6TL0BJ1GN1 22-12528

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Overrid				g Officer/Deputy I. MACASKILL			
Crash Date 12/15/2022	Crash Time 07:50 AM		e Arrived 15/2022	Time Arrived 08:12 AM			
Date Notified 12/15/2022	Time Notified 07:53 AM	Tota 01	al Units	Total Injured	Total Kille	Total Killed	
On Emergency	Hit and Run	Lane Closure	☐ Work Zone	Trailer or	Towed	Reporting Threshold	
Government Property	Active Sc	Active School Zone School Bus Related			Tags		
Reportable	Crash Type DT4000 (STA	Crash Type DT4000 (STANDARD CRASH)				Secondary Crash	
Description Diagram	·				econstruction		
	Non R	eportable/Slide Off		A	hotos By dditional Info ONE	rmation	
I, a sworn law enfo					RTED TO SP	IN IN THE ROADWAY DUE	
TO SNOW AND ICE COVER						HY HIL KOADWAY DUE	

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Location ON CTHV EB

28 FT S

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Latitude

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

Crash Date 12/15/2022

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Longitude

	28 FT S				43.58008	34756		-90.09	2981182
	DF STRUTZ RD N THE TOWN OF LA VALLE				X Coordinate			Y Coordinate	
	IN SAUK COUNTY			4.578125 482		48298	29884.5		
				Structure Type					
	Crash Scene								
	First Harmful Event					ıful Event Lo	cation		
	DITCH				ON ROA				
		Manner of Collision				dition ⊔ ⊤			
	00 - NO COLLISION W/VEHICLE IN TRANSPORT Road Surface Condition(s)				DAYLIGHT Roadway Factor(s)				
	SNOW, SLUSH, ICE					1 40101(5)			
	Environment Factor(s)								
	WEATHER CONDITIONS				NONE				
	Weather Condition(s)				1				
	CLOUDY								
	Animal Type				Relation To Trafficway				
					TRAFFICWAY - ON ROAD				
	Crash Classification - Location PUBLIC PROPERTY				Crash Classification - Jurisdiction				
	TribalLand				NO SPECIAL JURISDICTION Access Control Special Study			Special Study	
					NO CONTROL				
	l			Intersection	ion Type I INTERSECTION				
		DIACTION		NOT AN	INTERSE	CTION			
	Unit Summary Unit Status	11	/ahiala Ona	A - C	ififi		11.37		
	IN TRANSIT		venicie Ope D CLASS	rating As C	Classification UnitType AUTOMOBILE				
	Vehicle Type			Operating As Endorsements					
0	PASSENGER CAR								
	Total Occs Train/	Bus#Recorded 1	Total # Citations Issued 0		0		· · · · · · · · · · · · · · · · · · ·		zMat Types
	1							0	
_	"""	ion Of Travel FBOUND		CrashTire Mark		Speed Lim	it	Total Lar	nes
	Most Harmful Event: Collision With	l ,	Special Fund					nergency Motor Vehicle Use	
_	DITCH		NO SPECIAL FUNCTION			NOT APPLICABLE			
	Traffic Way	Traffic Control NO CONTROL			Traffic Control Inoperative/Missing				
	,			Road Curvature			NO Road Grade		
	BLACKTOP (BITUMINOUS)	CURVE LEFT		DOWNHILL					
	Truck Bus or HazMat								
	МО								
	Vehicle								
	\$##\$#\$#\$## 			1			Country of Iss		
	852KYG		AUT - AUTOMOBILE		E .		UNITED STATES		
	Vehicle Identification Number 1G8AJ55F46Z101293		Make SATURN			Model ION			
	Color		Body Style		2000	Bus Use			
	BLU - BLUE		SD - SEDAN			240 000			
	Initial Contact Point		Vehicle Damage					7 8 9 10 11	
LIND	Initial Contact Point 00 - NON-COLLISION Extent Of Damage		00 - NO DAMAGE					5 12	
5	Extent Of Damage NO DAMAGE				5 4 3 2 1				
	> NO DAWAGE								

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		Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR						
		What Driver Was Doing		Vehicle Factors						
		NEGOTIATING CURVE Driver Prior Action Other		NOT APPLICABLE						
LINI	VEHICLE	Driver Actions SPEED TOO FAST/COND								
	5	Owner Name BRUCE B RICK (608) 462-3061		Owner Address E3582 GREEN VALLEY DR LA VALLE, WI 53941 , US						
		Sequence Of Events		I						
	Event DITCH									
	엉	Event								
	8	Event								
	S Event									
		l Policy Holder								
UNIT		Insurance Company STATE-FARM-GENERAL-INS-CO		Individual BRUCE RICK						
			BROCE RICK							
		Individual Driver		Citations issued Sex						
	4	BRUCE B RICK (608) 462-3061		0	MALE					
⊨	3			Date of Birth	Race WHITE					
TINO	INDIVIDUA	Address E3582 GREEN VALLEY DR LA VALLE, WI 53941 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES						
		On Duty	Crash	Safety Equipment						
	القاد	afety Equipment								
		Row 01 - FRONT ROW	SeatPosition 07 - LEFT	SHOULDER & LAP BELT						
		HelmetUse		Helmet Compliance						
		Eye Protection	Tint Compliance							
2	8	\$27.000000000000000000000000000000000000	PARENT INJURY	Airbag NON DEPLOYED						
		1	Ejection Path NOT EJECTED/NOT APP	LICABLE		Trapped/Extricated NOT TRAPPED				
		Medical Transport	EMS Agency Identifier		EMS Run#					
		NOT TRANSPORTED Hospital	Date of Death	Date of Death Time of Death						
		Distracte	d By Source							
		Distracted By NOT APPLICABLE (NOT DISTRACTED)								
		Distracted By Action NOT DISTRACTED								

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	0.31 11 2	<u> </u>				
	Non Motorist	# Location				
	Prior Action					
UNIT	Action					
	Action Other					To/From School
	Drug & Alcohol NO	Icohol Use	Suspected Drug Use NO			
	Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	e		Alcohol Test Results	
	Drug Test Given TEST NOT GIVEN	Drug Test Type	pe Drug Test Result		5	
P 2	Drug Type	•				
	Individual Condition APPEARED NORMAL					