WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Overrid	e Primar	Primary Crash Document # Crash Time 99:99		Agency Crash Number 20-01481 Date Arrived 02/09/2020			Investigating Officer/Deputy DEPUTY A. MEEKER Time Arrived 01:50 AM			
C3	Crash Date 02/09/2020										
s / D	Date Notified 02/09/2020	Time N 01:33			Total Ur 01	nits		Total Injured	t	Total Kille	ed
USE	On Emergency	Hit and R	un	Lane Closu	ıre	Worl	c Zone	Trailer	or T	Towed	Reporting Threshold
o i Luyb/DC	Government Property	Ac	ctive Scl	hool Zone	School NO	Bus Related	t	Tags			
	✓ Reportable	Crash DT400	Type 00 (STAI	NDARD CRASH	1)			Amend	ded		Secondary Crash
	Description =										
	Diagram				}		Drawi	ng not to		construction otos By	пву
							scale			ditional Info	rmation
				County F	RD K						
	, a sworn law enfo	orcement offic	er, agre	e that I have no	t added	any CJIS	data in this	report.			
	UNIT 1 WAS TRAVELING S UNIT 1 LEFT THE ROAD AI DRIVER WAS GONE ON AI FAILURE OF OCCUPANT T	ND STRUCK A G RRIVAL AND VEH	UIDE WIR	E FOR A UTILITY F S TOWED BY SHIE	POLE AND	SNAPPED NTACT MAD	THE POLE CAU E WITH REGIST	ISING SIGNIF	ICAN ⁻	T FRONT E	ND DAMAGE TO UNIT 1.

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L	_oc	ation —									
F	ON	THOMAS RD				Latitude			Longitud	de	
	0.55	MIE				43.52254	18021		-90.098		
		WHITE RD				X Coordin	ate		Y Coord	linate	
		HE TOWN OF IRONT	ON			249605.0			482351		
	IN S	AUK COUNTY				Structure Type					
						Structure	Туре				
(Cra	sh Scene									
Ī	First	Harmful Event				First Harm	nful Event Lo	ocation			
	UTIL	LITY POLE				ROADSI	DE				
f	Manı	ner of Collision				Light Cond	dition				
	00 -	NO COLLISION W/VI	EHICLE IN TRANSPORT			DARK/U	NLIT				
ŀ	Road	d Surface Condition(s)				Roadway	Factor(s)	_			
	DRY						. ,				
ŀ	Envi	ronment Factor(s)									
	NON	NE				NONE					
ŀ	Wea	ther Condition(s)									
	CLC	YDUC									
ŀ	Anim	nal Type					o Trafficwa	•			
L								OT ON ROA	D		
		h Classification - Location	1				ssification -				
L		BLIC PROPERTY				NO SPECIAL JURISDICTION					
	Triba	al Land				Access Control Special Study NO CONTROL			Special Study		
ŀ	Withi	in Interchange Area	Junction Location		Intersection Type						
	NO		NON-JUNCTION		NOT AN	N INTERSECTION					
į	Jnit	t Summary \blacksquare									
T	Unit	Status				Classification Unit Type					
	IN T	RANSIT		D CLASS		AUTOMOBILE					
; [cle Type					Operating As Endorsements				
		SENGER CAR									
	Total	Occs			I # Citations Issued		Total Trail	ers	Total Haz	l HazMat Types	
	02			1		0			0		
Ī	Insur	ance?	Direction Of Travel	Pre	CrashTire	e Speed Lin		nit	Total Lan	es	
	NO		SOUTHBOUND		Mark				02	02	
Ī		Harmful Event: Collision	With	Special Fur		TION		Emergency Motor Vehicle Use			
		LITY POLE			CIAL FUNC	IIUN	TION		NOT APPLICABLE		
ſ		ic Way		Traffic Control			Traffic Control Inoperative/Missing				
		D-WAY, NOT DIVIDED		NO CONTROL			NO				
		асе Туре	Road Curva				Road Grade				
L	` ,				IT			LEVEL			
	Truck Bus or HazMat NO										
1	,	Vehicle									
ı		License Plate Number	Plate Type	71 -		St	Country of Issuance				
ı		AFX3653	AUT - AU			WI	UNITED ST	ATES			
ı		Vehicle Identification Nu	Make			Year	Model				
	5 1G1ZT58N28F148227			CHEVRO	DLET		2008	MALIBU LT			
		Color			9		В				
		SIL - SILVER (ALUM	4D - 4DR	Body Style 4D - 4DR							
	щ	Initial Contact Point		Vehicle Damage							
1	리 12 - FRONT										
				01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT							
	主	Extent Of Damage		01 - RIGI	HT FRONT	CORNER	ł, 11 - LEF	T FRONT C	ORNER,	12 - FRONT	
	VEHICL	Extent Of Damage DISABLING DAMAG	BE	01 - RIGI	HT FRONT	CORNER	≀, 11 - LEF	T FRONT C	ORNER,	12 - FRONT	

