6TL0BGSFH9 22-02065

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

									(000) 330-403
Docume	Document Number Override		Primary Crash Document#		/ Crash Number 065	Investigating Officer/Deputy DEPUTY D. KROLIKOWSKI			
Crash Da 03/05/20		Crash Time 12:34 PM		Date Ar 03/05/		Time Arrived 01:02 PM			
Crash Da 03/05/20 Date Not 03/05/20 On E		Time Notified 12:34 PM		Total U	nits	Total Injured	Total Kille	ed	
On E	Emergency	Hit and Run	Lane Clo	sure	☐ Work Zone	Trailer or	Towed		Reporting Threshold
	Government Property	Active S	chool Zone	School NO	Bus Related	Tags		•	
	ortable	Crash Type DT4000 (ST	ANDARD CRAS	SH)		Amended			Secondary Crash
Descri Diagram	-	•				<u> </u>	constructio		
		County Roll					otos By ditional Info	ormation	

DRIVER WAS DRIVING NORTH BOUND ON CO RD W WHEN HE SWERVED TO THE RIGHT TO AVOID A DEER THAT ENTERED THE ROADWAY. THE VEHICLE THEN

STRUCK A BRIDGE GUARDRAIL ON THE EAST SIDE OF THE BRIDGE.

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Location

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	ON OTHER NO			1			T		_	
	ON CTHW NB			Latitude 43.419239	402		Longit	ude :7709046		
	OF MAPLE HILL RD								_	
	IN THE TOWN OF FREEDO	OM		X Coordinate 261371.09375			Y Coordinate 4811593.5			
				Structure Ty NO STRUC	•					
	Crash Scene									
	First Harmful Event			First Harmfu	dEventi	ocation			_	
	BRIDGE RAIL			ON ROAD		CCation				
	Manner of Collision			Light Condit						
	00 - NO COLLISION W/VE	HICLE IN TRANSPORT		DAYLIGHT						
	Road Surface Condition(s)			Roadway Fa	actor(s)					
	WET									
	Environment Factor(s)									
	ANIMAL (S) IN ROADWAY			NONE						
	Weather Condition(s)									
	CLOUDY, RAIN									
	Animal Type				Relation To Trafficway TRAFFICWAY - ON ROAD				_	
	Crash Classification - Location PUBLIC PROPERTY			1	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION					
	TribalLand			Access Con				Special Study	_	
	Within Interchange Area	Junction Location	Interse	ction Type					_	
	NO	NON-JUNCTION	I	N INTERSEC	TION					
	Unit Summary		I						_	
	Unit Status		Vehicle Operating A	s Classification		UnitType			_	
	IN TRANSIT					AUTOMOBILE				
_	Vehicle Type				Operating As Endorsements				_	
0	PASSENGER VAN									
	Total Occs	Train/Bus#Recorded	Total#Citations Issu		d Total Trail		Total Ha	zMat Types		
	Insurance?	Direction Of Travel					TotalLa	nes	-	
—	YES	NORTHBOUND	Mark		45		2			
5	Most Harmful Event: Collision V BRIDGE RAIL	Special Function NO SPECIAL FUI	Special Function NO SPECIAL FUNCTION			Emergency Motor Vehicle Use NOT APPLICABLE				
	Traffic Way	Traffic Control			Traffic Control Inoperative/Missing		_			
	TWO-WAY, NOT DIVIDED		NO CONTROL			NO				
	Surface Type BLACKTOP (BITUMINOUS	1)	Road Curvature CURVE RIGHT				Road Grade LEVEL			
	Truck Bus or HazMat	·)	OSITE ITOTAL						_	
	NO									
	Vehicle									
	License Plate Number		Plate Type		ìt	Country of Is:		<u> </u>	131121	
	ACM9390	AUT - AUTOMOI				UNITED STATES				
5	Vehicle Identification Nun 2A4RR5DG0BR73932	Make CHRYSLER				Model TOWN & COU				
	Color	Body Style	1			Bus Use				
	SIL - SILVER (ALUMII Initial Contact Point	VN - VAN Vehicle Damage	VA - VAN					_		
⊨	Initial Contact Point 12 - FRONT Extent Of Damage	A CHARLE Dalliage					7 8 9 10 11			
	Extent Of Damage					1	6 12			
_	LAterit Or Darriage		12 - FRONT							
_	DISABLING DAMAGE	<u> </u>	12 - FRONT					5 4 3 2 1		

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		Towed Due To Damage		1	de Removed By					
		TOWED DUE TO DISABLI	NG DAMAGE	OWN						
		What Driver Was Doing NEGOTIATING CURVE		Vehic	de Factors					
		Driver Prior Action Other		NOT	APPLICABLE					
		Biver From Monor Curar								
		Driver Actions								
	Ш	FAILURE TO CONTROL								
FIN	≅									
\neg	VEHICLE									
		OwnerName			Owner Address	_				
5	5	UBALDO B JIMENEZ (608) 434-0134			330 PARKSIDE AVE BARABOO, WI 539					
_		, , , , , , , , , , , , , , , , , , , ,			,	,				
		Seguence Of Events								
		Event								
	5	BRIDGE RAIL								
	8	Event								
		Event								
	8	Lydin								
	3	Event								
⊨		Policy Holder								
IN		Insurance Company		Individual						
_		GEICO-CASUALTY-CO			UBALDO JIMENEZ					
		Individual Driver								
		UBALDO B JIMENEZ (608) 434-0134 Address 830 PARKSIDE AVE			Citations Issued Sex 0 MALE					
	3				te of Birth	Race	_			
╘	NDIVIDUAL				HISPANIC					
LNO	ã				Driver License Number					
	Z	BARABOO, WI 53913 , US	3	STATE: WISCONSIN COUNTRY: UNITED STATES						
		On Duty	Crash	Sa	fety Equipment					
		nfety Equipment			SHOULDER & LAP BELT					
		Row Seat Position 01 - FRONT ROW 07 - LEFT		SHOOLDEN WEAR DEET						
		HelmetUse		Helmet Compliance						
		Eye Protection		Tint Compliance						
_	5	Injury Se	verity	Airl	bag					
2	8	Injury no api	PARENT INJURY	- 1	ON DEPLOYED					
		Ejected	Ejection Path				Trapped/Extricated			
		NOT EJECTED Medical Transport	NOT EJECTED/NOT AP				NOT TRAPPED			
		NOT TRANSPORTED		EN	IS Agency Identifier		EMS Run#			
		Hospital		Da	te of Death		Time of Death			
		·								
		Distracted By NOT A	ed By Source	ACTE	D)					
		Distracted By Action	. L.OADEL (NOT DIOTR	479 FE	-,					
		NOT DISTRACTED								

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	Non Motorist Striking Unit#	Location				
	Prior Action					
UNIT	Action					
	Action Other					To/From School
	Drug & Alcohol NO	hol 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		
01 001	Drug Type	•		•		
	Individual Condition APPEARED NORMAL					