

6TN0B3P3B1

23-06740

WISCONSIN DNR ALL-TERRAIN VEHICLE (ATV) CRASH REPORT

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

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Crash Date TUESDAY 06/27/2023		Crash Time 03:04 PM	Investigating Officer/Deputy DEPUTY J. GREENWOOD	
Date Notified 06/27/2023		Time Notified 03:04 PM	<input checked="" type="checkbox"/> Reportable	Crash Type ALL-TERRAIN VEHICLE (ATV)
Date Arrived 06/27/2023		Time Arrived 03:05 PM	Total Property Damage (Estimated) \$2,000.00	
Total Units 02	Injured 01	Killed 00	Missing 00	Weather Condition(s) CLEAR
Daytime Visibility Good		Night Time Visibility Not Applicable		
Air Temperature		Water Temperature		Road/Trail Conditions Dry
Wind Conditon		Water Condition		

Description

<p>Diagram</p>	<p>Additional Information NONE</p>
<p>UNIT 1 WAS EXITING A PARKING LOT. UNIT 1 SHIFTED INTO 2ND GEAR CAUSING THE TIRES TO COME OFF THE PAVEMENT. UNIT 1 WAS UNABLE TO STEER AND STRUCK PARKED UNIT 2.</p>	

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Location

IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY	Latitude 43.476202739	Longitude -89.763450368
	X Coordinate 276498.25	Y Coordinate 4817408.5
Location Classification ROUTE	Name of Waterbody	

Sequence Of Events

Event COLLISION WITH VEHICLE
Event EJECTED

Unit Summary

UNIT	Unit Status BORROWED	Vehicle Type ALL TERRAIN VEHICLE	Total Unit Damage (Estimated)		
	Owner ETHAN SPROTTE BARABOO, WI 53913 8517, US	Registration Type	St WI	Reg Exp Date	Make YAMAHA
		Model 770	Color BLK - BLACK		Year 2005

Officer Advised Operator To Complete and Submit Operator Incident Report.

UNIT	Total Persons 01	Total Person Capacity 01	Total Persons Towed 00	
	Estimated Speed NONE	Unit Activities Recreational-Leisure		
	Engine Size			

UNIT		Initial Contact Point 1--RIGHT FRONT CORNER	Location After Incident Residence
		Vehicle Damage 1--RIGHT FRONT CORNER, 12--FRONT	
		Describe Damage BENT HANDLE BARS	

Vehicle Damage Estimate	Property Damage Estimate
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Contributing Factors

Contributing Factor Careless/Reckless Operation
Contributing Factor Operator Inexperience

Individuals

Individual MICHAEL WILLIS REEDSBURG, WI 53959, US

001	Equipment	<input type="checkbox"/> Helmet Use	<input type="checkbox"/> Eye Protection Use	<input type="checkbox"/> Seat Belt
	Experience	Safety Certification None		<input type="checkbox"/> Statement

Injury	Injury Severity MEDICAL TREATMENT BEYOND 1ST AID
	Most Serious Injury Arm(s)

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UNIT	Injury Type Laceration		<input type="checkbox"/> Lifejacket Worn Before Incident		<input type="checkbox"/> Lifejacket Worn After Incident	
	Fatality		Cause of Death		Activity of Victim	
	<input type="checkbox"/> Swimming Ability		Date of Death		Time of Death	
	Drug & Alcohol		Individual Condition APPEARED NORMAL			
	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					

Violations			
01	Statute Number 23.33(5)(b)1	Description OPERATE ALL-TERRAIN VEHICLE WITHOUT VALID SAFETY CERTIFICATE	
	Document Number 6T50B3P3B3	Issue To? WILLIS, MICHA	

Unit Summary

UNIT	Unit Status OWNED	Vehicle Type OTHER		Total Unit Damage (Estimated) \$2,000.00	
	Owner DAVID ZASTROW NORTH FREEDOM, WI 53951, US	Registration Type LTK	St WI	Reg Exp Date 11/30/2023	Make CHEVROLET
		Model SILVERADO		Color GRY - GRAY	Year 2017

02	<input type="checkbox"/> Officer Advised Operator To Complete and Submit Operator Incident Report.
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Total Persons 01		Total Person Capacity 06	Total Persons Towed 00
Estimated Speed NONE	Unit Activities Other		
Engine Size			

UNIT			Initial Contact Point 7--LEFT REAR CORNER	Locaton After Incident Residence
			Vehicle Damage 7--LEFT REAR CORNER	
			Describe Damage DAMAGED RIGHT REAR TRUCK BOX	
			Vehicle Damage Estimate \$2,000.00	Property Damage Estimate

Contributing Factors

Individuals

Individual DAVID ZASTROW NORTH FREEDOM, WI 53951, US			
Equipment	<input type="checkbox"/> Helmet Use	<input type="checkbox"/> Eye Protection Use	<input type="checkbox"/> Seat Belt

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UNIT	002	Experience	Safety Certification	<input type="checkbox"/> Statement	
	Injury	Injury Severity NO APPARENT INJURY			
	INDIVIDUAL	Injury Type	Most Serious Injury	<input type="checkbox"/> Prop Injury	
			<input type="checkbox"/> Lifejacket Worn Before Incident	<input type="checkbox"/> Lifejacket Worn After Incident	
	Fatality	Cause of Death	Activity of Victim		
		<input type="checkbox"/> Swimming Ability	Date of Death	Time of Death	
	Drug & Alcohol	Individual Condition APPEARED NORMAL			
		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			
Violations					