Collision With				Special Function			Emergency Motor Vehicle Use		
_	DITCH				NO SPECIAL FUNCTION			NOT APPLICABLE		
	Traffic Way				Traffic Control NO CONTROL			Traffic Control Inoperative/Missing NO		
	TWO-WAY, NOT DIVIDED Surface Type				Road Curvature			Road Grade		
	CONCRETE				CURVE LEFT			LEVEL		
		k Bus or HazMat	•				u .			
	NO									
	,	Vehicle								
		License Plate Number ASL2009		Plate Type  AUT - AUTOMOBILE		St <b>WI</b>	Country of Issuance UNITED STATES			
	Vehicle Identification Number			Make	Make		Year	Model SENTRA		
2	6						2021			
	Color						Bus Use			
	111	WHI - WHITE  Initial Contact Point			SD - SEDAN					
⊢				01 - RIGI	Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT FRONT, 03 - RIGHT SIDE MIDDLE, 04 - R REAR, 08 - LEFT SIDE REAR, 09 - LEFT MIDDLE, 11 - LEFT FRONT CORNER, 12			- RIGHT SIDE 6 12 12 FT SIDE 5 4 3 2 1		
UNIT	/EHICI	Extent Of Damage								
_	DISABLING DAMAGE									
					ingludo ony (					09/25/2024

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This report does not include any CJIS data.

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Crash Date **08/25/2024**Crash Time **04:46 AM** 

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		Towed Due To Damage TOWED DUE TO DISA	ABLING	G DAMA		Vehicle Removed By PLATTS WRECKER				
				Vehicle Factors						
		NEGOTIATING CURVE								
		Driver Prior Action Other			UNKNOWN					
TIND	VEHICLE	Driver Actions  EXCEED SPEED LIMI  DESIGNATED LANE,				I FAILURE TO CONTROL, RAN OFF ROADWAY, FAILED TO KEEP IN STEERING				
10	01	Owner Name ROMAN MA (608) 548-5482	ARTINE	z			Owner Address S1059 LITTLESOLDIER LN WISCONSIN DELLS, WI 53965, US			
	9	Sequence Of Ever	nts							
	7	Event DITCH								
	05	Event								
	03	Event								
	04	Event								
	ı	ndividual								
		Driver		_		Citations Issued Sex				
	Ļ	ROMAN MA (608) 548-5482	RTINE	Z		2 MALE				
╘	חס	(000) 040-0402	, 340-3402			Date of Birth Race				
TINO	INDIVIDUAL	Address S1059 LITTLESOLDIER LN WISCONSIN DELLS, WI 53965, US			Driver License Number	er				
	Saf	On Duty Crash fety Equipment				Safety Equipment				
		Row 01 - FRONT ROW	Seat Position 07 - LEFT		SHOULDER & LAP BELT					
		Helmet Use			Helmet Compliance					
		Eye Protection			Tint Compliance					
7	901	Injury Seventy			Airbag					
0	ŏ	<i>Injury</i> NO				DEPLOYED-COMI	BINATION			
		Ejected   Ejection Path   NOT EJECTED   NOT EJECTED/NOT APPLIC		LICABLE		Trapped/Extricated NOT TRAPPED				
	Medical Transport NOT TRANSPORTED					EMS Agency Identifier		EMS Run #		
		Hospital				Date of Death		Time of Death		
		Distracted By Source UNKNOWN								
		Distracted By Action UNKNOWN								
		Non Motorist	iking Uni	it #	Location					

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		Prior Action								
ĺ		Action								
	_									
	₹									
⊢	$\geq$									
L N	₹									
⊃	É									
	INDIVIDUAL									
	_									
ŀ		Action Other						To/From School		
		Action Caron						Ton rom concer		
ŀ			Suspected Alco	halllea	Suspected Drug Use					
	1	Drug & Alcohol	VFS	illoi Ose	NO					
	_	•								
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results			
		TEST GIVEN		BLOOD			PENDING			
ĺ		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Type					
		TEST NOT GIVEN								
_	Ξ	Drug Type								
2	90									
ĺ		Individual Condition								
UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL										
Violations										
			1 T-0	Ctatuta Number	December					
	2	UTC Number	Issue To? <b>001</b>	Statute Number <b>346.63(1)(a)</b>	Description OPERATING WHILE	UNDER THE IN	FLUENCE			
	0	BG943757								
	~	UTC Number	Issue To?	Statute Number	Description	VELUCI E LINEE	CONTROL			
	05	BG943758	001	346.57(2)	FAILURE TO KEEP	VEHICLE UNDER	K CONTROL			