

**20-01528**

**SAUK COUNTY SHERIFFS DEPARTMENT  
1300 LANGE COURT  
BARABOO, WI 53913  
(608) 356-4895**

Document Number Override		Primary Crash Document #		Agency Crash Number <b>20-01528</b>		Investigating Officer/Deputy <b>DEPUTY I. HANSON</b>	
Crash Date <b>02/10/2020</b>		Crash Time <b>11:00 AM</b>		Date Arrived <b>02/10/2020</b>		Time Arrived <b>11:20 AM</b>	
Date Notified <b>02/10/2020</b>		Time Notified <b>11:03 AM</b>		Total Units <b>01</b>		Total Injured <b>00</b>	Total Killed <b>00</b>
<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 <b>NO</b>		Tags	
<input type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Diagram	Reconstruction By
	Photos By
	Additional Information <b>NONE</b>

UNIT 1 WAS EAST ON CTH D. ANOTHER NON CONTACT CAR TURNED SOUTH ON ROCK ELM ROAD. TO AVOID A COLLISION UNIT 1 WENT STRAIGHT INTO A SNOWBANK AT THE INTERSECTION OF CTH D AND ROCK ELM ROAD. THE NON CONTACT VEHICLE CONTINUED WITHOUT STOPPING. THE NON CONTACT VEHICLE HAS WI REGISTRATION OF RE9453 WITH THE REGISTERED OWNER DANIEL W. THIEDING S6066 ROCK ELM ROAD, ROCK SPRINGS WI 53961. I ATTEMPTED PHONE CONTACT WITH DANIEL AND STOPPED BY THE RESIDENCE AS WELL WITH NO CONTACT. 9109

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**Location**

ON ROCK ELM RD 29 FT S OF CTHD WB IN THE TOWN OF WESTFIELD IN SAUK COUNTY	Latitude <b>43.445879566</b>	Longitude <b>-89.964535903</b>
	X Coordinate <b>260114.15625</b>	Y Coordinate <b>4814600.5</b>
	Structure Type	

**Crash Scene**

First Harmful Event <b>DITCH</b>	First Harmful Event Location <b>SHOULDER RIGHT</b>	
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DAWN</b>	
Road Surface Condition(s) <b>WET, SNOW</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>		
Weather Condition(s) <b>CLEAR</b>		
Animal Type	Relation To Trafficway <b>TRAFFICWAY - NOT ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>	Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land	Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>

**Unit Summary**

UNIT 01	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>		
	Vehicle Type <b>(SPORT) UTILITY VEHICLE</b>				Operating As Endorsements		
	Total Occs <b>3</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>		
	Insurance? <b>NO</b>	Direction Of Travel <b>EASTBOUND</b>	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit <b>55</b>	Total Lanes <b>2</b>		
	Most Harmful Event: Collision With <b>DITCH</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>		
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>		
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>CURVE LEFT</b>		Road Grade <b>LEVEL</b>		
	Truck Bus or HazMat <b>NO</b>						
	UNIT VEHICLE 01	<b>Vehicle</b>					
		License Plate Number <b>ACV3017</b>		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
Vehicle Identification Number <b>1D4RE4GG9BC740802</b>		Make <b>DODGE</b>	Year <b>2011</b>	Model <b>DURANGO CR</b>			
Color <b>WHI - WHITE</b>		Body Style <b>UT - SPORT UTILITY VEHICLE</b>		Bus Use			
Initial Contact Point <b>12 - FRONT</b>		Vehicle Damage  <b>12 - FRONT</b>					
Extent Of Damage <b>MINOR DAMAGE</b>							

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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>	
	What Driver Was Doing <b>SLOW/STOPPING</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
01	Owner Name <b>STEVEN P PAGEL (608) 415-3214</b>		Owner Address <b>S7267 COUNTY ROAD D LOGANVILLE, WI 53943 , US</b>	
	<b>Sequence Of Events</b>			
01 02 03 04	Event <b>DITCH</b>			
	Event			
	Event			
	Event			
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>STEVEN P PAGEL (608) 415-3214</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
	Address <b>S7267 COUNTY ROAD D LOGANVILLE, WI 53943 , US</b>		Date of Birth	Race <b>WHITE</b>
	Driver License Number		<b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01 001	<b>Safety Equipment</b>		On Duty Crash	
	Row <b>01 - FRONT ROW</b>		Seat Position <b>07 - LEFT</b>	Safety Equipment <b>SHOULDER &amp; LAP BELT</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>			
<b>Non Motorist</b>		Striking Unit #	Location	

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UNIT	INDIVIDUAL	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>	
01	001	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>			
UNIT	INDIVIDUAL	<b>Individual</b>			
		Passenger <b>LAURA LEE PAGEL</b> <b>(608) 415-3214</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>
		Address <b>S7267 COUNTY ROAD D</b> <b>LOGANVILLE, WI 53943 , US</b>		Date of Birth Race <b>WHITE</b>	
		Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>			
01	002	<b>Safety Equipment</b>		On Duty Crash	
		Row <b>01 - FRONT ROW</b>		Seat Position <b>09 - RIGHT</b>	
		Shoulder & Lap Belt <b>SHOULDER &amp; LAP BELT</b>			
		Helmet Use Helmet Compliance			
Eye Protection Tint Compliance					
01	002	<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	
Prior Action					

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UNIT 01	INDIVIDUAL	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>		
		<b>Individual</b>		
		Passenger <b>PAISLEY A PAGEL (608) 415-3214</b>	Citations Issued <b>0</b>	Sex <b>FEMALE</b>
		Date of Birth		Race <b>WHITE</b>
Address <b>S7267 COUNTY ROAD D LOGANVILLE, WI 53943 , US</b>		Driver License Number		
UNIT 01	INDIVIDUAL	<b>Safety Equipment</b>	On Duty Crash <b>EMT/FIRST-RESPONDER</b>	Safety Equipment <b>CHILD RESTRAINT SYSTEM - FORWARD FACING</b>
		Row <b>02 - SECOND 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
		Hospital		Date of Death
		Time of Death		
		<b>Distracted By</b>		Distracted By Source
Distracted By Action				
UNIT 01	INDIVIDUAL	<b>Non Motorist</b>	Striking Unit #	Location
		Prior Action		

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UNIT 01	INDIVIDUAL 003	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>			