

6TL0B3P3HC
21-11297

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 21-11297		Investigating Officer/Deputy DEPUTY J. GREENWOOD	
Crash Date 11/24/2021		Crash Time 07:21 AM		Date Arrived 11/25/2021		Time Arrived 07:45 AM	
Date Notified 11/25/2021		Time Notified 07:26 AM		Total Units 02		Total Injured 01	Total Killed 00
<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 checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

Description

Diagram		Reconstruction By	
<p>Diagram showing vehicle positions and orientations. Unit 1 is eastbound, Unit 2 is westbound. Unit 1 crossed the centerline and collided with Unit 2. Unit 1 is in a ditch facing eastbound, and Unit 2 is in a ditch facing eastbound. A north arrow is present.</p>		Photos By 9136	
<p>STH 33</p> <p>NOT TO SCALE</p>		Additional Information PHOTOS	

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

ON 11/24/21 AT APPROX 0721, UNIT 1 WAS EASTBOUND IN HWY 33 AND UNIT 2 WAS WESTBOUND. UNIT 1 WAS ATTEMPTING TO PASS AN UNINVOLVED CAR. UNIT 1 CROSSED THE CENTERLINE. UNIT 2 SWERVED TO NOT HIT UNIT 1 HEAD-ON. UNIT 1 AND UNIT 2 COLLIDED. UNIT 1 CAME TO REST IN THE NORTH DITCH FACING EASTBOUND. UNIT 2 CAME TO REST IN THE NORTHBOUND DITCH FACING EASTBOUND. UNIT 1 DRIVER SUSTAINED MINOR INJURY TO HIS HEAD AND WAS TAKEN TO ST. CLARE HOSPITAL FOR EVALUATION.

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Location

ON STH33 EB 0.32 MI E OF CTHU EB IN THE TOWN OF FAIRFIELD IN SAUK COUNTY	Latitude 43.505244172	Longitude -89.628002358
	X Coordinate 287555.3125	Y Coordinate 4820279
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 02 - FRONT TO FRONT	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLOUDY		
Animal Type	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION

Unit Summary

UNIT 01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE		
	Vehicle Type (SPORT) UTILITY VEHICLE	Operating As Endorsements			
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 2	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT	Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED	Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)	Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO				

UNIT VEHICLE 01 01	Vehicle			
	License Plate Number 980GCT	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number JTMRK4DV7A5095496	Make TOYOTA	Year 2010	Model RAV4 SPORT
	Color RED - RED	Body Style LL - CARRYALL		Bus Use
	Initial Contact Point 11 - LEFT FRONT CORNER	Vehicle Damage 09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER		
Extent Of Damage DISABLING DAMAGE				

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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By BILLS TOWING	
	What Driver Was Doing OVERTAKE LEFT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions FAILED TO YIELD RIGHT-OF-WAY, IMPROPER OVERTAKING / PASSING LEFT			
01 01	Owner Name JOSEPH CLARK BAKER (608) 477-5893		Owner Address 1362 SPRINGBROOK DR BARABOO, WI 53913 , US	
	Sequence Of Events			
01 01	01	Event CROSS CENTERLINE		
	02	Event MOTOR VEH IN TRANSPORT		
	03	Event RUN OFF ROADWAY LEFT		
	04	Event DITCH		
UNIT	Policy Holder			
	Insurance Company PROGRESSIVE-CASUALTY-INS-CO		Individual JOSEPH BAKER	
UNIT INDIVIDUAL	Individual			
	Driver JOHN MICHAEL MCREA (608) 477-3030		Citations Issued 2	Sex MALE
	Address 1451 WINNEBAGO CIR # D BARABOO, WI 53913 , US		Date of Birth [REDACTED]	Race WHITE
			Driver License Number [REDACTED]	STATE: WISCONSIN COUNTRY: UNITED STATES
01 001	Safety Equipment		On Duty Crash	
			Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	NONE USED - VEHICLE OCCUPANT	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	Injury		Injury Severity SUSPECTED MINOR INJURY	Airbag DEPLOYED-FRONT
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED
Medical Transport EMS GROUND		EMS Agency Identifier 6000368		EMS Run #
Hospital ST CLARE HOSP		Date of Death		Time of Death
Distracted By		Distracted By Source UNKNOWN		
Distracted By Action		UNKNOWN		

