

6TL0F1BQ79  
24-00470

# 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 <b>24-00470</b>	Investigating Officer/Deputy <b>DEPUTY D. KROLIKOWSKI</b>	
Crash Date <b>01/13/2024</b>		Crash Time <b>10:21 AM</b>	Date Arrived <b>01/13/2024</b>	Time Arrived <b>10:36 AM</b>	
Date Notified <b>01/13/2024</b>		Time Notified <b>10:21 AM</b>	Total Units <b>01</b>	Total Injured <b>00</b>	Total Killed <b>00</b>
<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 <b>NO</b>		Tags	
<input 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
	Additional Information <b>NONE</b>

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

DRIVER DRIVING NORTHBOUND ON CO RD A NORTH OF N REEDSBURG RD WHEN IT ENCOUNTERED SNOW AND ICE AT TOO HIGH A SPEED. THIS CAUSED THE DRIVER TO LOSE CONTROL OF THE VEHICLE. THE VEHICLE THEN SLID OFF THE SIDE OF THE ROAD TO ITS RIGHT WHERE IT ENTERED THE VERY DEEP SNOW IN THE DITCH. A TOW TRUCK CAME AND PULLED THE VEHICLE OUT AND IT DROVE AWAY ON IT'S OWN POWER.

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## Location

ON CTHA NB 0.46 MI S OF SHADY LANE RD IN THE TOWN OF FAIRFIELD IN SAUK COUNTY	Latitude <b>43.540022334</b>	Longitude <b>-89.738630774</b>
	X Coordinate <b>278739.125</b>	Y Coordinate <b>4824430.5</b>
	Structure Type <b>NO STRUCTURE</b>	

## 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>DAYLIGHT</b>	
Road Surface Condition(s) <b>SNOW, ICE</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>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>

## Unit Summary

<b>UNIT</b>	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>AUTOMOBILE</b>		
	Vehicle Type <b>(SPORT) UTILITY VEHICLE</b>	Operating As Endorsements			
	Total Occs <b>4</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>YES</b>	Direction Of Travel <b>NORTHBOUND</b>	<input type="checkbox"/> <b>Pre CrashTire 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>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>	Road Curvature <b>STRAIGHT</b>		Road Grade <b>UPHILL</b>	
	Truck Bus or HazMat <b>NO</b>				

<b>UNIT</b>	<b>Vehicle</b>				
	<b>01</b>	License Plate Number <b>EH39176</b>	Plate Type	St <b>IL</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>JF2SKAEC6PH519613</b>	Make <b>SUBARU</b>	Year <b>2023</b>	Model
		Color	Body Style		Bus Use
	<b>VEHICLE</b>	Initial Contact Point <b>00 - NON-COLLISION</b>	Vehicle Damage		
Extent Of Damage <b>NO DAMAGE</b>		<b>00 - NO DAMAGE</b>			



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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By	
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>SPEED TOO FAST/COND</b>			
01 01	Owner Name <b>DEVON PHELPS (630) 461-7103</b>		Owner Address <b>18846 CHATHAM WAY LAKE VILLA, IL 60046 , US</b>	
	<b>Sequence Of Events</b>			
01 01	01	Event <b>DITCH</b>		
	02	Event		
	03	Event		
	04	Event		
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>USAA-CASUALTY-INS-CO</b>		Individual <b>DEVON PHELPS</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>DEVON PHELPS (630) 461-7103</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
	Address <b>18846 CHATHAM WAY LAKE VILLA, IL 60046 , US</b>		Date of Birth	Race <b>WHITE</b>
			Driver License Number <b>STATE: ILLINOIS COUNTRY: UNITED STATES</b>	
01 001	<b>Safety Equipment</b>		On Duty Crash <b>EMT/FIRST-RESPONDER</b>	
			Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>		
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</b>
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier		EMS Run #
Hospital		Date of Death		Time of Death
<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>		
Distracted By Action <b>NOT DISTRACTED</b>				

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<b>UNIT</b>	<b>Non Motorist</b>		Striking Unit #	Location			
	Prior Action						
	Action						
	Action Other				To/From School		
<b>01</b>	<b>001</b>	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>		
		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>APPEARED NORMAL</b>					
		<b>Individual</b>					
<b>UNIT</b>	<b>INDIVIDUAL</b>	Passenger <b>JILYEN PHELPS (630) 461-7103</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>		
				Date of Birth	Race <b>WHITE</b>		
		Address <b>18846 CHATHAM WAY LAKE VILLA, IL 60046 , US</b>		Driver License Number			
		<b>Safety Equipment</b>					
<b>01</b>	<b>002</b>	On Duty Crash		Safety Equipment			
		Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</b>	<b>SHOULDER &amp; LAP BELT</b>			
		Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
		<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>		
		Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</b>		
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier		EMS Run #			
Hospital		Date of Death		Time of Death			
<b>Distracted By</b>		Distracted By Source					
Distracted By Action							
<b>Non Motorist</b>		Striking Unit #	Location				

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Form with sections: UNIT INDIVIDUAL, Drug & Alcohol, Safety Equipment, Injury, Distracted By, Non Motorist. Includes fields for name (CHASE PHELPS), sex (MALE), race (WHITE), and injury status (NO APPARENT INJURY).

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UNIT INDIVIDUAL	Action		
	Action Other		To/From School
	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
	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>APPEARED NORMAL</b>		
	<b>Individual</b>		
	Passenger <b>COLE PHELPS (630) 461-7103</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>
		Date of Birth	Race <b>WHITE</b>
Address <b>18846 CHATHAM WAY LAKE VILLA, IL 60046 , US</b>	Driver License Number		
UNIT INDIVIDUAL	<b>Safety Equipment</b>	On Duty Crash	Safety Equipment
	Row <b>02 - SECOND ROW</b>	Seat Position <b>07 - LEFT</b>	<b>SHOULDER &amp; LAP BELT</b>
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
	Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier	EMS Run #
	Hospital	Date of Death	Time of Death
	<b>Distracted By</b>	Distracted By Source	
	Distracted By Action		
<b>Non Motorist</b>	Striking Unit #	Location	
Prior Action			

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<b>UNIT</b>	<b>INDIVIDUAL</b>	Action					
		Action Other			To/From School		
		<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>		Suspected Drug Use <b>NO</b>		
			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>APPEARED NORMAL</b>					
		<b>01</b>	<b>004</b>				