

6TL09CGFD3
20-00670

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 20-00670	Investigating Officer/Deputy DEPUTY K. MUELLER	
Crash Date 01/17/2020		Crash Time 03:52 PM	Date Arrived 01/17/2020	Time Arrived 04:19 PM	
Date Notified 01/17/2020		Time Notified 03:54 PM	Total Units 01	Total Injured 04	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
	Additional Information NONE

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

UNIT 1 WAS DRIVING SOUTHWEST ON COUNTY RD PF. THE ROADS WERE SNOW COVERED. UNIT 1 ATTEMPTED TO NEGOTIATE THE CURVE BUT WAS UNABLE TO DO SO DUE TO DRIVING TOO FAST FOR CONDITIONS. ALL FOUR OCCUPANTS OF THE VEHICLE REPORTED PAIN AND POSSIBLE INJURIES.

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Location

ON CTHPF WB 22 FT S OF ORCHARD RD CONN IN THE TOWN OF FREEDOM IN SAUK COUNTY	Latitude 43.391602088	Longitude -89.919353762
	X Coordinate 263559.125	Y Coordinate 4808443
	Structure Type	

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) SNOW	Roadway Factor(s) NONE	
Environment Factor(s) WEATHER CONDITIONS		
Weather Condition(s) 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	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE		
	Vehicle Type (SPORT) UTILITY VEHICLE	Operating As Endorsements			
	Total Occs 4	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With TREE	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 DOWNHILL	
	Truck Bus or HazMat NO				

UNIT	VEHICLE	Vehicle			
		License Plate Number AGP1924	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1J4GL58K52W256590	Make JEEP	Year 2002	Model LIBERTY LI
		Color BLU - BLUE	Body Style UT - SPORT UTILITY VEHICLE		Bus Use
		Initial Contact Point 12 - FRONT	Vehicle Damage 12 - FRONT		
	Extent Of Damage FUNCTIONAL DAMAGE				

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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By MIKES TOWING		
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors		
	Driver Prior Action Other		TIRES		
	Driver Actions SPEED TOO FAST/COND				
01	01	Owner Name PEYTON DANIEL SORDAHL (608) 459-8003		Owner Address 210 S TAMARACK ST LONE ROCK, WI 53556 , US	
Sequence Of Events					
	01	Event DITCH			
	02	Event TREE			
	03	Event			
	04	Event			
UNIT	Policy Holder				
	Insurance Company ALLSTATE-INS-CO		Individual PEYTON SORDAHL		
UNIT INDIVIDUAL	Individual				
	Driver PEYTON DANIEL SORDAHL (608) 459-8003		Citations Issued 0	Sex MALE	
	Address 210 S TAMARACK ST LONE ROCK, WI 53556 , US		Date of Birth	Race	
	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES				
UNIT INDIVIDUAL	Safety Equipment		On Duty Crash		
	Row 01 - FRONT ROW		Seat Position 07 - LEFT	Safety Equipment SHOULDER & LAP BELT	
	Helmet Use		Helmet Compliance		
	Eye Protection		Tint Compliance		
	01 001	Injury		Injury Severity SUSPECTED MINOR 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 UNKNOWN			
Distracted By Action UNKNOWN					

WISCONSIN MOTOR VEHICLE CRASH REPORT

UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
01	001	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					
		Individual					
		Passenger HANNAH MAY MEADE (608) 475-4210			Citations Issued 0		Sex FEMALE
		Address 216 S MAPLE ST LONE ROCK, WI 53556 , US			Date of Birth Race WHITE		
Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES							
01	002	Safety Equipment		On Duty Crash			
		Safety Equipment SHOULDER & LAP BELT					
		Row 06 - UNKNOWN ROW	Seat Position 07 - LEFT				
		Helmet Use			Helmet Compliance		
		Eye Protection			Tint Compliance		
		Injury		Injury Severity SUSPECTED MINOR 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		
UNIT	INDIVIDUAL	Distracted By				Distracted By Source	
		Distracted By Action					
		Non Motorist		Striking Unit #	Location		

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UNIT	INDIVIDUAL	Prior Action			
		Action			
		Action Other		To/From School	
01	002	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			
		Individual			
		Passenger ALISON SUE GRUBER (608) 588-4577	Citations Issued 0	Sex FEMALE	
		Date of Birth	Race WHITE		
		Address S10111 KNOB RD PLAIN, WI 53577 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
		01	003	Safety Equipment	On Duty Crash
Row 01 - FRONT ROW	Seat Position 09 - RIGHT				
Helmet Use				Helmet Compliance	
Eye Protection				Tint Compliance	
Injury	Injury Severity POSSIBLE 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				
Distracted By Action					
01	003	Non Motorist	Striking Unit #	Location	
		Prior Action			

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UNIT INDIVIDUAL	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		
	Individual		
	Passenger SAMARA L GRUBER (608) 574-7442	Citations Issued 0	Sex FEMALE
	Date of Birth		Race WHITE
Address 1175 MAIN ST PLAIN, WI 53577 , US		Driver License Number	
UNIT INDIVIDUAL	Safety Equipment	On Duty Crash	Safety Equipment SHOULDER & LAP BELT
	Row 06 - UNKNOWN ROW	Seat Position 09 - RIGHT	
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	Injury	Injury Severity SUSPECTED MINOR 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		
Distracted By Action			
UNIT INDIVIDUAL	Non Motorist	Striking Unit #	Location
	Prior Action		

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UNIT INDIVIDUAL	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			
	01 004			