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UNIT INDIVIDUAL	Non Motorist		Striking Unit #	Location		
	Prior Action					
	Action					
	Action Other				To/From School	
	Drug & Alcohol		Suspected Alcohol Use NO	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	
	Drug Type					
	Individual Condition APPEARED NORMAL					
	Violations					
01	001	UTC Number BC937137	Issue To? 001	Statute Number 343.44(1)(a)	Description OPERATING WHILE SUSPENDED	
02	01	UTC Number BC937138	Issue To? 001	Statute Number 347.48(2m)(c)	Description OPERATOR FAIL/HAVE PASSENGER/SEATBELTED	

Unit Summary

UNIT	02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE		
	Vehicle Type PASSENGER CAR				Operating As Endorsements			
	Total Occs 1		Train/Bus # Recorded		Total # Citations Issued 0		Total Trailers 0	
	Insurance? YES		Direction Of Travel WESTBOUND		<input type="checkbox"/> Pre Crash Tire Mark		Speed Limit 55	
	Total HazMat Types 0		Total Lanes 2		Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION	
	Emergency Motor Vehicle Use NOT APPLICABLE		Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL			
	Truck Bus or HazMat NO							
	Vehicle							
	02	02	License Plate Number ALN8797		Plate Type AUT - AUTOMOBILE		St WI	
Country of Issuance UNITED STATES		Vehicle Identification Number 3VWDZ7AJ4BM399032		Make VOLKSWAGEN		Year 2011		
Model JETTA		Color SIL - SILVER (ALUMINUM)		Body Style SD - SEDAN		Bus Use		

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UNIT VEHICLE	Initial Contact Point 10 - LEFT SIDE FRONT		Vehicle Damage 06 - REAR, 07 - LEFT REAR CORNER, 08 - LEFT SIDE REAR, 09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT		
	Extent Of Damage DISABLING DAMAGE		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By CRAIGS TOWING		
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors NOT APPLICABLE		
UNIT VEHICLE	Driver Prior Action Other		Driver Actions NO CONTRIBUTING ACTION		
	Owner Name ALAN TORRES ORTEGA (608) 477-2326		Owner Address 503 1/2 RIDGE ST BARABOO, WI 53913 , US		
UNIT VEHICLE	Sequence Of Events				
	01	Event MOTOR VEH IN TRANSPORT			
	02	Event RUN OFF ROADWAY RIGHT			
	03	Event DITCH			
UNIT VEHICLE	04	Event			
	Policy Holder				
UNIT INDIVIDUAL	Insurance Company AMERICAN-FAMILY-INS-CO		Individual ALAN TORRES ORTEGA		
	Individual				
UNIT INDIVIDUAL	Driver ALAN TORRES ORTEGA (608) 477-2326		Citations Issued 0	Sex MALE	
	Date of Birth [REDACTED]		Race HISPANIC		
	Address 503 1/2 RIDGE ST BARABOO, WI 53913 , US		Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES		
UNIT INDIVIDUAL	Safety Equipment		On Duty Crash		
	Safety Equipment		SHOULDER & LAP BELT		
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	Helmet Use		
	Helmet Compliance		Eye Protection		
Tint Compliance		Injury Severity NO APPARENT INJURY			
UNIT INDIVIDUAL	Airbag DEPLOYED-FRONT		Ejected NOT EJECTED		
	Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED		
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run#
	Hospital		Date of Death		Time of Death

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UNIT INDIVIDUAL 02 002	Distracted By Distracted By Source NOT APPLICABLE (NOT DISTRACTED)
	Distracted By Action NOT DISTRACTED
	Non Motorist Striking Unit# Location
	Prior Action
	Action
	Action Other To/From School
	Drug & Alcohol Suspected Alcohol Use NO 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
	Drug Type
	Individual Condition APPEARED NORMAL