

6TL0BFKDKF
24-12065

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 24-12065	Investigating Officer/Deputy DEPUTY B. FISH	
Crash Date 10/29/2024		Crash Time 08:00 PM	Date Arrived 10/29/2024	Time Arrived 08:32 PM	
Date Notified 10/29/2024		Time Notified 08:00 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 type="checkbox"/> Reportable	Crash Type DT4000 (STANDARD CRASH)			<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram 	Reconstruction By
	Photos By DEPUTY FISH
	Additional Information PHOTOS

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

UNIT 1 WAS TRAVELING NORTH ON HWY G WHEN THE PASSENGER SIDE FRONT WHEEL BEARING FAILED. WHEN THE WHEEL BEARING FAILED THE TIRE FEEL OFF. THE VEHICLE CAME TO A STOP. THERE WAS DAMAGE TO THE BREAK CALIPER AND UNDERCARRIAGE. THE OPERATOR JUST FIXED THE VEHICLE AND STATED THERE WAS NOT MORE THEN 1000 WORTH OF DAMAGE.

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Location

ON CTHG NB 1254 FT S OF FERN RD IN THE TOWN OF WASHINGTON IN SAUK COUNTY	Latitude 43.384264362	Longitude -90.127566407
	X Coordinate 246664.28125	Y Coordinate 4808240
	Structure Type NO STRUCTURE	

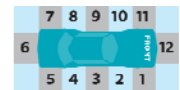
Crash Scene

First Harmful Event OTHER NON-COLLISION		First Harmful Event Location ON ROADWAY	
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 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	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER VAN				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? NO	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With OTHER NON-COLLISION		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 STRAIGHT		Road Grade UPHILL	
	Truck Bus or HazMat NO					

UNIT	Vehicle					
	01	License Plate Number AMU8543		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 2C4GP54L44R584703		Make CHRYSLER	Year 2004	Model VAN
		Color SIL - SILVER (ALUMINUM)		Body Style VN - VAN		Bus Use
		Initial Contact Point 14 - UNDERCARRIAGE		Vehicle Damage		
VEHICLE	Extent Of Damage DISABLING DAMAGE		14 - UNDERCARRIAGE			



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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By ARNESON SERVICE	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		BRAKES, POWER TRAIN, STEERING, TIRES, WHEELS	
	Driver Actions NO CONTRIBUTING ACTION			
01 01	Owner Name TYLER DUDENBOSTEL		Owner Address E4240A PROUTY RD HILLPOINT, WI 53937 , US	
	Sequence Of Events			
01 02 03 04	Event EQUIPMENT FAILURE (BLOWN TIRE, BRAKE FAILURE, ETC)			
	Event			
	Event			
	Event			
UNIT INDIVIDUAL	Individual			
	Driver TYLER DUDENBOSTEL		Citations Issued 0	Sex MALE
	Address E4240A PROUTY RD HILLPOINT, WI 53937 , US		Date of Birth	Race
			Driver License Number	STATE: WISCONSIN COUNTRY: UNITED STATES
01 001	Safety Equipment		On Duty Crash	
			Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	RESTRAINT USE UNKNOWN	
	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 NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				
Non Motorist		Striking Unit #	Location	

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UNIT INDIVIDUAL 01 001	Prior Action		
	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
	Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results
	Drug Type		
	Individual Condition APPEARED NORMAL		