

6TL0D0GSLQ

Document Number Override		Primary Crash Document #		Agency Crash Number <b>SC23-10309</b>		Investigating Officer/Deputy <b>DEPUTY G. AKERS</b>	
Crash Date <b>09/21/2023</b>		Crash Time <b>12:09 AM</b>		Date Arrived <b>09/21/2023</b>		Time Arrived <b>12:16 AM</b>	
Date Notified <b>09/21/2023</b>		Time Notified <b>12:10 AM</b>		Total Units <b>01</b>		Total Injured <b>00</b>	Total Killed <b>00</b>
<input type="checkbox"/> On Emergency		<input checked="" type="checkbox"/> Hit and Run		<input type="checkbox"/> Lane Closure		<input type="checkbox"/> Work Zone	
<input type="checkbox"/> Government Property		<input type="checkbox"/> Active School Zone		School Bus Related <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

**Description**

Diagram		Reconstruction By	
		Photos By <b>GA</b>	
		Additional Information <b>PHOTOS</b>	

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

V1 APPEARED TO BE TRAVELING WEST ON N. GASSER RD. WHEN IT TURNED RIGHT TO TRAVEL NORTH ON ISHNALA RD. V1 TOOK A WIDE TURN, ENTERED THE DITCH AND THEN STRUCK A ROCK, V1 DRIVERS AIRBAG DEPLOYED. UPON OUR ARRIVAL ON SCENE NO DRIVER WAS LOCATED. OWNER STATES VEHICLE WAS NOT DRIVEN BY HIM AND WAS OUT OF STATE DURING THIS TIME. DRIVER OF THE VEHICLE IS STILL UNKNOWN AT THIS TIME.

**Location**

ON ISHNALA RD 10 FT N OF GASSER RD IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude <b>43.5759057</b>	Longitude <b>-89.797291102</b>
	X Coordinate <b>274133.78125</b>	Y Coordinate <b>4828573.5</b>
	Structure Type	

**Crash Scene**

First Harmful Event <b>DITCH</b>	First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DARK/UNLIT</b>	
Road Surface Condition(s) <b>DRY</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>		
Weather Condition(s) <b>CLEAR</b>		
Animal Type	Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>	Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land	Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>YES</b>	Junction Location <b>INTERSECTION</b>	Intersection Type <b>T-INTERSECTION</b>

**Unit Summary**

<b>UNIT 01</b>	Unit Status <b>STOLEN/HIT AND RUN</b>	Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>		
	Vehicle Type <b>PASSENGER CAR</b>			Operating As Endorsements		
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>NO</b>	Direction Of Travel <b>WESTBOUND</b>	<input type="checkbox"/> <b>Pre Crash Tire Mark</b>	Speed Limit <b>55</b>	Total Lanes <b>2</b>	
	Most Harmful Event: Collision With <b>DITCH</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>STOP SIGN</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>					

**Vehicle**

<b>UNIT 01 VEHICLE</b>	License Plate Number <b>KKP360</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>MN</b>	Country of Issuance <b>UNITED STATES</b>	
	Vehicle Identification Number <b>JTDKN3DU3A0209923</b>	Make <b>TOYOTA</b>	Year <b>2010</b>	Model <b>PRIUS</b>	
	Color <b>BLK - BLACK</b>	Body Style <b>4D - 4DR</b>		Bus Use	
	Initial Contact Point <b>12 - FRONT</b>	Vehicle Damage <b>10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT</b>			
	Extent Of Damage <b>DISABLING DAMAGE</b>				



UNIT	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>BILLS TOWING</b>		
	What Driver Was Doing <b>RIGHT TURN</b>		Vehicle Factors		
	Driver Prior Action Other		<b>NOT APPLICABLE</b>		
	Driver Actions <b>UNKNOWN</b>				
01	01	Owner Name <b>OMER TALUM</b>		Owner Address <b>111 MARQUETTE AVE APT 2807 MINNEAPOLIS, MN 55401 2035, US</b>	
		<b>Sequence Of Events</b>			
UNIT	01	Event <b>RIGHT TURN</b>			
		Event <b>DITCH</b>			
		Event <b>OTHER FIXED OBJECT</b>			
		Event			
UNIT	01	<b>Individual</b>			
		Driver <b>UNKNOWN</b>		Citations Issued <b>0</b>	Sex
		Date of Birth		Race	
		Address		Driver License Number	
UNIT	01	<b>Safety Equipment</b>		On Duty Crash	
		Row <b>01 - FRONT ROW</b>		Seat Position <b>07 - LEFT</b>	
		Helmet Use		<b>RESTRAINT USE UNKNOWN</b>	
		Eye Protection		Tint Compliance	
UNIT	001	<b>Injury</b>		Airbag	
		Injury Severity <b>NO APPARENT INJURY</b>		<b>NOT APPLICABLE</b>	
		Ejected <b>NOT APPLICABLE</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT APPLICABLE</b>
		Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #
Hospital		Date of Death	Time of Death		
UNIT	01	<b>Distracted By</b>			
		Distracted By Source			
Distracted By Action					
UNIT	01	<b>Non Motorist</b>			
		Striking Unit #	Location		

UNIT	Prior Action		
	Action		
	Action Other		To/From School
	<b>Drug &amp; Alcohol</b>		
	Suspected Alcohol Use		Suspected Drug Use
	Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results
	Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results
	Drug Type		
	Individual Condition		
	<b>NOT OBSERVED</b>		