

6TL0DJJ8W9  
23-00609

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>23-00609</b>	Investigating Officer/Deputy <b>DEPUTY J. TROTH</b>	
Crash Date <b>01/18/2023</b>		Crash Time <b>07:51 PM</b>	Date Arrived <b>01/18/2023</b>	Time Arrived <b>08:03 PM</b>	
Date Notified <b>01/18/2023</b>		Time Notified <b>07:53 PM</b>	Total Units <b>01</b>	Total Injured <b>01</b>	Total Killed <b>00</b>
<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 checked="" 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

<p>Diagram</p> <p>Ishnala Rd</p>	Reconstruction By
	Photos By <b>DEPUTY TROTH</b>
	Additional Information <b>PHOTOS</b>

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

CALVIN POESCHEL WAS EAST BOUND ON INSHNALA RD. CALVIN CAME AROUND THE RIGHT HAND CURVE AT A HIGH RATE OF SPEED. CALVIN ENTERED THE WEST BOUND DITCH AND CONTINUED UNTIL HE STRUCK THE CULVERT. CALVIN THEN BECAME AIRBORNE OVER THE DRIVEWAY OF S2144 INSHNALA RD. CALVIN'S VEHICLE THEN FLIPPED IN THE AIR COMING TO REST AGAINST A LARGE TREE. THE VEHICLE CAME TO REST FACING WEST BOUND.

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## Location

<b>ON S2144 ISHNALA RD</b> <b>0.32 MI S</b> <b>OF IH90 EB</b> <b>(FIRE S2144)</b>  <b>IN THE TOWN OF DELTON</b> <b>IN SAUK COUNTY</b>	Latitude <b>43.568046852</b>	Longitude <b>-89.797831917</b>
	X Coordinate <b>274060.71875</b>	Y Coordinate <b>4827702</b>
	Structure Type <b>FIRE</b>	

## Crash Scene

First Harmful Event <b>CULVERT</b>		First Harmful Event Location <b>SHOULDER LEFT</b>	
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>		Light Condition <b>DARK/UNLIT</b>	
Road Surface Condition(s) <b>SAND, GRAVEL</b>		Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>			
Weather Condition(s) <b>CLOUDY</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>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>	
Closure Type <b>FULL CLOSURE</b>		Reasons for Closure <b>LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS</b>	
Date Initial Lane/Rd Closed <b>01/18/2023</b>	Time Initial Lane/Rd Closed <b>07:58 PM</b>	Date Scene Cleared <b>01/18/2023</b>	
Date All Lanes Open <b>01/18/2023</b>	Time All Lanes Open <b>08:42 PM</b>		

## Unit Summary

<b>UNIT</b>	<b>01</b>	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>2</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 CrashTire Mark	Speed Limit <b>55</b>	Total Lanes <b>2</b>	
	Most Harmful Event: Collision With <b>CULVERT</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>CURVE RIGHT</b>		Road Grade <b>DOWNHILL</b>	
	Truck Bus or HazMat <b>NO</b>					
	<b>01</b>	<b>Vehicle</b>				
		License Plate Number <b>AHV9827</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
Vehicle Identification Number <b>1FAFP40413F356402</b>	Make <b>FORD</b>	Year <b>2003</b>	Model <b>MUSTANG</b>			

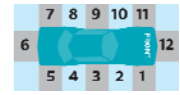
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UNIT VEHICLE	Color <b>BLK - BLACK</b>	Body Style <b>CP - COUPE</b>	Bus Use
	Initial Contact Point <b>12 - FRONT</b>	Vehicle Damage	
	Extent Of Damage <b>DISABLING DAMAGE</b>	<b>15 - ALL AREAS</b>	
	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>	Vehicle Removed By <b>PLATTS WRECKER</b>	
	What Driver Was Doing <b>NEGOTIATING CURVE</b>	Vehicle Factors	
Driver Prior Action Other	<b>NOT APPLICABLE</b>		
UNIT VEHICLE	Driver Actions <b>EXCEED SPEED LIMIT, FAILURE TO CONTROL, OVER-CORRECTING/OVER-STEERING</b>		
	Owner Name <b>CALVIN POESCHEL (715) 530-3715</b>	Owner Address <b>W28324 RAINEY VALLEY RD ARCADIA, WI 54612 , US</b>	
<b>Sequence Of Events</b>			
UNIT	01	Event <b>CULVERT</b>	
	02	Event	
	03	Event	
	04	Event	
UNIT	<b>Policy Holder</b>		
	Insurance Company <b>EQUITY-MUTUAL-INS-CO</b>	Individual <b>CALVIN POESCHEL</b>	
UNIT INDIVIDUAL	<b>Individual</b>		
	Driver <b>CALVIN POESCHEL (715) 530-3715</b>	Citations Issued <b>2</b>	Sex <b>MALE</b>
		Date of Birth	Race <b>WHITE</b>
	Address <b>W28324 RAINEY VALLEY RD ARCADIA, WI 54612 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
UNIT	<b>Safety Equipment</b>		On Duty Crash
			Safety Equipment
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>SHOULDER &amp; LAP BELT</b>
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
UNIT	<b>Injury</b>	Injury Severity <b>POSSIBLE INJURY</b>	Airbag <b>DEPLOYED-FRONT</b>
	Ejected <b>PARTIALLY EJECTED</b>	Ejection Path <b>THROUGH BACK WINDOW</b>	Trapped/Extricated <b>NOT TRAPPED</b>
	Medical Transport <b>EMS GROUND</b>	EMS Agency Identifier <b>6000123</b>	EMS Run #



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Hospital <b>ST CLARE HOSP</b>		Date of Death	Time of Death
<b>Distracted By</b> Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>			
Distracted By Action <b>NOT DISTRACTED</b>			
<b>Non Motorist</b>		Striking Unit #	Location
Prior Action			
Action			
Action Other			To/From School
<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>YES</b>	Suspected Drug Use <b>YES</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>UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL</b>			
<b>Violations</b>			
01	UTC Number <b>BI587949</b>	Issue To? <b>001</b>	Statute Number <b>346.63(1)(a)</b>
	Description <b>OWI (5th or 6th)</b>		
02	UTC Number <b>BI587951</b>	Issue To? <b>001</b>	Statute Number <b>346.57(2)</b>
	Description <b>UNREASONABLE AND IMPRUDENT SPEED</b>		
<b>Property Owner</b>			
PROP OWNER 01	Government <b>TOWNSHIP OF DELTON</b> (608) 253-4621		Address <b>30 WISCONSIN DELLS PKY S</b> <b>LAKE DELTON, WI 53940 , US</b>
<b>Fixed Objects Struck</b>			
01	Striking Unit <b>01</b>	Struck Object <b>CULVERT</b>	Structure Number <b>338401</b>