6TL0B7D6W8

22-10570

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash Document # Crash Time 12:08 PM Time Notified 12:08 PM		Agency Crash Number 22-10570 Date Arrived 10/23/2022 Total Units 01		Investigating Officer/Deputy DEPUTY S. ELLICKSON Time Arrived 12:16 PM			
200	Crash Date 10/23/2022								
6TL0B7D6W8	Date Notified 10/23/2022						Total Injured Total Killed		1
0.87	On Emergency	and Run	Lane Closu		Work Zone	Traile	er or Tov	wed	Reporting Threshold
6TL	Government Property	Active Sc	chool Zone	School NO	Bus Related	Tags			
-	✓ Reportable	Crash Type DT4000 (STA	NDARD CRASH	I)		Amen	ded		Secondary Crash
	Description						-		
	Diagram				Not to Scale		Photo	onal Inform	
	✓ I, a sworn law enforceme	nt officer, agr	ee that I have no	ot addec	I any CJIS data in th	is report.			
	UNIT 1 WAS TRAVELING SOUTHBOUTHBOUTHBOUTHBOUTHBOUTHBOUTHBOUTHB								AND THEN A CULVERT.

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Locati	ion 🛛 🗖										
ON USH12 EB					Latitude				Longitude		
202 FT S						43.41973	7864		-89.773	604904	
OF USH12 EB						X Coordinate Y Coordinate			inate		
IN THE TOWN OF SUMPTER IN SAUK COUNTY						275468			481116		
IN SAU	K COUNTY					Structure Type					
						NO STRU	JCTUR	RE			
Crash	Scene										
First Har	mful Event					First Harm	ful Ever	nt Location			
DITCH						ON ROAD					
Manner	of Collision					Light Condition					
00 - NO	COLLISION W/VE	HICLE IN TRANSPORT				DAYLIGHT					
Road Su	rface Condition(s)					Roadway F	Factor(s	;)			
DRY											
Environn	ment Factor(s)										
NONE						NONE					
Weather	Condition(s)					1					
CLEAR	2										
Animal T	Гуре					Relation To	o Traffic	way			
								ON ROAD			
	lassification - Location					Crash Classification - Jurisdiction					
-	C PROPERTY					NO SPECIAL JURISDICTION					
Tribal La	and					Access Control Special Study NO CONTROL			Special Study		
Within In	terchange Area	Junction Location			Intersectio						
NO	0	NON-JUNCTION				NINTERSECTION					
Closure	Туре			Reaso	ons for Clos	sure					
LANE C	CLOSURE										
Date Initi	Date Initial Lane/Rd Closed Time Initial Lane/Rd Closed LAW ENFOR					EMENT, TOW TRUCK, FIRE/EMS					
10/23/2		12:17 PM									
	Lanes Open	Time All Lanes Open		-				ime Scene Cleared			
10/23/2	-	12:55 PM		10/23	8/2022	12:55 PM					
Unit Stat	Summary		Vehi	cle One	erating As C	lassification		Unit Type			
IN TRA						assincation					
Vehicle	-		00						Operating As Endorsements		
		E									
Total Oc	CS	Train/Bus # Recorded		I # Citat	I # Citations Issued			railers	Total HazMat Types		
1			0				0		0		
Insuranc	e?	Direction Of Travel		Pre CrashTire		Speed Limit		Total Lanes			
YES		SOUTHBOUND		Mark 55 cial Function			55	4 Emergency Motor Vehicle Use			
	rmful Event: Collision V Y POLE	With			nction CIAL FUNCTION				NOT APPLICABLE		
Traffic W			Traff	ic Cont	rol	Traffic Control Inoperative/Missing				tive/Missing	
DIVIDED HWY W/O TRAFFIC BARRIER NO CO				CONTROL		NO					
				d Curva	Curvature				Road Grade		
, , , , , , , , , , , , , , , , , , ,				RAIGH	AIGHT LEVEL						
Truck Bu NO	us or HazMat										
	hiclo										
-	Vehicle License Plate Number Plate Type				St Country of Issuance						
	AND4165 AUT - AUT										
	hicle Identification Nun	nber	Mal			Year Model					
<u> </u>	18AZ08T84W22247		NIS	SAN			2004		MURANO		
					include on	<u> </u>			Orach Data	10/23/2022	

