

6TL09XQZ4X  
22-12223

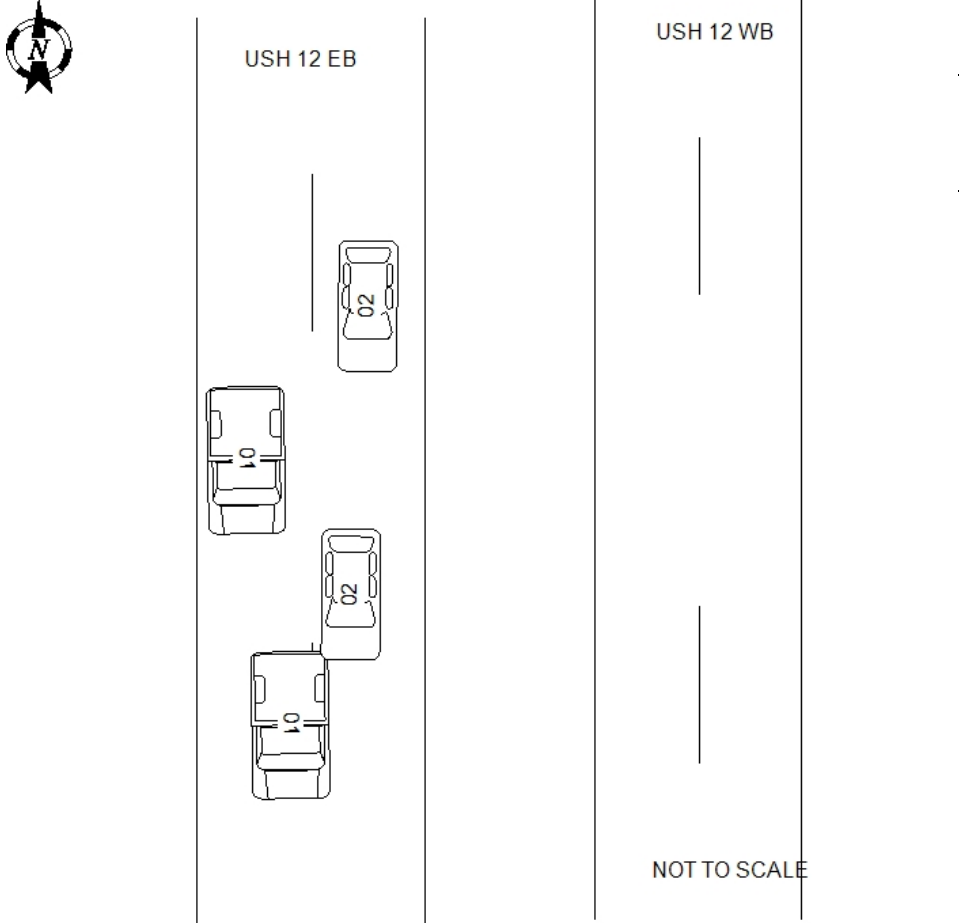
WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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 <b>22-12223</b>		Investigating Officer/Deputy <b>DEPUTY I. GALVAN</b>	
Crash Date <b>12/08/2022</b>		Crash Time <b>09:21 AM</b>		Date Arrived <b>12/08/2022</b>		Time Arrived <b>09:27 AM</b>	
Date Notified <b>12/08/2022</b>		Time Notified <b>09:22 AM</b>		Total Units <b>02</b>		Total Injured <b>01</b>	Total Killed <b>00</b>
<input type="checkbox"/> On Emergency	<input 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 <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram		Reconstruction By	
		Photos By <b>ISAAC GALVAN</b>	
		Additional Information <b>PHOTOS</b>	

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

UNIT 2 WAS TRAVELING ON USH 12 JUST SOUTH OF STH 33. UNIT 1 HAD GOT ONTO USH 12 FROM THE STH 33 ON RAMP TO USH 12. UNIT 1 WAS OPERATING ON USH 12 SOUTH OF STH 33 WHEN HE CHANGED LANES TO AVOID A SLOW MOVING VEHICLE. UNIT 1 LOOKED BUT DID NOT SEE UNIT 2 IN THE INSIDE LANE AND STRUCK HER FRONT PASSENGER SIDE CORNER WITH HIS REAR DRIVER SIDE CORNER. UNIT 1 HAS A REVOKED LICENSE AND A CITATION WAS ISSUED. UNIT 1 WAS REMOVED BY A FRIEND. UNIT 2 WAS REMOVED BY CRIAGS TOWING. UNIT 2 OPERATOR CLAIMED SHE MAY GO TO THE HOSPITAL FOR A POSSIBLE INJURY.

