

6TL0DBC3FH  
22-12832

# 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<br>22-12832       | Investigating Officer/Deputy<br><b>DEPUTY B. TRAGER</b> |   |  |
| Crash Date<br>12/24/2022                     | Crash Time<br>10:00 AM                      | Date Arrived<br>12/24/2022            | Time Arrived<br>01:35 PM                                |   |  |
| Date Notified<br>12/24/2022                  | Time Notified<br>12:54 PM                   | Total Units<br>01                     | Total Injured<br>00                                     | Total Killed<br>00                        |  |
| <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<br>NO              | Tags  |   |  |
| <input type="checkbox"/> Reportable          | Crash Type<br>DT4000 (STANDARD CRASH)       | <input type="checkbox"/> Amended      | <input type="checkbox"/> Secondary Crash                |   |  |

## Description

|         |                                |
|---------|--------------------------------|
| Diagram | Reconstruction By              |
|         | Photos By                      |
|         | Additional Information<br>NONE |

**Non-Reportable Slide Off**

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

ON DECEMBER 24, 2022 AT APPROXIMATELY 10:00AM UNIT 1 WAS TRAVELING WEST ON CEMETERY RD. NEAR DECKER RD. WHEN HE SWERVED TO MISS A DEER AND ENTERED THE DITCH STRIKING A BARB WIRE FENCE. SHEILD'S RESPONDED FOR A PULL OUT ONLY.

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Location

|  |                              |                            |
|--|------------------------------|----------------------------|
| ON CEMETERY RD<br>866 FT S<br>OF DECKER RD<br>IN THE TOWN OF IRONTON<br>IN SAUK COUNTY | Latitude<br>43.545399808     | Longitude<br>-90.091929284 |
|  | X Coordinate<br>250216.09375 | Y Coordinate<br>4826029    |
|  | Structure Type               |                            |

Crash Scene

|   |   |   |
|---|---|---|
| First Harmful Event<br><b>DITCH</b>                                       | First Harmful Event Location<br><b>ROADSIDE</b>                       |   |
| Manner of Collision<br><b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>    | Light Condition<br><b>DAYLIGHT</b>                                    |   |
| Road Surface Condition(s)<br><b>SNOW</b>                                  | Roadway Factor(s)<br><br><b>NONE</b>                                  |   |
| Environment Factor(s)<br><b>WEATHER CONDITIONS, ANIMAL (S) IN ROADWAY</b> |   |   |
| Weather Condition(s)<br><b>CLOUDY</b>                                     |   |   |
| Animal Type<br><b>DEER</b>  | Relation To Trafficway<br><b>TRAFFICWAY - NOT ON ROAD</b>             |   |
| Crash Classification - Location<br><b>PUBLIC PROPERTY</b>                 | Crash Classification - Jurisdiction<br><b>NO SPECIAL JURISDICTION</b> |   |
| Tribal Land   | Access Control<br><b>NO CONTROL</b>                                   | Special Study                                   |
| Within Interchange Area<br><b>NO</b>                                      | Junction Location<br><b>NON-JUNCTION</b>                              | Intersection Type<br><b>NOT AN INTERSECTION</b> |

Unit Summary

|             |  |   |  |  |                                |
|-------------|--|---|--|--|--------------------------------|
| <b>UNIT</b> | Unit Status<br><b>IN TRANSIT</b>                   | Vehicle Operating As Classification<br><b>D CLASS</b> | Unit Type<br><b>TRUCK</b>                    |  |                                |
|             | Vehicle Type<br><b>UTILITY TRUCK/PICKUP TRUCK</b>  | Operating As Endorsements                             |  |  |                                |
|             | Total Occs<br><b>1</b>                             | Train/Bus # Recorded                                  | Total # Citations Issued<br><b>0</b>         | Total Trailers<br><b>0</b>                           | Total HazMat Types<br><b>0</b> |
|             | Insurance?<br><b>YES</b>                           | Direction Of Travel<br><b>WESTBOUND</b>               | <input type="checkbox"/> Pre Crash Tire Mark | Speed Limit<br><b>55</b>                             | Total Lanes<br><b>2</b>        |
|             | Most Harmful Event: Collision With<br><b>DITCH</b> | Special Function<br><b>NO SPECIAL FUNCTION</b>        |  | Emergency Motor Vehicle Use<br><b>NOT APPLICABLE</b> |                                |
|             | Traffic Way<br><b>TWO-WAY, NOT DIVIDED</b>         | Traffic Control<br><b>NO CONTROL</b>                  |  | Traffic Control Inoperative/Missing<br><b>NO</b>     |                                |
|             | Surface Type<br><b>BLACKTOP (BITUMINOUS)</b>       | Road Curvature<br><b>STRAIGHT</b>                     |  | Road Grade<br><b>LEVEL</b>                           |                                |
|             | Truck Bus or HazMat<br><b>NO</b>                   |   |  |  |                                |

Vehicle

|             |                |   |  |                     |   |  |
|-------------|----------------|---|--|---------------------|---|--|
| <b>UNIT</b> | <b>VEHICLE</b> | License Plate Number<br><b>MH3372</b>                     | Plate Type<br><b>LTK - LIGHT TRUCK</b> | St<br><b>WI</b>     | Country of Issuance<br><b>UNITED STATES</b> |  |
|             |                | Vehicle Identification Number<br><b>1FTPX14506FA71632</b> | Make<br><b>FORD</b>                    | Year<br><b>2006</b> | Model<br><b>F150</b>                        |  |
|             |                | Color<br><b>BLK - BLACK</b>                               | Body Style<br><b>PK - PICKUP</b>       |                     | Bus Use                                     |  |
|             |                | Initial Contact Point<br><b>00 - NON-COLLISION</b>        | Vehicle Damage                         |                     |   |  |
|             |                | Extent Of Damage<br><b>NO DAMAGE</b>                      | <b>00 - NO DAMAGE</b>                  |                     |   |  |



