

6TL0D2XVR2
23-05941

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

6TL0D2XVR2

Document Number Override		Primary Crash Document #		Agency Crash Number 23-05941		Investigating Officer/Deputy DEPUTY B. SCHLOUGH	
Crash Date 06/09/2023		Crash Time 12:58 PM		Date Arrived 06/09/2023		Time Arrived 01:12 PM	
Date Notified 06/09/2023		Time Notified 01:03 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

Diagram		Reconstruction By	
		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 S/B ON CTH G AND ATTEMPTED TO NEGOTIATE A LEFT CURVE AND PROCEED E/B ON CTH G. OPERATOR OF UNIT 1 LOST CONTROL ON SOME GRAVEL IN THE ROADWAY WHILE NEGOTIATING THE CURVE CAUSING UNIT 1 TO OVERTURN. UNIT 1 THEN SLID APPROXIMATELY 125 FT ON IT'S LEFT SIDE BEFORE COMING TO REST ON THE E/B SHOULDER FACING EAST.

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Location

ON CTHG EB 118 FT E OF MERCER RD IN THE TOWN OF SPRING GREEN IN SAUK COUNTY	Latitude 43.206284763	Longitude -90.111731339
	X Coordinate 247210.078125	Y Coordinate 4788425
	Structure Type	

Crash Scene

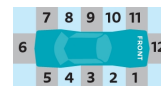
First Harmful Event OVERTURN/ROLLOVER	First Harmful Event Location ON ROADWAY	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) LOOSE GRAVEL	
Environment Factor(s) NONE		
Weather Condition(s) CLEAR		
Animal Type	Relation 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 01	Unit Status IN TRANSIT	Vehicle Operating As Classification M CLASS		Unit Type MOTORCYCLE		
	Vehicle Type MOTORCYCLE			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 EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With OVERTURN/ROLLOVER		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 LEVEL	
	Truck Bus or HazMat NO					

Vehicle

UNIT 01 VEHICLE 01	License Plate Number ZC746	Plate Type CYC - CYCLE	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number JKAZXCE108A000831	Make KAWASAKI	Year 2008	Model ZX1000-E	
	Color BLK - BLACK	Body Style MC - MOTORCYCLE		Bus Use	
	Initial Contact Point 09 - LEFT SIDE MIDDLE	Vehicle Damage 09 - LEFT SIDE MIDDLE			
	Extent Of Damage FUNCTIONAL DAMAGE				



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UNIT	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR		
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions NO CONTRIBUTING ACTION				
01	01	Owner Name JOHN KOTT (262) 951-0155		Owner Address N719 HWY 67 ASHIPPUN, WI 53003 , US	
		Sequence Of Events			
UNIT	01	Event OVERTURN/ROLLOVER			
		Event			
		Event			
		Event			
UNIT	01	Policy Holder			
		Insurance Company GEICO-CASUALTY-CO	Individual JOHN KOTT		
UNIT	01	Individual			
		Driver JOHN KOTT (262) 951-0155	Citations Issued 0	Sex MALE	
		Address N719 HWY 67 ASHIPPUN, WI 53003 , US		Date of Birth	Race WHITE
		Driver License Number			
01	001	Safety Equipment		On Duty Crash	
		Row 06 -UNKNOWN ROW	Seat Position 07 - LEFT	Protective Gear GLOVES, BOOTS, JACKET, LONG PANTS	
		Helmet Use FULL-FACE		Helmet Compliance APPROVED	
		Eye Protection YES: WINDSHIELD		Tint Compliance UNKNOWN	
		Injury		Airbag	
		Injury Severity NO APPARENT INJURY		NOT APPLICABLE	
		Ejected NOT APPLICABLE	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED	
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier	
Hospital		EMS Run #			
Date of Death		Time of Death			
Distracted By		Distracted By Source			
NOT DISTRACTED		NOT APPLICABLE (NOT DISTRACTED)			
Distracted By Action					
NOT DISTRACTED					

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UNIT	INDIVIDUAL	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						
	01	001					