6TL0BC3B62 22-06807

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

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Document Number Override		Primary Crash Document#		Agency Crash Number 22-06807		Investigating Officer/Deputy DEPUTY W. VERTEIN			
Crash Date 07/15/2022		Crash Time 08:45 AM		Date Arrived 07/15/2022		Time Arrived 09:12 AM			
Date Notified 07/15/2022		Time Notified 09:03 AM		Total Units 01		Total Injured 01	Total Killed 00		
On Emergency Hit and Run Lane C		Lane Closu	Closure Work Zone		Trailer or	Towed	Reporting Threshold		
Government Property		Active Sc	hool Zone	School NO	Bus Related	Tags			
Crash Type DT4000 (STANDARD			NDARD CRASH	1)		Amended		Secondary Crash	

Description Diagram Reconstruction By Photos By Dyke Rd Additional Information NONE Not to scale Mailbox S11789 DYKE RD Utility Pole Tree

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

ON THE DESCRIBED DATE, TIME, AND LOCATION, UNIT 1 WAS TRAVELING SOUTHBOUND. WHILE TRAVELING SOUTHBOUND, THE OPERATOR HAD A DIABETIC MEDICAL EMERGENCY AND ITS BELIEVED HE PASSED OUT. THE OPERATOR LOST CONTROL OF UNIT 1. UNIT 1 ENTERED THE WESTERNMOST DITCH LINE WHERE IT STRUCK A MAILBOX. UNIT 1 THEN CROSSED THE ROAD AND ENTERED THE EASTERNMOST DITCH LINE WHERE IT STRUCK A UTILITY POLE AND ALSO A LARGE TREE STUMP. THE OPERATOR HAD FACIAL INJURIES AND WAS TRANSPORTED TO A HOSPITAL.

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Location										
ON DYKE RD					Latitude			Longitue	de	
1223 FT N					43.21679613 -90.132672242			2672242		
OF CTHJJ SB					X Coordin	ate		Y Coord	linate	
IN THE TOWN OF SPRING GREEN						245552.53125 4789656				
IN SAUK COUNTY					Structure					
					ı	UCTURE				
					110 0111					
Crash Scene										
First Harmful Event					FirstHarm	ful Event L	ocation			
MAILBOX					ROADSI	DE				
Manner of Collision					Light Condition					
00 - NO COLLISION W/VE	HICLE IN TRANSPORT				DAYLIGHT					
Road Surface Condition(s)					Roadway					
					Stoadway	s actor(s)				
WET										
Environment Factor(s)					1					
NONE					NONE					
Weather Condition(s)										
CLOUDY, RAIN										
Animal Type					Relation To Trafficway					
						CWAY - O				
Crash Classification - Location							Jurisdiction			
PUBLIC PROPERTY					NO SPECIAL JURISDICTION					
Tribal Land					I '			Special Study		
					NO CONTROL					
Within Interchange Area	Junction Location			Intersection	on Type					
NO	NON-JUNCTION			NOT AN	INTERSECTION					
Closure Type			Reas	ons for Clos	Closure					
FULL CLOSURE										
Date Initial Lane/Rd Closed	Time Initial Lane/Rd Close	ed	LAW	ENFORC	EMENT					
07/15/2022	09:01 AM									
Date All Lanes Open	Time All Lanes Open		Date 8	Scene Clear	eared Time Scene Cleared					
07/15/2022	11:15 AM		07/15/2022 1			1:20 AM				
Unit Summary =										
Unit Status		I \/ohi	ala Ona	oratina As C	lassification		UnitType			
IN TRANSIT			Vehicle Operating As Class D CLASS				TRUCK			
		- D C	D CLASS							
Vehicle Type	TD:: 0:/						Operating A	s ⊨ndorse	ments	
UTILITY TRUCK/PICKUP						I =				
Total Occs	Train/Bus#Recorded	- 1	I# Citat	tions Issued		Total Trai	lers		MatTypes	
1		0				0		0		
Insurance?	Direction Of Travel		Pre	CrashTire		Speed Lir	mit	TotalLan	es	
UNKNOWN	SOUTHBOUND	***************************************		Mark		45		2		
Most Harmful Event: Collision	With		cial Fun		TION		Emergency			
TREE		NO	NO SPECIAL FUNCTION			NOT APPLICABLE				
Traffic Way 7				Traffic Control		Traffic Contr		rol Inoperative/Missing		
TWO-WAY, NOT DIVIDED	NO	NO CONTROL			NO					
Surface Type			Road Curvature			Road Grade				
BLACKTOP (BITUMINOUS)			CURVE RIGHT				LEVEL			
Truck Bus or HazMat										
NO										
Vehicle			ppppp							
		Ta:	- T			St	Country of to	anc-		
License Plate Number SY2613			te Type		·¥	WI	Country of Iss			
	1		LTK - LIGHT TRUCK		· f \		UNITED STATES			
Vehicle Identification Nu 3GCUKREH1EG3497			Make CHEVROLET			Year 2014	Model SLV			
JUDGUNKER LEG349/	JZ	ILH	こったい	L∈ i		/U:4	I JEV			

