

6TL0C9H5MK
23-01886

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 23-01886 | Investigating Officer/Deputy SERGEANT M. TATE | |
| Crash Date 02/23/2023 | | Crash Time 07:50 AM | Date Arrived 02/23/2023 | Time Arrived 07:53 AM | |
| Date Notified 02/23/2023 | | Time Notified 07:52 AM | Total Units 01 | Total Injured 00 | 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"/> 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 type="checkbox"/> Reportable | Crash Type DT4000 (STANDARD CRASH) | | <input type="checkbox"/> Amended | <input type="checkbox"/> Secondary Crash | |

Description

| | |
|--|------------------------|
| Diagram <p style="text-align: center;">SLIDE OFF ONLY. NO DAMAGE.</p> | Reconstruction By |
| | Photos By |
| | Additional Information |

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

UNIT 1 WAS NORTHBOUND ON HWY 12 WHEN THE OPERATOR STATED HE LOST CONTROL ON THE ICE AND SLID INTO THE DITCH. NO INJURIES OR DAMAGE. VEHICLE PULLED OUT BY CRAIGS TOWING.

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Location

| | | |
|---|--------------------------------|----------------------------|
| ON USH12 WB 0.28 MI N OF TERRYTOWN RD IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY | Latitude 43.489071031 | Longitude -89.778768187 |
| | X Coordinate 275307.0625 | Y Coordinate 4818879 |
| | 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) NONE | |
| Environment Factor(s) WEATHER CONDITIONS | | |
| Weather Condition(s) SNOW, FREEZING RAIN OR FREEZING DRIZZLE | | |
| 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 CAR | Operating As Endorsements | | | |
| | Total Occs 1 | Train/Bus # Recorded | Total # Citations Issued 0 | Total Trailers 0 | Total HazMat Types 0 |
| | Insurance? YES | Direction Of Travel NORTHBOUND | <input type="checkbox"/> Pre Crash Tire Mark | Speed Limit 65 | Total Lanes 4 |
| | Most Harmful Event: Collision With DITCH | Special Function NO SPECIAL FUNCTION | | Emergency Motor Vehicle Use NOT APPLICABLE | |
| | Traffic Way DIVIDED HWY MEDIAN W/BARRIER | 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 320SWX | Plate Type AUT - AUTOMOBILE | St WI | Country of Issuance UNITED STATES |
| | | Vehicle Identification Number 1N4BL4BV2LC227974 | Make NISSAN | Year 2020 | Model ALTIMA |
| | | Color BLK - BLACK | Body Style SD - SEDAN | | Bus Use |
| | | Initial Contact Point 00 - NON-COLLISION | Vehicle Damage | | |
| | | Extent Of Damage NO DAMAGE | 00 - NO DAMAGE | | |



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| | | | | |
|---|---|--|---|--|
| UNIT VEHICLE | Towed Due To Damage NOT TOWED | | Vehicle Removed By | |
| | What Driver Was Doing GOING STRAIGHT | | Vehicle Factors | |
| | Driver Prior Action Other | | NOT APPLICABLE | |
| | Driver Actions SPEED TOO FAST/COND | | | |
| 01 01 | Owner Name DOUGLAS JOHN BRADLEY (715) 716-0253 | | Owner Address 1310 WALNUT ST # 7 BARABOO, WI 53913 , US | |
| | Sequence Of Events | | | |
| 01 01 | 01 | Event DITCH | | |
| | 02 | Event | | |
| | 03 | Event | | |
| | 04 | Event | | |
| UNIT | Policy Holder | | | |
| | Insurance Company PROGRESSIVE-CLASSIC-INS-CO | | Individual DOUGLAS BRADLEY | |
| UNIT INDIVIDUAL | Individual | | | |
| | Driver DOUGLAS JOHN BRADLEY (715) 716-0253 | | Citations Issued 0 | Sex MALE |
| | Address 1310 WALNUT ST # 7 BARABOO, WI 53913 , US | | Date of Birth [REDACTED] | Race WHITE |
| | Driver License Number [REDACTED] | | STATE: WISCONSIN COUNTRY: UNITED STATES | |
| 01 001 | Safety Equipment | | On Duty Crash | |
| | Safety Equipment | | SHOULDER & LAP BELT | |
| | Row 01 - FRONT ROW | Seat Position 07 - LEFT | Helmet Compliance | |
| | Helmet Use | | Tint Compliance | |
| | Eye Protection | | Airbag NON DEPLOYED | |
| | Injury | | Injury Severity NO APPARENT INJURY | Trapped/Extricated NOT TRAPPED |
| Ejected NOT EJECTED | | Ejection Path NOT EJECTED/NOT APPLICABLE | | |
| Medical Transport NOT TRANSPORTED | | EMS Agency Identifier | EMS Run # | |
| Hospital | | Date of Death | Time of Death | |
| Distracted By | | Distracted By Source NOT APPLICABLE (NOT DISTRACTED) | | |
| Distracted By Action NOT DISTRACTED | | | | |

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|---|--|------------------------------------|-------------------|---------------------------------|----------------------|--|
| UNIT INDIVIDUAL 01 001 | 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 | | | | | |
| | Property Owner | | | | | |
| PROP OWNER 01 | Individual | | Address , , | | | |
| Fixed Objects Struck | | | | | | |
| 01 | Striking Unit | Struck Object | | Structure Number | Damage Tag Number | |