

6TL0D5DZ37
25-01320

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 25-01320		Investigating Officer/Deputy DEPUTY J. HUNTER	
Crash Date 02/12/2025		Crash Time 02:20 PM		Date Arrived 02/12/2025		Time Arrived 03:59 PM	
Date Notified 02/12/2025		Time Notified 03:52 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 DT4000 (STANDARD CRASH)				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

<p>Diagram</p>	Reconstruction By
	Photos By DEPUTY HUNTER
	Additional Information PHOTOS

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

UNIT 1 WAS E/B ON OPEN VIEW RD. IT HAD BEEN SNOWING FOR SEVERAL HOURS AND OPEN ROAD IS NOT A HEAVILY TRAFFICKED ROAD OR PRIORITY FOR PLOWING. OPERATOR OF UNIT 1 LOST CONTROL WHILE NAVIGATING A 90 DEGREE BEND IN THE ROAD. UNIT 1 ENTERED THE DITCH AND CAME TO REST ACROSS THE DITCH AND OVER A CULVERT. THERE WAS DAMAGE TO THE FRONT BUMPER AND THE TOW OPERATOR ADVISED ALL OF THE POWER STEERING FLUID HAD LEAKED OUT, AS WELL AS SUSPECTED SUSPENSION ISSUES.

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Location

ON OPEN VIEW RD 0.28 MI E OF STH23 EB IN THE TOWN OF WESTFIELD IN SAUK COUNTY	Latitude 43.46691918	Longitude -90.013954704
	X Coordinate 256199.6875	Y Coordinate 4817081
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event DITCH	First Harmful Event Location ROADSIDE	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAYLIGHT	
Road Surface Condition(s) WET, SNOW, SLUSH	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 NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION

Unit Summary

UNIT 01	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 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel SOUTHBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With DITCH		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 RIGHT	Road Grade LEVEL		
	Truck Bus or HazMat NO					

UNIT 01 VEHICLE	Vehicle				
	License Plate Number ATU4638	Plate Type AUT	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number JM1BK323881792805	Make MAZD	Year 2008	Model 3	
	Color WHI - WHITE	Body Style SD - SEDAN		Bus Use	
	Initial Contact Point 00 - NON-COLLISION	Vehicle Damage			
	Extent Of Damage DISABLING DAMAGE	05 - RIGHT REAR CORNER, 12 - FRONT, 14 - UNDERCARRIAGE			



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UNIT	VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By STEVES AUTO SERVICE		
		What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors		
		Driver Prior Action Other		NOT APPLICABLE		
		Driver Actions SPEED TOO FAST/COND				
01	01	Owner Name JENNIFER DELP (608) 495-4159		Owner Address E5970 SUNRISE RD LOGANVILLE, WI 53943 , US		
		Sequence Of Events				
UNIT	INDIVIDUAL	01	Event DITCH			
		02	Event			
		03	Event			
		04	Event			
UNIT	INDIVIDUAL	Policy Holder				
		Insurance Company PROGRESSIVE-ADVANCED-INSURANCE-CO		INDIVIDUAL JENNIFER DELP		
UNIT	INDIVIDUAL	Individual				
		DRIVER MARIAH DELP		Citations Issued 0	Sex FEMALE	
01	001	Date of Birth		Race WHITE		
		Address E5970 SUNRISE RD LOGANVILLE, WI 53943 , US		Driver License Number		
01	001	Safety Equipment		On Duty Crash		
		Row 01 - FRONT ROW		Seat Position 07 - LEFT		
				SHOULDER & LAP BELT		
		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		
		Hospital		EMS Run #		
		Date of Death		Time of Death		
		Distracted By				
		Distracted By Source UNKNOWN				
		Distracted By Action UNKNOWN				

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UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location	
		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				