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		Towed Due To Damage		Ve	hicle Removed By					
		TOWED DUE TO DISABLI	NG DAMAGE	SH	HIELDS TOWING					
What Driver Was Doing				Ve	hicle Factors					
		UNKNOWN			NOT ARRUGARI F					
		Driver Prior Action Other		NC	OT APPLICABLE					
		Driver Actions								
	ш	FAILURE TO CONTROL, F	FAILED TO KEEP IN	DESIGN	NATED LANE					
╘	CL									
LNO	VEHICLE									
_	VE									
					T =					
		Owner Name JARBWIN PEDRO MANZA	NARES		Owner Address S3463 THOMAS RD					
5	01				REEDSBURG, WI 53959 , US					
		Sequence Of Events								
	01	RUN OFF ROADWAY LEF	т							
	02	Event UTILITY POLE								
	03	Event								
		Event								
	04									
	-	ndividual								
		Driver			Citations Issued	Sex				
	٦٢	UNKNOWN UNKNOWN			0	MALE				
_	INDIVIDUAL				Date of Birth	Race				
N N	Σ	Address			Driver License Number	- I				
ر ر	ΝD	UNKNOWN REEDSBURG, WI 53959 , US								
	_									
		On Duty	Crash		Safety Equipment					
	Sat	fety Equipment	Oldon	,	Salety Equipment					
		Row	Seat Position		SHOULDER & LAP BELT					
		99 - UNKNOWN								
		Helmet Use			Helmet Compliance					
		Eye Protection			Tint Compliance					
_	Ξ	Injury Severity			Airbag					
0	90		PARENT INJURY		NON DEPLOYED					
		Ejected	Ejection Path			Trapped/Extricated				
			NOT EJECTED/NO			NOT TRAPPED				
		Medical Transport NOT TRANSPORTED			EMS Agency Identifier	EMS Run #				
			Date of Death	Time of Death						
		•								
		Distracted By Distracted	ed By Source							
		Distracted By Action								
		Non Motorist Striking t	Unit # Location							
		14011 WOLUITSE								

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		Prior Action								
UNIT	INDIVIDUAL	Action								
		Action Other					To/From School			
	L	Drug & Alcohol NO	ted Alcohol Use	Suspected Drug Use NO						
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Ty	/pe		Alcohol Test Results				
		Drug Test Given TEST NOT GIVEN	Drug Test Type)	Drug Test Results	S				
10	001	Drug Type								
		Individual Condition								
		NOT OBSERVED								
		Individual	ndividual							
		Passenger JARBWIN PEDRO MANZ	ANARES	Citations Issued 01						
_	INDIVIDUAL			Date of Birth		Race HISPANIC				
EN S	DIVI	Address S3463 THOMAS RD		Driver License Number	r	l				
	Z	REEDSBURG, WI 53959	, US	STATE: OTHER JU	STATE: OTHER JURISDICTION COUNTRY: NICARAGUA					
	Sat	On Duty	/ Crash	Safety Equipment						
		Row 01 - FRONT ROW	Seat Position 09 - RIGHT	SHOULDER & LAP	BELT					
		Helmet Use		Helmet Compliance						
		Eye Protection		Tint Compliance Airbag NON DEPLOYED						
2	005	Injury S	everity PPARENT INJURY							
		Ejected	Ejection Path	NON DEI EOTED		Trapped/Extricated				
		NOT EJECTED	NOT EJECTED/NOT AP			NOT TRAPPED				
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #				
		Hospital		Date of Death Time of Death		Time of Death				
		Distracted By Distract	ed By Source							
		Distracted By Action								
			II was							
		Non Motorist Striking	Unit # Location							
		Prior Action								

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		Action								
	_									
_	Ι									
LNO	⊒∣									
5	\geq									
	INDIVIDUAL									
								T		
		Action Other						To/From School		
	ı		Suspected Alco	hol Use	Suspected Drug Use					
	L	Drug & Alcohol	NO		NO					
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results			
		TEST NOT GIVEN								
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results				
5	002	Drug Type								
		Individual Condition								
		APPEARED NORM	APPEARED NORMAL							
	1	Violations								
	01	UTC Number	Issue To?	Statute Number 346.70(1)	Description	ΡΔΝΤ ΤΟ ΝΟΤΙΕ	Y POLICE OF ACCID	FNT		
	0	BB341082	002	070.70(1)	TAILORE OF OOOD		TO CEIGE OF ACOID	— 141		