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24-12930

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 24-12930, Investigating Officer/Deputy DEPUTY B. FISH, Crash Date 11/20/2024, Crash Time 10:53 PM, Date Arrived 11/20/2024, Time Arrived 10:55 PM, Date Notified 11/20/2024, Time Notified 11:11 PM, Total Units 01, Total Injured 00, Total Killed 00, On Emergency, Hit and Run, Lane Closure, Work Zone, Trailer or Towed, Reporting Threshold, Government Property, Active School Zone, School Bus Related NO, Tags, Reportable, Crash Type DT4000 (STANDARD CRASH), Amended, Secondary Crash

Description

Diagram, Reconstruction By, Photos By DEPUTY FISH, Additional Information PHOTOS, Non-Reportable

I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report. UNIT 1 WAS TRAVELING EAST ON HWY 12 NEAR THE 212 ON RAMP. THE VEHICLE CROSSED A BRIDGE THAT WAS ICE COVERED AND LOST CONTROL. THE VEHICLE ENTERED THE WEST DITCH. THE TWO OCCUPANTS OF THE CAR WERE NOT INJURED. THE CAR HAD NO DAMAGE PER THE DRIVER AND OWNER. THE VEHICLE WAS DRIVEN FROM THE DITCH BY THE MALE REGISTERED OWNER.

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Location

Table with 3 columns: Location details (ON USH12 EB, 364 FT S, OF USHL U EB, IN THE TOWN OF DELTON, IN SAUK COUNTY), Latitude (43.557508446), Longitude (-89.78137708), X Coordinate (275350.40625), Y Coordinate (4826487), Structure Type (NO STRUCTURE).

Crash Scene

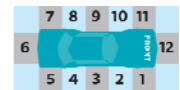
Table with 4 columns: First Harmful Event (DITCH), First Harmful Event Location (ROADSIDE), Manner of Collision (00 - NO COLLISION W/VEHICLE IN TRANSPORT), Light Condition (DARK/UNLIT), Road Surface Condition(s) (DRY, WET, SNOW, SLUSH, ICE), Roadway Factor(s) (NONE), Environment Factor(s) (WEATHER CONDITIONS), Weather Condition(s) (CLOUDY, SNOW), Animal Type, Relation To Trafficway (TRAFFICWAY - ON ROAD), Crash Classification - Location (PUBLIC PROPERTY), Crash Classification - Jurisdiction (NO SPECIAL JURISDICTION), Tribal Land, Access Control (PARTIAL CONTROL), Special Study, Within Interchange Area (NO), Junction Location (NON-JUNCTION), Intersection Type (NOT AN INTERSECTION).

Unit Summary

Table with 5 columns: Unit Status (IN TRANSIT), Vehicle Operating As Classification (D CLASS), Unit Type (AUTOMOBILE), Vehicle Type (PASSENGER CAR), Operating As Endorsements, Total Occs (2), Train/Bus # Recorded, Total # Citations Issued (0), Total Trailers (0), Total HazMat Types (0), Insurance? (YES), Direction Of Travel (EASTBOUND), Pre Crash Tire Mark, Speed Limit (65), Total Lanes (4), Most Harmful Event: Collision With (DITCH), Special Function (NO SPECIAL FUNCTION), Emergency Motor Vehicle Use (NOT APPLICABLE), Traffic Way (DIVIDED HWY MEDIAN W/BARRIER), Traffic Control (NO CONTROL), Traffic Control Inoperative/Missing (NO), Surface Type (CONCRETE), Road Curvature (CURVE LEFT), Road Grade (HILLCREST), Truck Bus or HazMat (NO).

Vehicle

Table with 4 columns: License Plate Number (AMT4172), Plate Type (AUT), St (WI), Country of Issuance (UNITED STATES), Vehicle Identification Number (2HGFA168X7H306043), Make (HOND), Year (2007), Model (CIVIC), Color (BLK - BLACK), Body Style (SD - SEDAN), Bus Use, Initial Contact Point (00 - NON-COLLISION), Vehicle Damage (00 - NO DAMAGE), Extent Of Damage (NO DAMAGE).



WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By	
	What Driver Was Doing <b>NEGOTIATING CURVE</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>102</b>			
01	Owner Name <b>NATHANIEL ALLEN BINDL</b>		Owner Address <b>1164 ACKER LN VERONA, WI 53593 , US</b>	
	<b>Sequence Of Events</b>			
01 02 03 04	Event <b>DITCH</b>			
	Event			
	Event			
	Event			
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>AMERICAN-FAMILY-INS-CO</b>		INDIVIDUAL <b>NATHANIEL BINDL</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	DRIVER <b>JACOB BINDL</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
			Date of Birth	Race
	Address <b>1164 ACKER LN VERONA, WI 53593 , US</b>		Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01 001	<b>Safety Equipment</b>		On Duty Crash	
			Safety Equipment	
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>RESTRAINT USE UNKNOWN</b>	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</b>
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier		EMS Run #
Hospital		Date of Death		Time of Death
<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>		
Distracted By Action <b>NOT DISTRACTED</b>				

WISCONSIN MOTOR VEHICLE CRASH REPORT

UNIT	INDIVIDUAL	<b>Non Motorist</b>		Striking Unit #	Location		
		Prior Action					
		Action					
01	001	Action Other					
		To/From School					
		<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>		
		Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type		Alcohol Test Results	
		Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type		Drug Test Results	
		Drug Type					
		Individual Condition <b>APPEARED NORMAL</b>					
		<b>Individual</b>					
		PASSENGER <b>LUCAS STRASSER</b>			Citations Issued <b>0</b>	Sex <b>MALE</b>	
		Date of Birth			Race <b>WHITE</b>		
Address <b>602 EAST VIEW CT VERONA, WI 53593 , US</b>			Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>				
01	002	<b>Safety Equipment</b>		On Duty Crash			
		Safety Equipment <b>RESTRAINT USE UNKNOWN</b>					
		Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</b>				
		Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
		<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>		
		Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</b>	
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier		EMS Run #			
Hospital		Date of Death		Time of Death			
<b>Distracted By</b>		Distracted By Source					
Distracted By Action							
<b>Non Motorist</b>		Striking Unit #	Location				

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

<b>UNIT</b>	<b>INDIVIDUAL</b>	Prior Action				
		Action				
		Action Other			To/From School	
		<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>	
		Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type		Alcohol Test Results
		Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type	Drug Test Results	
		Drug Type				
		Individual Condition				
		<b>APPEARED NORMAL</b>				