WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Override	Primary Crash Document#	Agency 21-006	Crash Number 52	Investigating Officer/Deputy SERGEANT S. SCHRAM			
Crash Date 01/22/2021	Crash Time 06:46 PM	Date Ar 01/22/2		Time Arrived 07:02 PM			
Date Notified 01/22/2021	Time Notified 06:46 PM	Total Ur 01	nits	Total Injured 00	Total Kille	ed	
On Emergency	Hit and Run Lane C		Work Zone	Trailer or	Towed	Reporting Threshold	
Government Property	Active School Zone	NO School	Bus Related	Tags			
Reportable	Crash Type DT4000 (STANDARD CRA	ASH)		Amended	I	Secondary Crash	
Diagram Diagram					econstructio		
					hotos By		
N	on-reportable slide off			AN	dditional Info	ormation	
\$d	nent officer, agree that I have						
	HWY 23 AND BELIEVED THEY HAI ED TO DROVE OFF THE ROADWAY ROM THE SCENE.						

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Crash Date 01/22/2021

Crash Time 06:46 PM

	Location —								
	ON STH23 WB				Latitude			Longitud	łe
	1253 FT E		43.568707917				680666		
	OF LAKEVIEW RD		F	X Coordinate		Y Coordinate		inate	
	IN THE TOWN OF DELTO		271491.15625		4827862.5				
	IN SAUK COUNTY		<u> </u>	Structure Type					
						•			
	Crash Scene			'					
	FirstHarmfulEvent				First Harm	fulEventLo	ocation		
	DITCH				ROADSIE	DE			
	Manner of Collision				Light Condition				
	00 - NO COLLISION W/V	EHICLE IN TRANSPORT			DARK/UNLIT				
	Road Surface Condition(s)				Roadway Factor(s)				
	DRY								
	Environment Factor(s)								
	NONE				NONE				
	Weather Condition(s)								
	CLEAR								
	Animal Type				Polation T	o Trafficus			
	Animarrype		l l			on To Trafficway FFICWAY - NOT ON ROAD			
	Crash Classification - Locatio			Crash Classification - Jurisdiction					
	PUBLIC PROPERTY			NO SPEC	NO SPECIAL JURISDICTION				
	Tribal Land			Access Co				Special Study	
	Within Interchange Area	this internal and American			NO CONTROL Intersection Type				
	NO	NON-JUNCTION	l l			AN INTERSECTION			
	Unit Summary =								
	Unit Status Vehicle Operating As Clas						UnitType		
	IN TRANSIT D CLASS				AUTOMOBILE				
5	Vehicle Type		Operating As Endorsements			ments			
_	(SPORT) UTILITY VEHIC	1=	tal#Citations ssued TotalTrailers TotalHazMatTypes			14 4 T			
	Total Occs 02	1 otal# Citat	tions issued	0		0		wat iypes	
	Insurance? Direction Of Travel							CrashTire	-s
_	YES	WESTBOUND		Mark			02		-
	Most Harmful Event: Collision		Special Function			Emergency Motor Vehicle Use			
_	DITCH		NO SPECIAL FUNCTION			NOT APPLICABLE			
	Traffic Way	_		Traffic Control NO CONTROL			Traffic Control Inoperative/Missing		tive/Missing
	TWO-WAY, NOT DIVIDED	D					NO Road Grade		
				Road Curvature STRAIGHT			LEVEL		
	Truck Bus or HazMat	3,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,) RA(OH)						
	NO								
	Vehicle				*******	KKKKKKKK			
	License Plate Number		1 21		St	Country of Issuance			
	311WPU		AUT - AUTOMOBILE		WI	UNITED STATES			
	Vehicle Identification No. 2GNAXUEV4M6112		1		Year 2021	Model EQUINOX			
			Body Style Bus Use						
	Color	RED - RED			UT - SPORT UTILITY VEHICLE				
	THE CORE IN THE PROPERTY OF TH		1 -	RT UTILIT	Y VEHICL	.E			
ı	RED - RED		1 -		Y VEHICL	.E			
۱	RED - RED		UT - SPO Vehicle Da	ımage	Y VEHICL	.E			
LINO	RED - RED Initial Contact Point		UT - SPO	ımage	Y VEHICL	<u>.E</u>			