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Location

ON USH12 EB 392 FT S OF STH33 EB IN THE TOWN OF BARABOO IN SAUK COUNTY	Latitude <b>43.508568138</b>	Longitude <b>-89.782038974</b>
	X Coordinate <b>275115</b>	Y Coordinate <b>4821053.5</b>
	Structure Type <b>NO STRUCTURE</b>	

Crash Scene

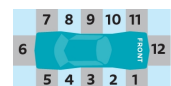
First Harmful Event <b>MOTOR VEH IN TRANSPORT</b>		First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>01 - ANGLE</b>		Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>DRY</b>		Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>			
Weather Condition(s) <b>CLEAR</b>			
Animal Type		Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>		Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land		Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>ENTRANCE RAMP-RELATED</b>	Intersection Type <b>NOT AN INTERSECTION</b>	

Unit Summary

UNIT 01	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>TRUCK</b>	
	Vehicle Type <b>UTILITY TRUCK/PICKUP TRUCK</b>				Operating As Endorsements	
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>1</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>YES</b>	Direction Of Travel <b>EASTBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>65</b>	Total Lanes <b>4</b>	
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>DIVIDED HWY W/O TRAFFIC BARRIER</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>					

Vehicle

UNIT 01 VEHICLE	License Plate Number <b>TG1264</b>		Plate Type <b>LTK - LIGHT TRUCK</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
	Vehicle Identification Number <b>1GCVKREC2FZ221515</b>		Make <b>CHEVROLET</b>	Year <b>2015</b>	Model <b>SLV</b>	
	Color <b>RED - RED</b>		Body Style <b>PK - PICKUP</b>		Bus Use	
	Initial Contact Point <b>07 - LEFT REAR CORNER</b>		Vehicle Damage <b>07 - LEFT REAR CORNER, 08 - LEFT SIDE REAR</b>			
	Extent Of Damage <b>FUNCTIONAL DAMAGE</b>					



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UNIT	VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By		
		What Driver Was Doing <b>CHANGING LANES</b>		Vehicle Factors		
		Driver Prior Action Other		<b>NOT APPLICABLE</b>		
		Driver Actions <b>LOOKED BUT DID NOT SEE</b>				
01	01	Owner Name <b>AMY DITTBERNER (608) 495-3788</b>		Owner Address <b>244 S ALBERT AVE REEDSBURG, WI 53959 , US</b>		
		Sequence Of Events				
UNIT	INDIVIDUAL	01	Event <b>MOTOR VEH IN TRANSPORT</b>			
		02	Event			
		03	Event			
		04	Event			
UNIT	INDIVIDUAL	Policy Holder				
		Insurance Company <b>ALLSTATE-PROPERTY-&amp;-CASUALTY-INS-CO</b>		Individual <b>DEREK DITTBERNER</b>		
01	001	Individual				
		Driver <b>DEREK DITTBERNER (608) 495-3788</b>		Citations Issued <b>1</b>	Sex <b>MALE</b>	
		Date of Birth		Race <b>WHITE</b>		
		Address <b>244 S ALBERT AVE REEDSBURG, WI 53959 , US</b>		Driver License Number		
01	001	Safety Equipment		On Duty Crash		
		Row <b>01 - FRONT ROW</b>		Seat Position <b>07 - LEFT</b>		
		Helmet Use		SHOULDER & LAP BELT		
		Eye Protection		Tint Compliance		
		Injury		Airbag		
		Injury Severity <b>NO APPARENT INJURY</b>		NON DEPLOYED		
		Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</b>	
		Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #	
		Hospital		Date of Death	Time of Death	
		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>				
		Distracted By Action <b>NOT DISTRACTED</b>				

Wisconsin Motor Vehicle Crash  
Form DT4000

This report does not include any CJIS data.  
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Crash Date **12/08/2022**  
Crash Time **09:21 AM**

