

6TL0BNZM4X
23-00751

WISCONSIN MOTOR VEHICLE
CRASH REPORT

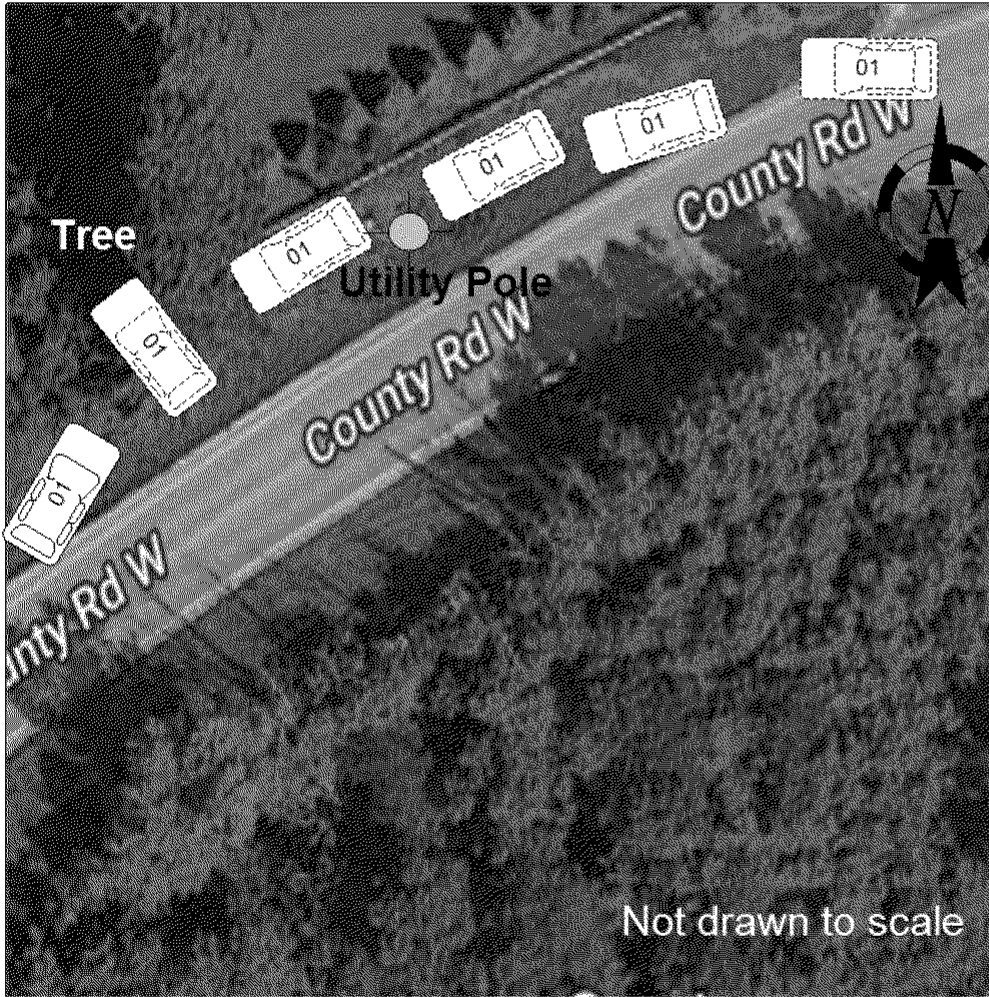
SAUK COUNTY SHERIFFS DEPARTMENT
1300 LANGE COURT
BARABOO, WI 53913
(608) 356-4895

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Document Number Override		Primary Crash Document#		Agency Crash Number 23-00751		Investigating Officer/Deputy DEPUTY K. RENZ	
Crash Date 01/22/2023		Crash Time 11:40 PM		Date Arrived 01/22/2023		Time Arrived 11:52 PM	
Date Notified 01/22/2023		Time Notified 11:45 PM		Total Units 01		Total Injured 01	Total Killed 01
<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 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	

Description

Diagram



Reconstruction By
SAUK COUNTY SHERIFF

Photos By
RENZ 9148, SAUK CO SHERIFF'S DEPT

Additional Information
PHOTOS, RECONSTRUCTION,
FATAL CRASH SUPPLEMENT

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

ON 1/22/2023 AT APPROXIMATELY 11:40 P.M, UNIT 1 WAS TRAVELING WESTBOUND ON HWY W NEAR FAIRVIEW ROAD. UNIT 1 WAS NEGOTIATING A LEFT CURVE WHEN IT LOST CONTROL AND ENTERED THE DITCH ON THE NORTH SIDE OF HWY W. UNIT 1 ENTERED THE DITCH AND STRUCK A UTILITY POLE, BREAKING IT OFF. UNIT 1 CONTINUED IN THE DITCH AND STRUCK A TREE ON THE NORTH SIDE OF THE ROAD. UNIT 1 THEN SPUN AROUND AND THE VEHICLE CAME TO REST IN THE NORTH SIDE OF HWY W. UNIT 1 SUSTAINED MAJOR DISABLING DAMAGE. THERE WERE TWO OCCUPANTS IN THE VEHICLE. THE DRIVER SUSTAINED INJURIES AND WAS TRANSPORTED VIA AMBULANCE TO ST. CLARE HOSPITAL. THE PASSENGER WAS PRONOUNCED DECEASED AT THE CRASH SCENE.