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		Color	Body Style		Bus Use	Use					
		RED - RED		PK - PICKUP							
	LLI.	Initial Contact Point		Vehicle Damage							
_		01 - RIGHT FRONT CORNER				7 8 9 10 11					
N	≅		`	01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE			6 12				
⋾	VEHICLE	Extent Of Damage DISABLING DAMAGE	FRONT, 07 - LEFT REAR CORNER, 08 - LEFT SIDE REAR, 09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRO								
	7	Towed Due To Damage		Vehicle Removed By	•						
		TOWED DUE TO DISABLING	DAMAGE	GEORGES AUTO BO	YOU						
		What Driver Was Doing		Vehicle Factors							
		NEGOTIATING CURVE		NOT APPLICABLE							
		Driver Prior Action Other		NOT AFFERCABLE							
		Driver Actions									
	щ	FAILURE TO CONTROL, RAN OFF ROADWAY, FAILED TO KEEP IN DESIGNATED LANE, OTHER CONTRIBUTING ACTION									
≒	EHICLE										
IND	I										
	5										
		OwnerName		Owner Address							
_		CURTIS RAYMOND PETERS	ON	4966 STATE ROAD 23 DODGEVILLE, WI 53533 , US							
2	5	(608) 935-9023									
		Sequence Of Events									
	5	Event MAILBOX									
	8	Event RUN OFF ROADWAY LEFT	AY LEFT								
	8	Event									
		Fyeat									
	2	TREE									
		Individual									
		Driver CURTIS RAYMOND PETERS	ON	Citations issued 0	Sex MALE	•					
	4	(608) 935-9023		Date of Birth							
⊢	8			Date of Bills	Race WHITE						
ENS.	NDIVIDUA	Address		Driver License Number							
_	Ź	4966 STATE ROAD 23 DODGEVILLE, WI 53533 , U	S	STATE: WISCONSIN COUNTRY: UNITED STATES							
		, ,									
		l On Duty Cr	ash	Safety Equipment							
	Sai	ety Equipment		SHOULDER & LAP BELT							
		Row	Seat Position								
		01 - FRONT ROW	07 - LEFT								
		Helmet Use		Helmet Compliance							
		Eye Protection		TintCompliance							
_	_	Injury Seve	rity	Airbag							
2	8	Injury SUSPECT	FED MINOR INJURY	DEPLOYED-COMBINATION							
		1 '	ectionPath OT EJECTED/NOT APF	PLICABLE		Trapped/Extricated NOT TRAPPED	••				
		Medical Transport		EMS Agency Identifie	r	EMS Run#					
		EMS GROUND		6000554							
		Hospital UPLAND HILLS HEALTH		Date of Death Time of Death							
		OF EARLY FREED REALIST									

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		Distracted	Distracted By Source NOT APPLICABL	E (NOT DISTRA	CTED)			
		Distracted By Acti NOT DISTRAC						
		Non Motor	Striking Unit#	Location				
		Prior Action		•				
		Action						
	AL							
	INDIVIDUAL							
_								
		Action Other						To/From School
	ì	Drug & Alcoh	Suspected Alcohol L	Jse	Suspected Drug Use NO			
		Alcohol Test Give		Alcohol Test Type	<u> </u>		Alcohol Test Results	
		Drug Test Given		Drug Test Type		Drug Test Results	3	
5	100	Drug Type						
0	Individual Condition CONFUSED OR DISORIENTED (NON LUCID)							
	_			(LUCID)				
ا		perty Owne			Address S11789 DYKE RD			
OWNER C	(608	3) 574-3667	ULSEN		SPRING GREEN, WI 5	3588 , US		
	Fixe	ed Objects Si	ruck					o otologicko otologisko otologisko otologisko otologisko otologisko otologisko otologisko otologisko otologisko
	5	Striking Unit	Struck Object MAILBOX					Damage Tag Number NA
		perty Owne						
05		anization/Company	•		Address 4902 N BILTMORE			
PROP OWNER					MADISON, WI 53707	1077, US		
		ed Objects St	truck	***********		********		
	62	Striking Unit	Struck Object UTILITY POLE					Damage Tag Number NA
		perty Owne						
03		ernment WNSHIP OF SPR			Address S12442 E PRAIRIE VIE	EW RD		
PROP OWNER	(608	3) 588-3235			PO BOX 445 SPRING GREEN, WI 5	3588 , US		
	Fixe	ed Objects Si	truck			accaecaecaecae		
	8	Striking Unit	Struck Object TREE					Damage Tag Number NA
		~ .						