

6TL0D0GSK8
22-11353

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 22-11353		Investigating Officer/Deputy DEPUTY G. AKERS	
Crash Date 11/12/2022		Crash Time 05:11 PM		Date Arrived 11/12/2022		Time Arrived 05:16 PM	
Date Notified 11/12/2022		Time Notified 05:11 PM		Total Units 02		Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input checked="" 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 BL	
		Additional Information PHOTOS	
		<input checked="" type="checkbox"/> I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.	

V1 WAS TRAVELING EAST BOUND ON HWY 12 PAST THE FERN DELL EXIT, V1 LOST CONTROL DUE TO ROAD CONDITIONS FROM SNOW. V1 THEN STRUCK V2 IN THE FRONT RIGHT SIDE, THEN WENT OFF THE ROAD WAY INTO THE MEDIAN. BOTH VEHICLES THEN CAME TO A STOP IN THE MEDIAN. D1 CITED FOR TOO FAST FOR CONDITIONS.

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Location

Table with location details including address (ON USH12 EB, 294 FT S), coordinates (Latitude: 43.557644827, Longitude: -89.781189031), and structure type (NO STRUCTURE).

Crash Scene

Table with crash scene details including event type (MOTOR VEH IN TRANSPORT), collision manner (01 - ANGLE), road conditions (WET, ICE), weather (SNOW), and jurisdiction (PUBLIC PROPERTY).

Unit Summary

Table with unit summary details for unit 01, including status (IN TRANSIT), vehicle type (PASSENGER VAN), and various operational metrics.

Vehicle


Table with vehicle identification details for unit 01, including license plate (ANC8699), make (CHEVROLET), and year (1986).

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UNIT VEHICLE	Color BLU - BLUE	Body Style VN - VAN	Bus Use
	Initial Contact Point 11 - LEFT FRONT CORNER	Vehicle Damage 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT	
	Extent Of Damage DISABLING DAMAGE		
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By CRAIGS TOWING	
	What Driver Was Doing GOING STRAIGHT	Vehicle Factors NOT APPLICABLE	
UNIT VEHICLE	Driver Prior Action Other		
	Driver Actions SPEED TOO FAST/COND		
01 01	Owner Name RYAN JAMES SMELCER (608) 535-0926	Owner Address 914 JUSTIN CIR REEDSBURG, WI 53959 , US	
	Sequence Of Events		
01 01	Event MOTOR VEH IN TRANSPORT		
	Event DITCH		
	Event		
	Event		
UNIT	Policy Holder		
	Insurance Company SECURA-INS-CO	Individual RYAN SMELCER	
UNIT INDIVIDUAL	Individual		
	Driver CODY RYAN SMELCER (608) 535-0926	Citations Issued 1	Sex MALE
		Date of Birth [REDACTED]	Race WHITE
	Address 914 JUSTIN CIR REEDSBURG, WI 53959 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
01 001	Safety Equipment		On Duty Crash
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	Safety Equipment SHOULDER & LAP BELT
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	Injury		Injury Severity NO APPARENT INJURY
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #

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UNIT INDIVIDUAL	Hospital		Date of Death		Time of Death	
	Distracted By Distracted By Source NOT APPLICABLE (NOT DISTRACTED)					
	Distracted By Action NOT DISTRACTED					
	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	
01 001	Drug Type					
	Individual Condition APPEARED NORMAL					
	Individual					
	Passenger MARSHALL FOX MEYER (608) 479-2467			Citations Issued 0	Sex MALE	
	Address 106 W MAPLE AVE LIME RIDGE, WI 53942 , US			Date of Birth [REDACTED]	Race WHITE	
	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			[REDACTED]		
	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		
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	

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT INDIVIDUAL	Distracted By Distracted By Source		
	Distracted By Action		
	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 SAGE M JOHNSON (608) 617-1837	Citations Issued 0 Sex MALE	
		Date of Birth Race WHITE	
	Address E7278 S OAK CREST DR. REEDSBURG, WI 53959 , US	Driver License Number	
	Safety Equipment	On Duty Crash Safety Equipment SHOULDER & LAP BELT	
Row 02 - SECOND ROW	Seat Position 07 - LEFT		
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			

