### 6TL0BJ1GKP

20-13959

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Oveπide					ating Officer/Deputy  TY J. MACASKILL				
	Crash Date 12/12/2020	Crash Time 02:15 AM		Date Arrived 12/12/2020		Time Arrived 02:52 AM				
	Date Notified 12/12/2020					Total Injured	Total Injured Total Killed 00			
	On Emergency Hi	t and Run	Lane Close		☐ Work Zone	L	or Towe	d	Reporting Threshold	
-	Government Property	Property Active School Zone NO								
	Reportable	Crash Type DT4000 (STA	NDARD CRASH	l)		Amend	ed		Secondary Crash	
_	Description Diagram	<u> </u>								
							Reconstri		<b>,</b>	
							Photos By	<b>y</b>		
							NONE			
	Non Reportable									
ļ	I, a sworn law enforcement on 12/12/20 AT APPROXIMATELY						HT 1 WAS A	\TTE8#P	OTING TO NECOTIATE A	
	CURVE TO THE RIGHT, UNIT 1 ST.						11 + VA3 F	aii∈MP	THING TO NEGUTIATE A	

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	Location ====									
	ON CTHP EB				Latitude			Longitue	de	
	15 FT W		43.589488613			-89.815	648535			
	OF FIELDSTONE DR	L:		X Coordinate			Y Coordinate		linate	
	IN THE TOWN OF DELTO	272702.625			4830132					
		Structure Type								
					NO STR	JCTURE				
	Crash Scene									
	First Harmful Event				FirstHarm	ful Event Lo	cation			
	DITCH				ON ROA					
	Manner of Collision			Light Condition						
	00 - NO COLLISION W/VE	HICLE IN TRANSPORT			DARK/LIGHTED					
	Road Surface Condition(s)				Roadway	Factor(s)				
	SNOW									
	Environment Factor(s)				1					
	WEATHER CONDITIONS				NONE					
	1	Weather Condition(s)								
	SNOW	SNOW								
	Animal Type				Relation To Trafficway					
					TRAFFIC	O - YAW	N ROAD			
	Crash Classification - Location				Crash Classification - Jurisdiction					
	PUBLIC PROPERTY				NO SPECIAL JURISDICTION			T		
	Tribal Land			Access Control Special Study NO CONTROL			Special Study			
	Within Interchange Area		Intersection	ion Type						
	NO	NON-JUNCTION		NOT AN	INTERSE	CTION				
	Unit Summary -									
	Unit Status Vehicle Operating As C									
	IN TRANSIT D CLASS					AUTOMOBILE				
2	Vehicle Type PASSENGER CAR			Operating As Endorsements						
	Total Occs		7 - 10 - 11 - 11 - 11 - 11 - 11 - 11 - 1			railers Total HazMat Types		MatTypes		
	1	Direction Of Travel	0	0			0			
	Insurance?		Pre CrashTire			nit	TotalLanes			
LIND	UNKNOWN	Source	Mark 45			2				
5	Most Harmful Event: Collision With DITCH			Special Function NO SPECIAL FUNCTION			Emergency Motor Vehicle Use NOT APPLICABLE			
	Traffic Way Traffic Co						Traffic Control Inoperative/Missing			
	·			NO CONTROL			NO			
	Surface Type BLACKTOP (BITUMINOUS		Road Curvature  CURVE RIGHT			Road Grade LEVEL				
	Truck Bus or HazMat		CORVER				LEVEL			
	NO									
	Vehicle									
	License Plate Number			Plate Type St		St	Country of Issuance			
				AUT - AUTOMOBILE		WI	UNITED STATES			
_	Vehicle Identification Nu	Make	Make		Year	Model				
7	<b>a</b> 1G2ZG57N18411569	PONTIA	PONTIAC 200			G6				
	Color			Body Style Bus Use						
	BLK - BLACK			4D - 4DR						
_	Initial Contact Point			Vehicle Damage						
LNS	00 - NON-COLLISION  Extent Of Damage			00 - NO DAMAGE						
$\neg$	Extent Of Damage  NO DAMAGE									

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		Towed Due To Damage NOT TOWED		I .	ehicle Removed By PERATOR						
		What Driver Was Doing NEGOTIATING CURVE Driver Prior Action Other			ehicle Factors						
E	CLE	Driver Actions SPEED TOO FAST/CON	D								
TIND	VEHICL										
٤	01	Owner Name REFUGIA C SHEPPART (608) 683-1672			Owner Address 605 THOMPSON ST PORTAGE, WI 53901, I	US					
		L Sequence Of Events	<b>t</b>								
	5	Event DITCH									
	Event										
	03	Event									
	04	Total									
		Driver DELNATO D SHEPPARD			Citations Issued  0	I .	Sex <b>MALE</b>				
_	D.	(608) 683-1672			Date of Birth		Race BLACK				
N N	(608) 683-1672  Address 605 THOMPSON ST PORTAGE, WI 53901 , US				Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES						
	Saf	On Duty Crash Safety Equipment			Safety Equipment						
		Row 01 - FRONT ROW	SeatPo 07 - Li		SHOULDER & LAP BELT						
		Helmet Use			Helmet Compliance						
		Eye Protection			Tint Compliance						
٤	S	Injury Severity Injury NO APPARENT INJURY			Airbag NON DEPLOYED						
		Ejection Path NOT EJECTED NOT EJECTED/NOT AF					Trapped/Extricated NOT TRAPPED				
		Medical Transport NOT TRANSPORTED			EMS Agency Identifier		EMS Run#				
		Hospital			Date of Death		Time of Death				
		Distracted By NOT	cted By Source	e E (NOT DISTRAC	TED)						
		Distracted By Action	AFFLIVASL	.L (NO 1 013 1 KMC	,120)						
		NOT DISTRACTED Strikin	g Unit#	Location							
		. 10.1.7/0101151									

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l							
		Prior Action Prior Action					
Ì		Action					
	4						
	a						
UNIT	3						
_	a						
	INDIVIDUAL						
		Action Other					To/From School
		Action Other					TO/FIGHTSCHOOL
			1	I			
	,	Drug & Alcohol NO	Jse	Suspected Drug Use 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		
		TEŠT NOT GIVEN					
l	_	Drug Type					
01	001	Diag Type					
		Individual Condition					
		The state of the s					
		APPEARED NORMAL					
ĺ							

Wisconsin Motor Vehicle Crash

Form DT4000