

6TL09QKRF8
20-00688

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 20-00688	Investigating Officer/Deputy DEPUTY S. STACEY	
Crash Date 01/17/2020		Crash Time 11:05 PM	Date Arrived 01/17/2020	Time Arrived 11:09 PM	
Date Notified 01/17/2020		Time Notified 11:09 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

<p>Diagram</p> <p>NOT TO SCALE</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 TRAVELING WEST BOUND ON USH 12. UNIT 1 LOST CONTROL OF THEIR VEHICLE DUE TO SNOWY ROAD CONDITIONS AND ENDED UP IN THE MEDIAN. UNIT 1 ATTEMPTED TO REMOVE THE VEHICLE FROM THE MEDIAN, BUT WAS UNABLE TO DO SO. UNIT 1 WAS TOWED BY CRAIG'S TOWING.

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Location

ON USH12 WB 782 FT S OF SHADY LANE RD IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude 43.544861989	Longitude -89.787312401
	X Coordinate 274823.875	Y Coordinate 4825098.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event DITCH	First Harmful Event Location ON ROADWAY	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DARK/UNLIT	
Road Surface Condition(s) WET, SNOW	Roadway Factor(s) ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)	
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	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? UNKNOWN	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre CrashTire 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 W/O TRAFFIC BARRIER	Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)	Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO				

UNIT	VEHICLE	Vehicle			
		License Plate Number AHJ4850	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1G1AL58F287271509	Make CHEVROLET	Year 2008	Model COBALT
		Color RED - RED	Body Style SD - SEDAN		Bus Use
		Initial Contact Point 11 - LEFT FRONT CORNER	Vehicle Damage 00 - NO DAMAGE		
	Extent Of Damage NO DAMAGE				

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UNIT VEHICLE	Towed Due To Damage TOWED BUT NOT DUE TO DISABLING DAMAG		Vehicle Removed By CRAIGS TOWING	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions SPEED TOO FAST/COND, FAILURE TO CONTROL, RAN OFF ROADWAY			
01	01	Owner Name CAITLIN M MORGAN (608) 393-1551		Owner Address 1012 MICHIGAN AVE WISCONSIN DELLS, WI 53965 , US
Sequence Of Events				
01	Event DITCH			
02	Event			
03	Event			
04	Event			
Individual				
UNIT INDIVIDUAL	Driver JUAN M HERNANDEZ (414) 248-4909		Citations Issued 0	Sex MALE
	Address 413 1/2 OAK ST BARABOO, WI 53913 , US		Date of Birth	Race HISPANIC
			Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
Safety Equipment				
		On Duty Crash	Safety Equipment	
Row 01 - FRONT ROW		Seat Position 07 - LEFT	SHOULDER & LAP BELT	
Helmet Use		Helmet Compliance		
Eye Protection		Tint Compliance		
01	001	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	Prior Action		
		Action		
01	001	Action Other		To/From School
		Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use NO
01	001	Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	Alcohol Test Results
		Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results
01	001	Drug Type		
		Individual Condition APPEARED NORMAL		
UNIT	INDIVIDUAL	Individual		
		Passenger GIOVANIS RODRIGUEZ (414) 839-1404	Citations Issued 0	Sex MALE
01	002	Date of Birth	Race WHITE	
		Address 1572 S 25TH ST MILWAUKEE, WI 53204 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
01	002	Safety Equipment	On Duty Crash	Safety Equipment
		Row 01 - FRONT ROW	Seat Position 09 - RIGHT	SHOULDER & LAP BELT
01	002	Helmet Use	Helmet Compliance	
		Eye Protection	Tint Compliance	
01	002	Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
01	002	Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #
		Hospital	Date of Death	Time of Death
01	002	Distracted By	Distracted By Source	
		Distracted By Action		
01	002	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	002					