WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override				gency Crash Number Investigating 22-11541 DEPUTY K		Officer/Deputy C. RENZ				
4	Crash Date 11/17/2022	05:26 PM 11/17/2022 05:26		Time Arrived							
O I LUBINZINI4J	Date Notified 11/17/2022			nits	,		Total Killed	d			
חם	On Emergency Hit	and Run	Lane Closu	ıre	Work Zone	Trailer	or T	owed	Reporting Threshold		
0 [Government Property	Active Sc	hool Zone	School Bus Related Tags NO							
	Reportable	Reportable Crash Type DT4000 (STANDARD CRASH) Amen					led		Secondary Crash		
ĺ	Description										
	Diagram	Rec	construction	Ву							
							Photos By				
	Non-	Repor	table sl	ide	off						
	✓ I, a sworn law enforceme	nt officer, agre	ee that I have no	ot added	l any CJIS data in th	nis report.					
	ON 11/17/2022 AT APPROXIMATELY 5:26 P.M, I WAS TRAVELING NORTHBOUND ON HWY 12 NEAR N REEDSBURG ROAD WHEN I WITNESSED UNIT 1 SLOWING DOWN DUE TO OTHER TRAFFIC IN FRONT OF IT SLOWING DOWN. THE ROADWAY WAS EXTREMELY ICY DUE TO BLOWING SNOW AND MOISTURE ON THE ROADWAY. THE BACK END OF UNIT 1 BEGAN TO SLIDE BACK AND FORTH ON THE ROAD. UNIT 1 SPUN AROUND AND ENDED UP IN THE DITCH ON THE EAST SIDE OF THE ROAD. THERE WAS NO DAMAGE TO THE VEHICLE AND THE OPERATOR OF UNIT 1 WAS ABLE TO GET IT BACK ON THE ROAD ON HIS OWN AND CONTINUED ON ITS WAY.										

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Crash Date 11/17/2022

Crash Time 05:26 PM

Loc	ation									
ON USH12 WB						Latitude		Longitude		
0.34 MI S					43.527435059			-89.7	87005053	
OF RAMP USH12 WB IN THE TOWN OF DELTON						X Coordinate		Y Coordinate		
IN SAUK COUNTY						274783.8125 4823			162	
					Structure	Туре				
Cra	sh Scene									
	Harmful Event				First Harm	nful Event	Location			
DIT	СН				ROADSI	DE				
Man	ner of Collision				Light Con	dition				
00 -	NO COLLISION W/V	EHICLE IN TRANSPORT			DARK/UNLIT					
Roa	d Surface Condition(s)				Roadway	Factor(s)				
SNO	OW, ICE									
Envi	ronment Factor(s)				1					
WE	ATHER CONDITIONS				ROAD S ETC)	URFACE	CONDITION	I (WET,	ICY, SNOW, SLUSH,	
Wea	ther Condition(s)				1					
SNO	OW, BLOWING SNOV	V								
Anin	nal Type				Relation T		ay ON ROAD			
Cras	sh Classification - Location	<u> </u>		-			- Jurisdiction			
	BLIC PROPERTY						RISDICTION			
Triba	al Land				Access Control				Special Study	
				FULL C		ILL CONTROL				
	in Interchange Area	Junction Location		Intersection						
NO		NON-JUNCTION		NOT AN	INTERSE	CTION				
	t Summary \blacksquare									
	Status		-	erating As C	Classification	l	Unit Type	DII		
	CIE Type	D CLASS	D CLASS			AUTOMOBILE Operating As Endorsements				
	ORT) UTILITY VEHIC									
Tota	I Occs	Train/Bus # Recorded	Total # Citations Issue 0		d Total Trail		ailers	ilers Total HazMat Types 0		
_	rance?	Direction Of Travel	Pre CrashTire		Speed Limit		Total Lanes			
YES		NORTHBOUND	✓ Mark		•	55		4		
Mos	t Harmful Event: Collision	With	Special Function				Emergency Motor Vehicle Use			
DIT		NO SPEC	NO SPECIAL FUNCTION			NOT APPLICABLE				
	fic Way		Traffic Cont					raffic Control Inoperative/Missing		
	IDED HWY W/O TRAF	FIC BARRIER		NO CONTROL			NO Bood Crodo			
Surface Type Road Curvature BLACKTOP (BITUMINOUS) STRAIGHT					Road Grade			е		
	k Bus or HazMat	13)	STRAIGH				LEVEL			
NO										
,	Vehicle									
	License Plate Number		Plate Type)		St	Country of Is			
544JKN			Make CADILLAC			WI	UNITED STATES Model			
Vehicle Identification Number 1GYEK63N52R193295		Year 2002			Model					
3	Color	3 5	Body Style			2002		Bus Use		
	WHI - WHITE	Dody Otyle	•			243 036				
■ Initial Contact Point Ve				Vehicle Damage						
C	00 - NON-COLLISIO							7 8 9 10 11		
/EHICL	Extent Of Damage NO DAMAGE	00 - NO I	00 - NO DAMAGE				6 2 12 5 4 3 2 1			

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		Towed Due To Damage		Vehicle Removed By					
		NOT TOWED		OPERATOR					
		What Driver Was Doing		Vehicle Factors					
	GOING STRAIGHT								
		Driver Prior Action Other		NOT APPLICABLE					
		Driver Actions							
		Driver Actions NO CONTRIBUTING ACT	ON						
—	Ϋ́Ε								
L	H								
_	VEHICLE								
		Owner Name		Owner Address					
7	01	JAMIE WALKER (608) 217-6646		1180 FIELDCRES					
0	0	(000) 211 0040		EBOLICION, WI	, 00				
		O							
		Sequence Of Events Event							
	01	DITCH							
	02	Event							
		Event							
	03	LVent							
	04	Event							
╘		Policy Holder							
LNO		Insurance Company AMERICAN-FAMILY-INS-0	°0	Individual JAMIE WALKER					
				V with FF within					
		Individual							
		Driver JAMIE WALKER		Citations Issued 0	MALE				
	AL	(608) 217-6646		Date of Birth	Race				
—	INDIVIDUAL			WHITE					
	Σ	Address		Driver License Numbe	Driver License Number				
_	N	1180 FIELDCREST DR EDGERTON, WI 53534 , U	IS	STATE: WISCONSIN COUNTRY: UNITED STATES					
		LDGLICTON, WI 00004 ,		J. I. I. III GONGIN GOGNINI. GINIED GIALEG					
		On Duty	Crash	Safety Equipment					
	Sat	ety Equipment	Oldali	Salety Equipment					
		Row	Seat Position	SHOULDER & LAF	BELT				
		01 - FRONT ROW	07 - LEFT						
		Helmet Use	•	Helmet Compliance					
		Eye Protection		Tint Compliance					
_	Ξ	Injury Se	everity	Airbag					
2	001	Injury _{NO AP}	PARENT INJURY	NON DEPLOYED					
		Ejected Ejection Path				Trapped/Extricated			
		NOT EJECTED	NOT EJECTED/NOT AP			NOT TRAPPED			
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #			
Hospital				Date of Death		Time of Death			
		Distracted By NOT A	ed By Source	PACTED)					
		Distracted By Action	FFLICABLE (NOT DISTR	ACTED)					
		NOT DISTRACTED							

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		Non Motorist	Striking Unit #	Location				
		Prior Action						
TIND	INDIVIDUAL	Action						
		Action Other						To/From School
	1	Drug & Alcohol	Suspected Alcohol U NO	Jse	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		
٦	001	Drug Type						
		Individual Condition APPEARED NORM	AL					