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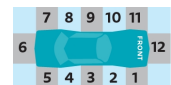
UNIT INDIVIDUAL 01	<b>Non Motorist</b>		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other				
	To/From School				
	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>	
	Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type	Alcohol Test Results	
	Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type	Drug Test Results	
	Drug Type				
	Individual Condition <b>APPEARED NORMAL</b>				
UNIT 01	<b>Violations</b>				
	UTC Number <b>AE757858</b>	Issue To? <b>001</b>	Statute Number <b>343.44(1)(b)</b>	Description <b>OPERATING WHILE REVOKED (FORFEITURE)</b>	

## Unit Summary

UNIT 02	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>
	Vehicle Type <b>PASSENGER CAR</b>				Operating As Endorsements
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>YES</b>	Direction Of Travel <b>EASTBOUND</b>	<input type="checkbox"/> <b>Pre CrashTire Mark</b>	Speed Limit <b>65</b>	Total Lanes <b>4</b>
	Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>
	Traffic Way <b>DIVIDED HWY W/O TRAFFIC BARRIER</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>
	Truck Bus or HazMat <b>NO</b>				

## Vehicle

UNIT 02	License Plate Number <b>ADY1034</b>		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>JTDKDTB31D1045213</b>		Make <b>TOYOTA</b>	Year <b>2013</b>	Model <b>PRIUS</b>
	Color <b>ONG - ORANGE</b>		Body Style <b>4H - HATCHBACK 4 DOOR</b>		Bus Use
	Initial Contact Point <b>01 - RIGHT FRONT CORNER</b>				



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UNIT	VEHICLE	Vehicle Damage		
		01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT		
		Extent Of Damage		
		DISABLING DAMAGE		
UNIT	VEHICLE	Vehicle Removed By		
		CRAIGS TOWING		
		Towed Due To Damage		
		TOWED DUE TO DISABLING DAMAGE		
UNIT	VEHICLE	Vehicle Factors		
		NOT APPLICABLE		
		What Driver Was Doing		
		GOING STRAIGHT		
UNIT	VEHICLE	Driver Prior Action Other		
		Driver Actions		
		NO CONTRIBUTING ACTION		
UNIT	VEHICLE	Owner Name	Owner Address	
		MICHELLE BURCH (608) 393-0460	3863 5TH DR # 15 WISCONSIN DELLS, WI 53965 , US	
<b>Sequence Of Events</b>				
UNIT	VEHICLE	Event		
		MOTOR VEH IN TRANSPORT		
		Event		
		Event		
UNIT	VEHICLE	Event		
		Event		
		Event		
		Event		
<b>Policy Holder</b>				
UNIT	VEHICLE	Insurance Company	Individual	
		PROGRESSIVE-UNIVERSAL-INSURANCE-COMP	MICHELLE BURCH	
<b>Individual</b>				
UNIT	INDIVIDUAL	Driver	Citations Issued	Sex
		MICHELLE BURCH (608) 393-0460	0	FEMALE
		Date of Birth	Race	
		WHITE		
Address		Driver License Number		
3863 5TH DR # 15 WISCONSIN DELLS, WI 53965 , US				
<b>Safety Equipment</b>				
UNIT	INDIVIDUAL	On Duty Crash	Safety Equipment	
			SHOULDER & LAP BELT	
		Row	Seat Position	
		01 - FRONT ROW	07 - LEFT	
Helmet Use		Helmet Compliance		
Eye Protection		Tint Compliance		
UNIT	INDIVIDUAL	Injury	Airbag	
		POSSIBLE INJURY	NON DEPLOYED	
		Ejected	Ejection Path	Trapped/Extricated
		NOT EJECTED	NOT EJECTED/NOT APPLICABLE	NOT TRAPPED
Medical Transport		EMS Agency Identifier	EMS Run #	
NOT TRANSPORTED				
Hospital		Date of Death	Time of Death	

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Form DT4000

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Crash Date 12/08/2022  
Crash Time 09:21 AM

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1300 LANGE COURT  
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UNIT  INDIVIDUAL          02 002	<b><i>Distracted By</i></b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>	
	Distracted By Action <b>NOT DISTRACTED</b>			
	<b><i>Non Motorist</i></b>	Striking Unit #	Location	
	Prior Action			
	Action			
	Action Other			To/From School
	<b><i>Drug &amp; Alcohol</i></b>	Suspected Alcohol Use <b>NO</b>		Suspected Drug Use <b>NO</b>
	Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type	Alcohol Test Results
	Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type	Drug Test Results
	Drug Type			
Individual Condition  <b>APPEARED NORMAL</b>				