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Location

ON E10096A CTHW WB 371 FT W OF FARVIEW RD (HOUSE/BUILDING E10096A) IN THE TOWN OF BARABOO IN SAUK COUNTY	Latitude 43.446612272	Longitude -89.819627013
	X Coordinate 271843.28125	Y Coordinate 4814274.5
	Structure Type HOUSE/BUILDING	

Crash Scene

First Harmful Event DITCH	First Harmful Event Location ROADSIDE	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DARK/UNLIT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLOUDY		
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
Closure Type FULL CLOSURE	Reasons for Closure LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS	
Date Initial Lane/Rd Closed 01/23/2023	Time Initial Lane/Rd Closed 12:03 AM	
Date All Lanes Open 01/23/2023	Time All Lanes Open 04:43 AM	Date Scene Cleared 01/23/2023
		Time Scene Cleared 04:43 AM

Unit Summary

UNIT	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE		
	Vehicle Type PASSENGER CAR	Operating As Endorsements			
	Total Occs 2	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel WESTBOUND	<input checked="" 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 CURVE LEFT	Road Grade DOWNHILL		
	Truck Bus or HazMat NO				

Vehicle

01	License Plate Number AKA3754	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 2G1WF5EK4B1243195	Make CHEVROLET	Year 2011	Model IMPALA

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UNIT VEHICLE	Color GRY - GRAY	Body Style SD - SEDAN	Bus Use
	Initial Contact Point 12 - FRONT	Vehicle Damage	
	Extent Of Damage DISABLING DAMAGE	15 - ALL AREAS	
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By CRAIGS TOWING	
	What Driver Was Doing NEGOTIATING CURVE	Vehicle Factors	
Driver Prior Action Other	NOT APPLICABLE		
UNIT VEHICLE	Driver Actions FAILURE TO CONTROL		
	Owner Name TIMOTHY JOSHUA OLSON (608) 495-4229	Owner Address 305 2ND AVE BARABOO, WI 53913 , US	
UNIT VEHICLE	Sequence Of Events		
	Event DITCH		
	Event UTILITY POLE		
	Event TREE		
UNIT VEHICLE	Event		
UNIT VEHICLE	Policy Holder		
	Insurance Company PROGRESSIVE-CLASSIC-INS-CO	Individual TIMOTHY OLSON	
UNIT INDIVIDUAL	Individual		
	Driver TIMOTHY JOSHUA OLSON (608) 495-4229	Citations Issued 0	Sex MALE
		Date of Birth [REDACTED]	Race WHITE
	Address 305 2ND AVE BARABOO, WI 53913 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
UNIT INDIVIDUAL	Safety Equipment		On Duty Crash
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	Safety Equipment SHOULDER & LAP BELT
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	Injury	Injury Severity SUSPECTED MINOR INJURY	Airbag DEPLOYED-FRONT
UNIT INDIVIDUAL	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
	Medical Transport EMS GROUND	EMS Agency Identifier 6000368	EMS Run# 2301222353BDAS

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UNIT INDIVIDUAL	Hospital ST CLARE HOSP		Date of Death	Time of Death
	Distracted By Distracted By Source UNKNOWN			
	Distracted By Action UNKNOWN			
	Non Motorist		Striking Unit #	Location
	Prior Action			
	Action			
	Action Other			To/From School
	Drug & Alcohol		Suspected Alcohol Use YES	Suspected Drug Use NO
	Alcohol Test Given TEST GIVEN		Alcohol Test Type BLOOD	Alcohol Test Results PENDING
	Drug Test Given TEST GIVEN		Drug Test Type BLOOD	Drug Test Results PENDING
Drug Type				
Individual Condition APPEARED NORMAL				
UNIT INDIVIDUAL	Individual			
	Passenger NICHOLAS SAUL RIZZIO (608) 415-8821		Citations Issued 0	Sex MALE
	Address 449 N WALNUT ST # B REEDSBURG, WI 53959 , US		Date of Birth [REDACTED]	Race WHITE
			Driver License Number [REDACTED]	STATE: WISCONSIN COUNTRY: UNITED STATES
	Safety Equipment		On Duty Crash	Safety Equipment
	Row 01 - FRONT ROW	Seat Position 09 - RIGHT	SHOULDER & LAP BELT	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	Injury		Injury Severity FATAL INJURY	Airbag DEPLOYED-FRONT
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED	
Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #	
Hospital		Date of Death 01/23/2023	Time of Death 00:42	

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UNIT INDIVIDUAL 01 002	Distracted By		Distracted By Source		
	Distracted By Action				
	Non Motorist		Striking Unit #	Location	
	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					