

6TL0D7W16H

23-11543

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 12-11543		Investigating Officer/Deputy DEPUTY K. MUELLER	
Crash Date 10/24/2023		Crash Time 04:14 PM		Date Arrived 10/24/2023		Time Arrived 04:14 PM	
Date Notified 10/24/2023		Time Notified 04:14 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>	Reconstruction By
	Photos By NICHOLSON
	Additional Information PHOTOS

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

UNIT 1 WAS LISTED AS A STOLEN VEHICLE. SEVERAL AGENCIES ATTEMPTED TO STOP UNIT 1. UNIT 1 WAS INVOLVED IN A PURSUIT THAT ENDED IN A CRASH. UNIT 1 WAS DRIVING RECKLESSLY AGAINST THE FLOW OF TRAFFIC WHILE BEING PURSUED. UNIT 1 WAS REMOVED BY BIERS TOWING.

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Location

ON RAMP IH90 EB 0.33 MI N OF USH12 WB IN THE CITY OF WISCONSIN DELLS IN JUNEAU COUNTY	Latitude 43.654120414	Longitude -89.812283865
	X Coordinate 273217.53125	Y Coordinate 4837301.5
	Structure Type	

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) DRY	Roadway Factor(s) NONE	
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 FULL 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 (SPORT) UTILITY VEHICLE	Operating As Endorsements			
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? UNKNOWN	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 70	Total Lanes 4
	Most Harmful Event: Collision With DITCH	Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way DIVIDED HWY W/O 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 KCF587	Plate Type AUT - AUTOMOBILE	St MN	Country of Issuance UNITED STATES
	Vehicle Identification Number WA1EAAFY4P2153270	Make AUDI	Year 2023	Model Q5
	Color GRY - GRAY	Body Style UT - SPORT UTILITY VEHICLE		Bus Use
	Initial Contact Point 12 - FRONT	Vehicle Damage 01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT, 14 - UNDERCARRIAGE		
Extent Of Damage MINOR DAMAGE				



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UNIT VEHICLE	Towed Due To Damage TOWED BUT NOT DUE TO DISABLING DAMAG		Vehicle Removed By PLATTS WRECKER	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions EXCEED SPEED LIMIT, FAILURE TO CONTROL, WRONG SIDE OR WRONG WAY, OPERATED MOTOR VEHICLE IN AGGRESSIVE/RECKLESS MANNER, OTHER CONTRIBUTING ACTION			
01 01	Owner Name LL CADILLAC NORTH LLC		Owner Address 3500 HIGHWAY 61 N VADNAIS HEIGHTS, MN 55110 5232, US	
	Sequence Of Events			
01 02 03 04	Event CROSS MEDIAN			
	Event DITCH			
	Event			
	Event			
UNIT INDIVIDUAL	Individual			
	Driver REAKWON SHACK		Citations Issued 0	Sex MALE
	Address 5636 S SANGAMON ST CHICAGO, IL 60621 , US		Date of Birth	Race BLACK/AFRICAN AMERICAN
			Driver License Number STATE: ILLINOIS COUNTRY: UNITED STATES	
01 001	Safety Equipment		On Duty Crash	
			Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	NONE USED - VEHICLE OCCUPANT	
	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 UNKNOWN		
Distracted By Action UNKNOWN				
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			
	NOT OBSERVED			
	01	001		