

6TL0D9428W
22-09384

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 SC22-09384	Investigating Officer/Deputy DEPUTY M. PETERSON	
Crash Date 09/19/2022		Crash Time 99:99	Date Arrived 09/19/2022	Time Arrived 07:17 PM	
Date Notified 09/19/2022		Time Notified 06:51 PM	Total Units 02	Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input checked="" 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
	Additional Information NONE

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

UNIT 1 WAS TRAVELING SOUTHBOUND ON CTH G WHEN UNIT 2 APPROACHED FROM THE REAR AT A HIGH RATE OF SPEED. UNIT 2'S FRONT BUMPER THEN COLLIDED WITH UNIT 1'S REAR BUMPER. UNIT 2 THEN SLOWED DOWN AND CONDUCTED A U-TURN AND DROVE AWAY. UNIT 1 CONTINUED SOUTHBOUND AND STOPPED AT ANOTHER LOCATION TO REPORT THE CRASH. THIS CRASH WAS REPORTED AS A ROAD RAGE INCIDENT AND UNIT 2 HAS NOT BEEN IDENTIFIED.

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Location

ON CTHG SB 0.27 MI N OF HAGEMANN RD IN THE TOWN OF WOODLAND IN SAUK COUNTY	Latitude 43.619333755	Longitude -90.241321814
	X Coordinate 238467.265625	Y Coordinate 4834700.5
	Structure Type NO STRUCTURE	

Crash Scene

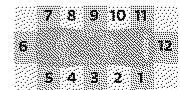
First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 03 - FRONT TO REAR	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLOUDY		
Animal Type	Relation To Trafficway TRAFFICWAY - 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 PASSENGER CAR	Operating As Endorsements			
	Total Occs 2	Train/Bus # Recorded	Total # Citations Issued 0	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 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

UNIT VEHICLE 01	License Plate Number 137318E	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 4E3AK44Y8SE126823	Make EAGLE	Year 1995	Model TALON ESI
	Color PLE - PURPLE	Body Style 2H - HATCHBACK 2 DOOR	Bus Use	
	Initial Contact Point 06 - REAR	Vehicle Damage		
	Extent Of Damage FUNCTIONAL DAMAGE	06 - REAR		



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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
01 01	Owner Name MICHAEL GLENN BALEY (608) 415-8386		Owner Address 14347 SEEP DR CAZENOVIA, WI 53924 , US	
	Sequence Of Events			
01 02 03 04	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
	Event			
UNIT	Policy Holder			
	Insurance Company AMERICAN-FAMILY-CONNECT-INS-CO		Individual MICHAEL BALEY	
UNIT INDIVIDUAL	Individual			
	Driver MICHAEL GLENN BALEY (608) 415-8386		Citations Issued 0	Sex MALE
	Address 14347 SEEP DR CAZENOVIA, WI 53924 , 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	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 NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				

WISCONSIN MOTOR VEHICLE CRASH REPORT

UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
		Action Other				To/From School	
01	001	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 EMILY KATHRYN MICHEL (608) 462-3844			Citations Issued 0	Sex FEMALE	
		Address S220 COUNTY ROAD G WONEWOC, WI 53968 , US			Date of Birth [REDACTED]	Race WHITE	
		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
		Safety Equipment		On Duty Crash	Safety Equipment SHOULDER & LAP BELT		
Row 01 - FRONT ROW	Seat Position 09 - RIGHT						
Helmet Use		Helmet Compliance					
Eye Protection		Tint Compliance					
01	002	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				

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UNIT	INDIVIDUAL	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	
01	002	Drug Type	
		Individual Condition	
		APPEARED NORMAL	

Unit Summary

UNIT	02	Unit Status HIT AND RUN		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	
		Total HazMat Types 0		Insurance? UNKNOWN		Direction Of Travel UNKNOWN		<input type="checkbox"/> Pre Crash Tire Mark	
		Speed Limit 55		Total Lanes 2		Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT			
		Special Function UNKNOWN				Emergency Motor Vehicle Use UNKNOWN			
		Traffic Way UNKNOWN				Traffic Control UNKNOWN			
		Traffic Control Inoperative/Missing UNKNOWN				Surface Type UNKNOWN			
		Road Curvature UNKNOWN				Road Grade UNKNOWN			
		Truck Bus or HazMat NO							

Vehicle

UNIT	VEHICLE	02	02	License Plate Number		Plate Type	St	Country of Issuance																
				Vehicle Identification Number		Make	Year	Model																
				Color		Body Style		Bus Use																
				Initial Contact Point 99 - UNKNOWN		Vehicle Damage			<table border="1"> <tr><td>7</td><td>8</td><td>9</td><td>10</td><td>11</td></tr> <tr><td>6</td><td></td><td></td><td></td><td>12</td></tr> <tr><td>5</td><td>4</td><td>3</td><td>2</td><td>1</td></tr> </table>	7	8	9	10	11	6				12	5	4	3	2	1
				7	8	9	10	11																
				6				12																
				5	4	3	2	1																
				Extent Of Damage VEHICLE NOT AT SCENE		16 - VEHICLE NOT AT SCENE																		
Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR																						
What Driver Was Doing GOING STRAIGHT																								

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UNIT VEHICLE	Driver Prior Action Other		Vehicle Factors UNKNOWN		
	Driver Actions UNKNOWN				
	Owner Name		Owner Address		
02	02				
Sequence Of Events					
UNIT INDIVIDUAL	01	Event MOTOR VEH IN TRANSPORT			
	02	Event			
	03	Event			
	04	Event			
UNIT INDIVIDUAL	Driver		Citations Issued 0	Sex	
	Address		Date of Birth	Race	
			Driver License Number		
UNIT INDIVIDUAL	Safety Equipment		On Duty Crash		
	Row 99 - UNKNOWN		Seat Position	NONE USED - VEHICLE OCCUPANT	
	Helmet Use		Safety Equipment		
	Eye Protection		Helmet Compliance		
			Tint Compliance		
	Injury		Injury Severity NO APPARENT INJURY	Airbag NOT APPLICABLE	
	Ejected NOT APPLICABLE		Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT APPLICABLE
Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #	
Hospital		Date of Death		Time of Death	
UNIT INDIVIDUAL	Distracted By		Distracted By Source		
	Distracted By Action				
	Non Motorist		Striking Unit #	Location	
Prior Action					

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UNIT INDIVIDUAL 02 003	Action		
	Action Other		To/From School
	Drug & Alcohol	Suspected Alcohol Use	Suspected Drug Use
	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 NOT OBSERVED		