

6TL0CTJN09
20-11425B

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 20-11425B	Investigating Officer/Deputy DEPUTY A. KULAS	
Crash Date 09/22/2020		Crash Time 07:45 PM	Date Arrived 09/22/2020	Time Arrived 08:01 PM	
Date Notified 09/22/2020		Time Notified 07:45 PM	Total Units 01	Total Injured	Total Killed
<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	

Location

ON CTHD NB 0.46 MI S OF SEELY CREEK RD IN THE TOWN OF WESTFIELD IN SAUK COUNTY	Latitude 43.38786888	Longitude -89.9731851	Lat/LongSource TLT/ILT	Access Control
	X Coordinate 259184.25	Y Coordinate 4808182.5	On Roadway Link ID# 4559435	On Roadway Link Offset 3301
	Override <input type="checkbox"/>	Tribal Land		Structure Type NO STRUCTURE

Crash Scene

First Harmful Event FENCE	First Harmful Event Location OFF ROADWAY, LOCATION UNKNOWN	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DARK/UNLIT	
Road Surface Condition(s) DRY	Environment Factor(s) NONE	
Roadway Factor(s) NONE	Weather Condition(s) CLEAR	
Animal Type	Relation To Trafficway NON TRAFFICWAY - OTHER	
Crash Classification - Location PRIVATE PROPERTY	Crash Classification - Jurisdiction PRIVATE PROPERTY	
Tribal Land	Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION

Unit Summary

01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type TRUCK		
	Vehicle Type UTILITY TRUCK/PICKUP TRUCK			Operating As Endorsements	
UNIT	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 4	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 0
01	Most Harmful Event: Collision With FENCE		Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way PARKING LOT OR PRIVATE PROPE		Traffic Control NO CONTROL	Traffic Control Inoperative/Missing NO	
	Surface Type DIRT		Road Curvature STRAIGHT	Road Grade LEVEL	
	Truck Bus or HazMat NO				

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UNIT INDIVIDUAL 01	Role DRIVER		Citations Issued 0	<input type="checkbox"/> Use Driver Address	Individual Type INDIVIDUAL			
	Last Name MARSON		First Name DEREK		Middle Initial SCOTT	Suffix		
	Street Address 301 KNIGHTSBRIDGE RD APT 3		Street Address 2		PO Box			
	City WAUNAKEE		State WI	Zip Code 53597	Country of Residence UNITED STATES			
	DOB [REDACTED]	Sex M	Race W	Hair BROWN	Eyes GREEN	Height 507	Weight 210	Phone Number (608) 224-9868 EXT.
	Driver's License Number [REDACTED]		State WI	License Jurisdiction STATE	Country of Issuance UNITED STATES			
	License Type NON-CDL DRIVER'S LICENSE		License Status VALID LICENSE		DL Expire Year 2022			
	Equipment	On Duty Accident		Safety Equipment				
	Row 01 - FRONT ROW	Seat Position 07 - LEFT		SHOULDER & LAP BELT				
	Helmet Use		Helmet Compliance					
Eye Protection		Tint Compliance						
UNIT INDIVIDUAL 01	Injury	Injury Severity NO APPARENT INJURY		Airbag NON DEPLOYED				
	Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICA		Trapped/Extricated NOT TRAPPED			
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #			
	Hospital		Date of Death		Time of Death			
	Non Motorist	Striking Unit #		Location		To/From School		
	Prior Action		Action					
	Distracted By Action NOT DISTRACTED							
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		Action Other					
	Drug & Alcoh	Individual Condition UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL						
	Suspected Alcohol Use YES		Suspected Drug Use YES					
Alcohol Test Given TEST GIVEN		Alcohol Test Type BLOOD		Alcohol Test Results PENDING				
Drug Test Given TEST GIVEN		Drug Test Type BLOOD		Drug Test Results PENDING				
Drug Type								
License Plate Number NP3961		Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES				
Vehicle Identification Number 3GTU2NEC5JG486751			Year 2018	Make GENERAL MOTORS CORP				
Model SIERRA		Body Style PK - PICKUP		Color BLK - BLACK				
Initial Contact Point 12 - FRONT								