6TL0CVRP3N

21-00652

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		Towed Due To Damage TOWED BUT NOT DUE TO DISABLING DAMAG		Vehicle Removed By PLATTS WRECKER					
		What Driver Was Doing		Vehicle Factors					
		U TURN		NOT APPLICABLE					
		Driver Prior Action Other		NOT ALL ECABLE					
⊨	4	Driver Actions RAN OFF ROADWAY							
TIND	VEHICLE								
	10	Owner Name THOMAS F TURNER (608) 339-6120		Owner Address 1867 DAKOTA JCT FRIENDSHIP, WI 53934 , US					
		 Sequence Of Events							
	10	Event DITCH							
		Event							
	8								
	63	Event							
	75	Event							
⊨		Policy Holder							
INN		Insurance Company AMERICAN-AUTOMOBILE	-INS-CO	Individual THOMAS TURNER					
		Individual							
		ndividual Driver THOMAS F TURNER		Citations issued	Sex MALE				
		Driver		Citations Issued 00 Date of Birth	MALE Race				
INIT		Driver THOMAS F TURNER		00	MALE				
TINO	INDIVIDUAL	Driver THOMAS F TURNER (608) 339-6120	<u> </u>	00 Date of Birth	MALE Race WHITE				
TINO		Driver THOMAS F TURNER (608) 339-6120 Address 1867 DAKOTA JCT	<u> </u>	Date of Birth Driver License Number	MALE Race WHITE				
FINO	INDIVIDUAL	Driver THOMAS F TURNER (608) 339-6120 Address 1867 DAKOTA JCT FRIENDSHIP, WI 53934 , U	JS	Date of Birth Driver License Number	MALE Race WHITE				
HNO	INDIVIDUAL	Driver THOMAS F TURNER (608) 339-6120 Address 1867 DAKOTA JCT FRIENDSHIP, WI 53934 , U	JS Crash Seat Position	Drivert icense Number STATE: WISCONSIN COUNTRY: UI	MALE Race WHITE				
HNO	INDIVIDUAL	Driver THOMAS F TURNER (608) 339-6120 Address 1867 DAKOTA JCT FRIENDSHIP, WI 53934 , U Fety Equipment Row 01 - FRONT ROW	JS Crash	Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UI Safety Equipment SHOULDER & LAP BELT	MALE Race WHITE				
HNO	INDIVIDUAL	Driver THOMAS F TURNER (608) 339-6120 Address 1867 DAKOTA JCT FRIENDSHIP, WI 53934 , U Fety Equipment Row 01 - FRONT ROW Helmet Use	JS Crash Seat Position	Date of Birth Drivert icense Number STATE: WISCONSIN COUNTRY: UI Safety Equipment SHOULDER & LAP BELT Heimet Compliance	MALE Race WHITE				
TINO	INDIVIDUAL	Driver THOMAS F TURNER (608) 339-6120 Address 1867 DAKOTA JCT FRIENDSHIP, WI 53934 , U Fety Equipment Row 01 - FRONT ROW	JS Crash Seat Position	Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UI Safety Equipment SHOULDER & LAP BELT	MALE Race WHITE				
	INDIVIDUAL	Driver THOMAS F TURNER (608) 339-6120 Address 1867 DAKOTA JCT FRIENDSHIP, WI 53934 , U Pety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Sev	JS Crash Seat Position 07 - LEFT Verity PARENT INJURY	Date of Birth Drivert icense Number STATE: WISCONSIN COUNTRY: UI Safety Equipment SHOULDER & LAP BELT Heimet Compliance	MALE Race WHITE NITED STATES				
	Sa INDIVIDUAL	Driver THOMAS F TURNER (608) 339-6120 Address 1867 DAKOTA JCT FRIENDSHIP, WI 53934 , U Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Sev NO APP	Seat Position 07 - LEFT	Date of Birth Drivert icense Number STATE: WISCONSIN COUNTRY: UI Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag NON DEPLOYED	MALE Race WHITE				
	Sa INDIVIDUAL	Driver THOMAS F TURNER (608) 339-6120 Address 1867 DAKOTA JCT FRIENDSHIP, WI 53934 , U Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Second NO APP Ejected NOT EJECTED Medical Transport	JS Crash Seat Position 07 - LEFT Verity PARENT INJURY Ejection Path	Date of Birth Drivert icense Number STATE: WISCONSIN COUNTRY: UI Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag NON DEPLOYED	MALE Race WHITE NITED STATES Trapped/Extricated				
	Sa INDIVIDUAL	Driver THOMAS F TURNER (608) 339-6120 Address 1867 DAKOTA JCT FRIENDSHIP, WI 53934 , U Fety Equipment Row 01 - FRONT ROW Helmet Use Eye Protection Injury Sev NO APP Ejected NOT EJECTED	JS Crash Seat Position 07 - LEFT Verity PARENT INJURY Ejection Path	Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UI Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag NON DEPLOYED	MALE Race WHITE NITED STATES Trapped/Extricated NOT TRAPPED				
	Sa INDIVIDUAL	Driver THOMAS F TURNER (608) 339-6120 Address 1867 DAKOTA JCT FRIENDSHIP, WI 53934 , U FOR Equipment Row 01 - FRONT ROW HelmetUse Eye Protection Injury Second NOT EJECTED Medical Transport NOT TRANSPORTED Hospital	Seat Position 07 - LEFT verity PARENT INJURY Ejection Path NOT EJECTED/NOT AP	Date of Birth Driver License Number STATE: WISCONSIN COUNTRY: UI Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier	MALE Race WHITE NITED STATES Trapped/Extricated NOT TRAPPED EMS Run#				
	Sa INDIVIDUAL	Driver THOMAS F TURNER (608) 339-6120 Address 1867 DAKOTA JCT FRIENDSHIP, WI 53934 , U FOR Equipment Row 01 - FRONT ROW HelmetUse Eye Protection Injury Second NOT EJECTED Medical Transport NOT TRANSPORTED Hospital	Seat Position 07 - LEFT Verity PARENT INJURY Ejection Path NOT EJECTED/NOT AP	Date of Birth Drivert icense Number STATE: WISCONSIN COUNTRY: UI Safety Equipment SHOULDER & LAP BELT Heimet Compliance Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier Date of Death	MALE Race WHITE NITED STATES Trapped/Extricated NOT TRAPPED EMS Run#				

