

6TL0CX0QC3
23-05411

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 23-05411	Investigating Officer/Deputy DEPUTY K. MCCARTY	
Crash Date 05/28/2023		Crash Time 11:27 PM	Date Arrived 05/28/2023	Time Arrived 11:38 PM	
Date Notified 05/28/2023		Time Notified 11:29 PM	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 checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

<p>Diagram</p> <p>NOT TO SCALE</p>	Reconstruction By
	Photos By MCCARTY #9130
	Additional Information PHOTOS

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

UNIT 1 WAS TRAVELING EB ON HY 12 JUST PASSING THE FERN DELL RD OFF RAMP WHEN A DEER RAN ACROSS RDWY. OPERATOR OF UNIT 1 REPORTED STRIKING DEER AND LOSING CONTROL OF VEHICLE. UNIT 1 STRUCK GUARD RAIL FACE CAUSING DISABLING DAMAGE TO ALL AREAS. NO INJURIES REPORTED. CRAIG'S TOWING REMOVED VEHICLE. SAUK CO HWY DEPT MADE AWARE OF DAMAGE TO GUARD RAIL.

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Location

ON USH12 EB 176 FT S OF MOON RD IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude 43.560818776	Longitude -89.778610453
	X Coordinate 275586.15625	Y Coordinate 4826847.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event NON DOMESTICATED ANIMAL (ALIVE)	First Harmful Event Location ON ROADWAY	
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) CLEAR		
Animal Type DEER	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 01	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 EASTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 4
	Most Harmful Event: Collision With GUARDRAIL FACE	Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way DIVIDED HWY W/TRAFFIC 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				

UNIT 01 VEHICLE	Vehicle			
	License Plate Number ASE6587	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1G1AD5F58A7147709	Make CHEVROLET	Year 2010	Model COBALT
	Color RED - RED	Body Style SD - SEDAN		Bus Use
	Initial Contact Point 12 - FRONT	Vehicle Damage 15 - ALL AREAS		
Extent Of Damage DISABLING DAMAGE				



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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By CRAIGS TOWING	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
01	Owner Name ELVER MENDEZ DUARTE (608) 844-0514		Owner Address 111 SILVER DR REEDSBURG, WI 53959 , US	
	Sequence Of Events			
01	01	Event NON DOMESTICATED ANIMAL (ALIVE)		
	02	Event GUARDRAIL FACE		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company DAIRYLAND-AMERICAN-INS-CO		Individual ELVER MENDEZ DUARTE	
UNIT INDIVIDUAL	Individual			
	Driver ELVER MENDEZ DUARTE (608) 844-0514		Citations Issued 0	Sex MALE
	Address 111 SILVER DR REEDSBURG, WI 53959 , US		Date of Birth	Race HISPANIC
	Driver License Number		STATE: WISCONSIN COUNTRY: UNITED STATES	
01	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 NO APPARENT INJURY	Airbag NON DEPLOYED
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		Time of Death
Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				

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UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
01	001	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 ANGIE ALFONSO NOVA (608) 844-0019			Citations Issued 0	Sex FEMALE	
		Address 111 SILVER DR REEDSBURG, WI 53959 , US			Date of Birth	Race HISPANIC	
		Driver License Number					
01	002	Safety Equipment		On Duty Crash			
				Safety Equipment SHOULDER & LAP BELT			
		Row 01 - FRONT ROW	Seat Position 09 - RIGHT				
		Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
		Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED		
		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	Time of Death		
		Distracted By		Distracted By Source			
Distracted By Action							
Non Motorist		Striking Unit #	Location				

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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				
	01	002			