

6TL0C9H5LJ
22-02943

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 22-02943		Investigating Officer/Deputy DEPUTY M. TATE	
Crash Date 03/30/2022		Crash Time 07:50 PM		Date Arrived 03/30/2022		Time Arrived 08:04 PM	
Date Notified 03/30/2022		Time Notified 07:51 PM		Total Units 01		Total Injured 00	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	
		Photos By DEPUTY TATE	
		Additional Information PHOTOS	

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

UNIT 1 WAS STOPPED AT THE STOP SIGN AT CTY W AND CTY PF. UNIT 1 OPERATOR STATED HE TOOK A LEFT, SOUTH, ON TO CTY PF. UNIT 1 OPERATOR STATED HE ACCELERATED TO "MAKE SOME NOISE." UNIT 1 OPERATOR STATED HE THEN SWERVED FOR A DEER, WHICH CAUSED HIM TO LOSE CONTROL. UNIT 1 BEGAN TO FISHTAIL, ENTERED THE DITCH FACING NORTH, STRUCK A UTILITY POLE, AND CAME TO REST. UNIT 1 HAD DAMAGE TO THE PASSENGER SIDE FRONT HEADLIGHT AREA. UNIT 1 OPERATOR CITED FOR UNREASONABLE/IMPRUDENT SPEED.

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Location

ON CTHPF SB 162 FT S OF CTHW EB IN THE TOWN OF FREEDOM IN SAUK COUNTY	Latitude	Longitude
	43.445388764	-89.866671519
	X Coordinate	Y Coordinate
	268031.6875	4814268.5
Structure Type		

Crash Scene

First Harmful Event UTILITY POLE	First Harmful Event Location ROADSIDE	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DARK/UNLIT	
Road Surface Condition(s) WET	Roadway Factor(s) ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)	
Environment Factor(s) WEATHER CONDITIONS		
Weather Condition(s) RAIN		
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 TRUCK		
	Vehicle Type UTILITY TRUCK/PICKUP TRUCK	Operating As Endorsements			
	Total Occs 3	Train/Bus # Recorded	Total # Citations Issued 1	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel SOUTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With UTILITY POLE	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

UNIT VEHICLE 01	License Plate Number TC5487	Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1GC2KYC84BZ137752	Make CHEVROLET	Year 2011	Model SILVERADO
	Color WHI - WHITE	Body Style PK - PICKUP	Bus Use	
	Initial Contact Point 01 - RIGHT FRONT CORNER	Vehicle Damage 01 - RIGHT FRONT CORNER, 12 - FRONT		
	Extent Of Damage FUNCTIONAL DAMAGE			



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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By	
	What Driver Was Doing ACCELERATING IN ROAD		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions FAILURE TO CONTROL, OPERATED MOTOR VEHICLE IN AGGRESSIVE/RECKLESS MANNER			
01 01	Owner Name TERESA L MILLER (608) 604-5790		Owner Address 1118 CROSSING MEADOWS DR VIROQUA, WI 54665 , US	
	Sequence Of Events			
01 02 03 04	Event UTILITY POLE			
	Event			
	Event			
	Event			
UNIT	Policy Holder			
	Insurance Company AMERICAN-FAMILY-INS-CO		Individual TERESA MILLER	
UNIT INDIVIDUAL	Individual			
	Driver LAYNE AARON MILLER (608) 604-9774		Citations Issued 1	Sex MALE
	Address 1118 CROSSING MEADOWS DR VIROQUA, WI 54665 , 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		SHOULDER & LAP BELT	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	Helmet Compliance	
	Helmet Use		Tint Compliance	
	Eye Protection		Airbag NON DEPLOYED	
	Injury		Injury Severity NO APPARENT INJURY	Trapped/Extricated NOT TRAPPED
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		EMS Agency Identifier
Medical Transport NOT TRANSPORTED		Hospital		EMS Run #
Date of Death		Time of Death		
Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				

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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				
	UNIT INDIVIDUAL	Individual			
Passenger HANNAH BETHANY MILLER		Citations Issued 0	Sex FEMALE		
		Date of Birth [REDACTED]	Race WHITE		
Address 1514 RAINBOW DR RICHLAND CENTER, WI 53581 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
Safety Equipment		On Duty Crash	Safety Equipment		
Row 02 - SECOND ROW		Seat Position 07 - LEFT	SHOULDER & LAP BELT		
Helmet Use		Helmet Compliance			
Eye Protection		Tint Compliance			
UNIT INDIVIDUAL		Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
		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	
	Distracted By				
	Distracted By Source				
Distracted By Action					
UNIT INDIVIDUAL	Non Motorist		Striking Unit#	Location	

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UNIT	INDIVIDUAL	Prior Action	
		Action	
		Action Other	To/From School
01	002	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
		Individual	
		Passenger LOGAN PAUL OLSON	Citations Issued 0
	Sex MALE		
	Date of Birth [REDACTED]		
	Race WHITE		
Address 24670 GERALD LN RICHLAND CENTER, WI 53581 , US	Driver License Number [REDACTED]		
	STATE: WISCONSIN COUNTRY: UNITED STATES		
01	003	Safety Equipment	
		On Duty Crash	Safety Equipment
		Row 01 - FRONT ROW	Seat Position 09 - RIGHT
		SHOULDER & LAP BELT	
		Helmet Use	Helmet Compliance
		Eye Protection	Tint Compliance
		Injury	
		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
		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		
Distracted By			
Distracted By Source			
Distracted By Action			
Non Motorist			
Striking Unit#	Location		
Prior Action			

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UNIT INDIVIDUAL	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	UTC Number		Issue To?	Statute Number	Description
		BE614981		001	346.57(2)	UNREASONABLE AND IMPRUDENT SPEED