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		Striking Non Motorist	Unit#	Location					
		Prior Action		I					
		Action							
⊨	INDIVIDUAL								
UNIT									
		Action Other						To/From School	
	i	Drug & Alcohol NO	ed Alcohol U	Jse	Suspected Drug Use NO			•	
		AlcoholTestGiven TEST NOT GIVEN		Alcohol Test Type	2		Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results			
10	ē	Drug Type							
		Individual Condition							
		APPEARED NORMAL							
		Individual			Citations ssued		Sex		
	_	Passenger BARBARA ANN TURNER (608) 339-6120			00		FEMALE		
_	3	(000) 000 0120			Date of Birth		Race WHITE		
UNT	INDINIDUAL	Address 1867 DAKOTA JCT FRIENDSHIP, WI 53934, US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
	Sai	On Duty lety Equipment	Crash		Safety Equipment				
		Row Seat Position 09 - RIGHT Helmet Use Eye Protection			SHOULDER & LAP BELT				
					Helmet Compliance				
					Tint Compliance				
٦	200	Injury Severity NO APPARENT INJURY Ejected Ejection Path NOT EJECTED NOT EJECTED/NOT APP		NON DEPLOYED					
				LICABLE		Trapped/Extricated NOT TRAPPED			
		Medical Transport NOT TRANSPORTED			EMS Agency Identifier		EMS Run#		
		Hospital			Date of Death		Time of Death		
		Distracted By	ed By Source						
		Distracted By Action							
		 Non Motorist	Unit#	Location					
				1					

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I						
	Prior Action					
UNIT	Action					
	Action Other					To/From School
	Drug & Alcohol NO	Alcohol Use	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	(
9						
	Individual Condition					
	APPEARED NORMAL					