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UNIT VEHICLE	Extent Of Damage FUNCTIONAL DAMAGE		Vehicle Damage 01 - RIGHT FRONT CORNER, 08 - LEFT SIDE REAR, 09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT		
	Towed Due To Damage TOWED BUT NOT DUE TO DISABLING DAMAG		Vehicle Factors NOT APPLICABLE		
	Vehicle Removed By STEVES AUTO SERVICE		Driver Prior Action Other		
	What Driver Was Doing GOING STRAIGHT		Driver Prior Action Other		Bus Use
	Driver Actions OPERATED MOTOR VEHICLE IN AGGRESSIVE/RECKLESS MANNER				
	<input checked="" type="checkbox"/> Vehicle Owner Same As Operator		<input checked="" type="checkbox"/> Use Operator Address		
	Organization Type INDIVIDUAL		Company Name		
	Last Name MARSON		First Name DEREK	Middle SCOTT	Suffix Date of Birth
	Street Address 301 KNIGHTSBRIDGE RD APT 3		Street Address2		PO Box
	City WAUNAKEE		St WI	Zip Code 53597	Country of Residence UNITED STATES
Telephone Number (608) 224-9868 EXT.					
01	Event FENCE				
02	Event				
03	Event				
04	Event				
01	UTC Number AE757701	Issue To? 001	Statute Number 346.63(1)(a)	Description OPERATING WHILE UNDER THE INFLUENCE(2ND)	
02	UTC Number AE757702	Issue To? 001	Statute Number 346.69	Description HIT AND RUN-PROPERTY ADJACENT TO HIGHWAY	
03	UTC Number AE757703	Issue To? 001	Statute Number 346.935(2)	Description POSSESS OPEN INTOXICANTS IN MV-DRIVER	
04	UTC Number AE757704	Issue To? 001	Statute Number 341.04(1)	Description NON-REGISTRATION OF AUTO, ETC	
UNIT HOL	Insurance Company PROGRESSIVE-CASUALTY-INS-CO		<input checked="" type="checkbox"/> Policy Holder Same As Owner		<input checked="" type="checkbox"/> Policy Holder Same As Driver
	Organization Type INDIVIDUAL	Last Name MARSON	First Name DEREK	Policy Holder Company	
Property Owner					
PROP OWNER 01	Individual DONALD NEIL ADAMS (608) 393-7273			Address S7107 COUNTY ROAD D LOGANVILLE, WI 53943 , US	
	Fixed Objects Struck				
01	Striking Unit 01	Struck Object FENCE		Structure Number	Damage Tag Number
Description					
Diagram					

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<p>NOT TO SCALE</p> <p style="text-align: center;">S7107 CTH D</p>	<p>Reconstruction By</p> <hr/> <p>Photos By</p> <hr/> <p>Additional Information CRIMINAL INCIDENT</p>
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UNIT 1 DROVE DOWN A LONG DRIVE WAY LOCATED AT S7107 CTH D. UNIT 1 DROVE THROUGH A FENCE. UNIT 1 THEN DROVE AROUND A BARN AND DROVE THROUGH THE FENCE IN ANOTHER LOCATION. SEE DEPUTY GALVANS REPORT FOR ADDITIONAL INFORMATION.

Signature _____

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

Law Enforcement Agency _____

Agency Space				
Officer Rank DEP	Officer Last Name KULAS	Officer First Name ANDREW	Officer Middle Name	Suffix
DOT Officer ID 9139		DNR Officer ID	Officer Badge Number 9139	
Officer EMail				
Local Agency Number	Law Enforcement Agency Jurisdiction SAUK		Law Enforcement Agency type COUNTY SHERIFF	
Law Enforcement Agency Name SAUK COUNTY SHERIFFS DEPTMEN			TAS Agency Name SAUK COUNTY SHERIFF	
Law Enforcement Agency Street Address 1300 LANGE COURT			Law Enforcement Agency Street Address2	
Law Enforcement Agency City BARABOO	LEA State WI	Law Enforcement Agency Zip Code 53913		

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Law Enforcement Agency Phone Number (608) 356-4895 EXT.	ORI Number WI0570000	BFUNC Agency 5600	TraCS Agency Number 205
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