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UNIT	Distracted By Action					
	INDIVIDUAL	Non Motorist		Striking Unit #		
		Location				
	Prior Action					
	Action					
	Action Other			To/From School		
	01	003	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						
01	Violations					
	UTC Number BG023969	Issue To? 001	Statute Number 346.57(3)	Description DRIVING TOO FAST FOR CONDITIONS		

Unit Summary

UNIT	02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE			
		Vehicle Type PASSENGER CAR					Operating As Endorsements		
		Total Occs 5	Train/Bus # Recorded		Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0		
		Insurance? NO	Direction Of Travel EASTBOUND		<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 65	Total Lanes 4		
		Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT			Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE		
		Traffic Way DIVIDED HWY MEDIAN W/BARRIER			Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO		
		Surface Type CONCRETE			Road Curvature STRAIGHT		Road Grade LEVEL		
		Truck Bus or HazMat NO							
		02	02	Vehicle					
				License Plate Number NJQD70		Plate Type AUT - AUTOMOBILE		St FL	Country of Issuance UNITED STATES
Vehicle Identification Number 3N1AB7AP5GY303720				Make NISSAN		Year 2016	Model SENTRA		
Color GRY - GRAY				Body Style 4D - 4DR			Bus Use		

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Form with sections: UNIT VEHICLE, Sequence Of Events, Individual, Safety Equipment, Injury, Distracted By. Includes fields for vehicle damage, driver info, and crash details.



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UNIT	Distracted By Action NOT DISTRACTED				
	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				
02	004	Drug Test Given TEST NOT GIVEN			
		Drug Test Type			
		Drug Test Results			
		Drug Type			
		Individual Condition APPEARED NORMAL			
		Individual			
		Passenger DANIELLE M DAMMEN (608) 448-7531		Citations Issued 0	
				Sex FEMALE	
				Date of Birth [REDACTED]	
				Race WHITE	
UNIT	INDIVIDUAL	Address 901 MOORE STREET APT 8 BARABOO, WI 53913 , US			
		Driver License Number			
		Safety Equipment			
		On Duty Crash			
		SHOULDER & LAP BELT			
		Row 01 - FRONT ROW	Seat Position 09 - RIGHT		
		Helmet Use		Helmet Compliance	
		Eye Protection		Tint Compliance	
		02	005	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			
UNIT	INDIVIDUAL	Distracted By			
		Distracted By Source			
Distracted By Action					

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UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location			
		Prior Action						
		Action						
02	005	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 KAIDEEN RAYMOND FLEMING (608) 716-1969		Citations Issued 0	Sex MALE	
						Date of Birth [REDACTED]	Race WHITE	
				Address 439 PINE ST # 2 SAUK CITY, WI 53583 , US		Driver License Number		
Safety Equipment				On Duty Crash				
				Safety Equipment CHILD RESTRAINT - TYPE UNKNOWN				
Row 02 - SECOND ROW				Seat Position 07 - LEFT				
Helmet Use				Helmet Compliance				
Eye Protection				Tint Compliance				
02	006			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
02 006	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 ISABELLA H LABRIER (608) 716-1969	Citations Issued 0	Sex FEMALE
	Date of Birth [REDACTED]	Race WHITE	
	Address 439 PINE ST # 2 SAUK CITY, WI 53583 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
02 007	Safety Equipment	On Duty Crash	Safety Equipment
	Row 02 - SECOND ROW	Seat Position 08 - MIDDLE	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	
02	007	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 COLTON JOSEPH FLEMING (608) 716-1969		Citations Issued 0	Sex MALE
				Date of Birth [REDACTED]	Race WHITE
		Address 439 PINE ST # 2 SAUK CITY, WI 53583 , US		Driver License Number	
		02	008	Safety Equipment	On Duty Crash
Row 02 - SECOND ROW	Seat Position 09 - RIGHT			CHILD RESTRAINT - TYPE UNKNOWN	
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						
	02	008					