

6TL0B655VS
23-00636

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 23-00636		Investigating Officer/Deputy DEPUTY W. NEUBAUER	
Crash Date 01/19/2023		Crash Time 10:40 AM		Date Arrived 01/19/2023		Time Arrived 10:55 AM	
Date Notified 01/19/2023		Time Notified 10:45 AM		Total Units 01		Total Injured 03	Total Killed 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"/> 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	
<input type="checkbox"/> Trailer or Towed		<input type="checkbox"/> Reporting Threshold					

Description

Diagram		Reconstruction By	
<p>NOT TO SCALE</p> <p>STH 23</p>		Photos By	
		Additional Information NONE	

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

UNIT 1 WAS TRAVELING W/B ON STH 23 NEAR COON BLUFF RD. UNIT 1 DRIVER LOST CONTROL AND LEFT THE ROADWAY TO THE LEFT. UNIT 1 ENTERED THE SOUTH SIDE DITCH, ROLLED, AND CAME TO REST ON ITS ROOF FACING SOUTH. UNIT 1 OCCUPANTS WERE TRANSPORTED VIA AMBULANCE TO RAMC FOR SUSPECTED MINOR INJURIES.

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Location

ON STH23 WB 0.57 MI E OF COON BLUFF RD IN THE TOWN OF EXCELSIOR IN SAUK COUNTY	Latitude 43.547408165	Longitude -89.855804827
	X Coordinate 269300.125	Y Coordinate 4825569
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event DITCH	First Harmful Event Location ROADSIDE	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAYLIGHT	
Road Surface Condition(s) WET, SNOW, SLUSH, ICE	Roadway Factor(s) ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)	
Environment Factor(s) WEATHER CONDITIONS		
Weather Condition(s) CLOUDY, RAIN, SNOW		
Animal Type	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION

Unit Summary

UNIT	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER VAN	Operating As Endorsements			
	Total Occs 3	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? NO	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With DITCH	Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED	Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)	Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO				

Vehicle

UNIT	VEHICLE	License Plate Number AKZ9053	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
		Vehicle Identification Number 2B8GP54L51R107771	Make DODGE	Year 2001	Model GRAND CARA	
		Color RED - RED	Body Style VN - VAN		Bus Use	
		Initial Contact Point 00 - NON-COLLISION	Vehicle Damage			
		Extent Of Damage DISABLING DAMAGE	15 - ALL AREAS			



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UNIT	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By STEVES AUTO SERVICE		
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions SPEED TOO FAST/COND				
01	01	Owner Name JESSICA CASTEEL (608) 477-3494	Owner Address 308 BADERS VILLA EST E NEW LISBON, WI 53950 , US		
		Sequence Of Events			
01	01	Event RUN OFF ROADWAY LEFT			
		Event OVERTURN/ROLLOVER			
		Event DITCH			
		Event			
01	01	Individual			
		Driver TIMOTHY COOK (608) 477-3494	Citations Issued 0	Sex MALE	
			Date of Birth	Race WHITE	
		Address 308 BADERS VILLA EST E NEW LISBON, WI 53950 , US	Driver License Number		
01	001	Safety Equipment		Safety Equipment	
		On Duty Crash			
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
		Helmet Use	Helmet Compliance		
	Eye Protection		Tint Compliance		
	Injury Severity SUSPECTED MINOR INJURY	Airbag DEPLOYED-FRONT			
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED		
	Medical Transport EMS GROUND	EMS Agency Identifier 6001024	EMS Run #		
	Hospital REEDSBURG AREA MED CTR	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	

UNIT	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		
	Individual		
	Passenger JESSICA CASTEEL	Citations Issued 0	Sex FEMALE
	Date of Birth	Race WHITE	
Address 541 N DEWEY AVE APT 3 REEDSBURG, WI 53959 , US	Driver License Number -----		
Safety Equipment	On Duty Crash	Safety Equipment SHOULDER & LAP BELT	
Row 01 - FRONT ROW	Seat Position 09 - RIGHT	Helmet Compliance	
Helmet Use	Tint Compliance		
Eye Protection	Airbag DEPLOYED-FRONT		
Injury	Injury Severity SUSPECTED MINOR INJURY		
Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED	
Medical Transport EMS GROUND	EMS Agency Identifier 6001024	EMS Run #	
Hospital REEDSBURG AREA MED CTR	Date of Death	Time of Death	
Distracted By	Distracted By Source		
Distracted By Action			
Non Motorist	Striking Unit #	Location	
Prior Action			

UNIT	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		
	Individual		
	Passenger TRINITY COOK (608) 477-3494	Citations Issued 0	Sex FEMALE
	Address 308 BADERS VILLA EST E NEW LISBON, WI 53950 , US	Date of Birth WHITE	
Driver License Number			
UNIT	Safety Equipment	On Duty Crash	Safety Equipment
	Row 02 - SECOND ROW	Seat Position 08 - MIDDLE	CHILD RESTRAINT SYSTEM - FORWARD FACING
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	Injury	Injury Severity POSSIBLE INJURY	Airbag NON DEPLOYED
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
	Medical Transport EMS GROUND	EMS Agency Identifier 6001024	EMS Run #
	Hospital REEDSBURG AREA MED CTR	Date of Death	Time of Death
	Distracted By	Distracted By Source	
	Distracted By Action		
Non Motorist	Striking Unit #	Location	
Prior Action			

UNIT	INDIVIDUAL	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			