5

UNIT

2

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L 1		Color		Body Style		Bus Use				
		ONG - ORANGE		UT - SPORT UTILI		240 000				
		Initial Contact Point		Vehicle Damage	TTEINOLL]			
⊢⊢	Ë	12 - FRONT		Volliolo Dallago			7 8 9 10 11			
UNIT	₽	Extent Of Damage		12 - FRONT			6 12			
	VEHICLE	DISABLING DAMAGE		12 - FRONT			5 4 3 2 1			
	>	Towed Due To Damage		Vahiela Romovad By	Vahiala Damayod Dy					
		TOWED DUE TO DISABL		CRAIGS TOWING						
		What Driver Was Doing		Vehicle Factors						
		GOING STRAIGHT		Vehicle Lactors						
		Driver Prior Action Other								
		Driver Actions								
		RAN OFF ROADWAY, OTHER CONTRIBUTING ACTION								
⊢⊢	VEHICLE									
UNIT	¥									
	Ē									
	>									
		Owner Name		Owner Address						
		DALE SALZMAN		119 TOWER ST						
2	6	(608) 370-0611		PRAIRIE DU SAC, WI 53578 , US						
		L Sequence Of Events	Convence Of Events							
		Event								
	0	DITCH								
		Event								
	02	CULVERT								
		Event								
	03	UTILITY POLE								
		Event								
	04									
.	1	Policy Holder								
UNIT		Insurance Company Individual								
5		ALLSTATE-INS-CO		DALE SALZMAN						
		Individual								
				Oitetiene leeve d	0					
		Driver DALE SALZMAN		Citations Issued 0	Sex MALE					
	P A	(608) 370-0611		Date of Birth		Race				
	Ď	Address		Date of Birth		WHITE				
Ę	INDIVIDUAL			Driver Lieense Num						
IN N	ā	119 TOWER ST APT 5		Driver License Number \$4251664801306						
	Z	PRAIRIE DU SAC, WI 538	578,US	STATE: WISCONSIN COUNTRY: UNITED STATES						
		On Duty Crash		Safety Equipment						
	Sat	fety Equipment	y crach							
		Row	Seat Position	SHOULDER & L	SHOULDER & LAP BELT					
		01 - FRONT ROW	07 - LEFT							
		Helmet Use	•••	Helmet Compliance	Helmet Compliance					
		Eye Protection		Tint Compliance	Tint Compliance					
		,								
	001	Injury Severity		Airbag	Airbag					
2		Injury POSSIBLE INJURY		DEPLOYED-FRONT						
		Ejected	Ejection Path		Trapped/Extricated					
	NOT EJECTED NOT EJECTED/NOT A Medical Transport			PPLICABLE		NOT TRAPPED				
				EMS Agency Identif	ier	EMS Run #				
		NOT TRANSPORTED								
I		Motor Vehicle Crash	This	report does not include any		Croch D	Date 10/23/2022			

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		Hospital			Date of Death					
		Distracted By	Distracted By Source	e CTION (ANIMAL, F	FOOD, GROOMING)					
		Distracted By Action OTHER ACTION (L	OOKING AWAY	FROM TASK ETC)					
		Non Motorist	Striking Unit #	Location						
		Prior Action								
		Action								
∟	UAL									
	INDIVIDUAL									
	IND									
		Action Other						To/From School		
	L	Drug & Alcohol	Suspected Alcohol L NO	Jse	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				
6	001	Drug Type		1						
		Individual Condition								
		ILL (SICK), FAINTI	ED							