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|   |  |  |   |  |
|---|--|--|---|--|
| UNIT<br>VEHICLE                               | Towed Due To Damage<br><b>TOWED BUT NOT DUE TO DISABLING DAMAG</b> |  | Vehicle Removed By<br><b>SHIELDS TOWING</b>                     |  |
|   | What Driver Was Doing<br><b>GOING STRAIGHT</b>                     |  | Vehicle Factors   |  |
|   | Driver Prior Action Other  |  | <b>NOT APPLICABLE</b>   |  |
|   | Driver Actions<br><b>NO CONTRIBUTING ACTION</b>                    |  |   |  |
| 01  | Owner Name<br><b>ADAM DAVID TAYLOR<br/>(608) 477-3779</b>          |  | Owner Address<br><b>540 WEST ST<br/>LA VALLE, WI 53941 , US</b> |  |
|   | <b>Sequence Of Events</b>  |  |   |  |
| 01  | 01   | Event<br><b>DITCH</b>  |   |  |
|   | 02   | Event<br><b>FENCE</b>  |   |  |
|   | 03   | Event  |   |  |
|   | 04   | Event  |   |  |
| UNIT  | <b>Policy Holder</b>   |  |   |  |
|   | Insurance Company<br><b>USAA-GENERAL-INDEMNITY-CO</b>              |  | Individual<br><b>ADAM TAYLOR</b>                                |  |
| UNIT<br>INDIVIDUAL                            | <b>Individual</b>  |  |   |  |
|   | Driver<br><b>ADAM DAVID TAYLOR<br/>(608) 477-3779</b>              |  | Citations Issued<br><b>0</b>                                    | Sex<br><b>MALE</b>                             |
|   | Address<br><b>540 WEST ST<br/>LA VALLE, WI 53941 , US</b>          |  | Date of Birth<br>[REDACTED]                                     | Race<br><b>WHITE</b>                           |
|   |  |  | Driver License Number<br>[REDACTED]                             | <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b> |
| 01  | <b>Safety Equipment</b>  |  | On Duty Crash   |  |
|   |  |  | Safety Equipment  |  |
|   | Row<br><b>01 - FRONT ROW</b>                                       | Seat Position<br><b>07 - LEFT</b>                              | <b>SHOULDER &amp; LAP BELT</b>                                  |  |
|   | Helmet Use   |  | Helmet Compliance   |  |
|   | Eye Protection   |  | Tint Compliance   |  |
|   | <b>Injury</b>  |  | Injury Severity<br><b>NO APPARENT INJURY</b>                    | Airbag<br><b>NON DEPLOYED</b>                  |
| Ejected<br><b>NOT EJECTED</b>                 |  | Ejection Path<br><b>NOT EJECTED/NOT APPLICABLE</b>             |   | Trapped/Extricated<br><b>NOT TRAPPED</b>       |
| Medical Transport<br><b>NOT TRANSPORTED</b>   |  | EMS Agency Identifier  |   | EMS Run #                                      |
| Hospital                                      |  | Date of Death  |   | Time of Death                                  |
| <b>Distracted By</b>                          |  | Distracted By Source<br><b>NOT APPLICABLE (NOT DISTRACTED)</b> |   |  |
| Distracted By Action<br><b>NOT DISTRACTED</b> |  |  |   |  |

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|             |                            |   |  |                 |                                    |   |                      |  |
|-------------|----------------------------|---|--|-----------------|------------------------------------|---|----------------------|--|
| <b>UNIT</b> | <b>INDIVIDUAL</b>          | <b>Non Motorist</b>   |  | Striking Unit # | Location                           |   |                      |  |
|             |                            | Prior Action  |  |                 |                                    |   |                      |  |
|             |                            | Action  |  |                 |                                    |   |                      |  |
|             | Action Other               |   |  |                 |                                    |   | To/From School       |  |
|             | <b>01</b>                  | <b>001</b>  | <b>Drug &amp; Alcohol</b>                      |                 | Suspected Alcohol Use<br><b>NO</b> | Suspected Drug Use<br><b>NO</b>   |                      |  |
|             |                            |   | Alcohol Test Given<br><b>TEST NOT GIVEN</b>    |                 | Alcohol Test Type                  |   | Alcohol Test Results |  |
|             |                            |   | Drug Test Given<br><b>TEST NOT GIVEN</b>       |                 | Drug Test Type                     |   | Drug Test Results    |  |
|             |                            |   | Drug Type                                      |                 |                                    |   |                      |  |
|             |                            |   | Individual Condition<br><b>APPEARED NORMAL</b> |                 |                                    |   |                      |  |
|             | <b>Property Owner</b>      |   |  |                 |                                    |   |                      |  |
| <b>01</b>   | <b>PROP OWNER</b>          | Individual<br><b>DALE ROBERT THOMPSON</b><br>(608) 985-7762 |  |                 |                                    | Address<br><b>S2320 BODENDEIN RD</b><br><b>REEDSBURG, WI 53959 , US</b> |                      |  |
|             |                            | <b>Fixed Objects Struck</b>                                 |  |                 |                                    |   |                      |  |
| <b>01</b>   | Striking Unit<br><b>01</b> |   | Struck Object<br><b>FENCE</b>                  |                 |                                    | Structure Number  | Damage Tag Number    |  |