6TL0F2KRBZ 24-00528

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Override	Primary Crash	Document#	24-00		Investigating O DEPUTY I. G		
Crash Date 01/14/2024	Crash Time 11:52 AM	Crash Time 11:52 AM Time Notified 11:54 AM		rrived 2024	Time Arrived 12:01 PM		
Date Notified 01/14/2024				nits	Total Injured Total Kill 00 00		
On Emergency	Hit and Run	Lane Close		Work Zone	Trailer o	r Towed	Reporting Threshold
Government Property		chool Zone	NO NO	Bus Related	Tags		
✓ Reportable	Crash Type DT4000 (STA	NDARD CRASH	ł)		Amended	i	Secondary Crash
Description Diagram					T_	Reconstruction	
	NO DAMAGE, N	ON REPORTA	BLE		A	rhotos By	rmation
l o oworn low orfers	noment officer see	on that I have	o	d any CIIS data in th	oio ronort		
I, a sworn law enforce						CH. UNIT 1 DI	D NOT SUSTAIN ANY
INJURIES. UNIT 1 WAS TOWE	ED BY CRAIGS TOWIN	G.					

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Location

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

Crash Date 01/14/2024

Crash Time 11:52 AM

	106 OF	FOX HILL RD 4 FT N PIT RD	Latitude 43.5135 X Coordii		Y Coo		36398			
	IN THE TOWN OF DELTON IN SAUK COUNTY							_	4821554	
						Structure Type NO STRUCTURE				
(Cra	sh Scene								
Ī	First	Harmful Event			First Harr	mful Event	Location			
	DIT				ON ROA					
		iner of Collision	UCLE IN TRANSPORT		Light Cor					
ŀ		NO COLLISION W/VEF d Surface Condition(s)	IICLE IN TRANSPORT		DAYLIG	Factor(s)				
		()			Roadway	r actor(s)				
		OW, ICE								
	Envi	ironment Factor(s)			ROADS	SURFACE	CONDITION	I (WET IC	CY, SNOW, SLUSH,	
	WE	ATHER CONDITIONS			ETC)	JUNI AUL	CONDITION	((VV L 1, 10	51, 514044, 5E0511,	
ı	Wea	ather Condition(s)								
	CLE	EAR								
ŀ	Anin	nal Type			Relation	To Trafficw	/av			
							ON ROAD			
ı	Cras	sh Classification - Location			Crash Cla	Crash Classification - Jurisdiction				
		BLIC PROPERTY				NO SPECIAL JURISDICTION			1	
	Iriba	al Land				Access Control			Special Study	
ŀ	\\/ith	nin Interchange Area	Junction Location	Li	NO CONTROL Intersection Type					
	NO	=	NON-JUNCTION		NOT AN INTERSE	ECTION				
L	Ini	t Summary								
Ť		Status		Vehicle Opera	ting As Classification	n	Unit Type			
	IN TRANSIT					AUTOMO				
	IN T	TRANSIT		D CLASS			AUTOMO	BILE		
- 1	Vehi	icle Type		D CLASS			AUTOMO Operating A		ements	
- 1	Vehi	icle Type SSENGER CAR	L Train/Rus # Pagardad		no looued	LTotal Tr	Operating A	As Endorse		
- 1	Vehi PAS Tota	icle Type	Train/Bus # Recorded	Total # Citation	ns Issued	Total Tra	Operating A	As Endorse	ements zMat Types	
- 1	Vehi PAS Tota 1	icle Type SSENGER CAR	Train/Bus # Recorded Direction Of Travel	Total # Citation		Total Tra	Operating A	As Endorse	zMat Types	
- 1	Vehi PAS Tota 1	icle Type SSENGER CAR al Occs rance?		Total # Citation 0 Pre Cr	ns Issued rashTire lark	0	Operating A	As Endorse Total Haz	zMat Types	
- 1	Vehi PAS Tota 1 Insu YES	icle Type SSENGER CAR Il Occs rance? S t Harmful Event: Collision W	Direction Of Travel NORTHBOUND	Total # Citation 0 Pre Cr M Special Function	rashTire ark on	0 Speed L	Operating A	Total Haz Total Lar Total Lar Motor Ver	zMat Types nes	
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	Tota Insu YES Moss DITC Traff TWO Surf. BLA	icle Type SSENGER CAR Il Occs Trance? S It Harmful Event: Collision W CH fic Way O-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOUS Ex Bus or HazMat Vehicle License Plate Number AVU8339 Vehicle Identification Numi JA4LZ31F65U046403 Color GRN - GREEN	Direction Of Travel NORTHBOUND ith	Total # Citation 0 Pre Cr M Special Functi NO SPECIA Traffic Control NO CONTRO Road Curvatur STRAIGHT Plate Type AUT - AUTO Make MITSUBISH Body Style UT - SPOR	rashTire lark on L FUNCTION OL re OMOBILE HI	St WI Year 2005	Operating A ailers imit Emergency NOT APP Traffic Cont NO Road Grad LEVEL Country of Is UNITED S Model OUTLAND	Total Haz O Total Lar 2 Motor Vel LICABLE trol Inopera	zMat Types nes nicle Use	
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	PAS Tota 1 Insu YES Mos DIT Traff TWO Surfa RLA	icle Type SSENGER CAR Il Occs Trance? St t Harmful Event: Collision W CH fic Way O-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOUS ex Bus or HazMat Vehicle License Plate Number AVU8339 Vehicle Identification Numi JA4LZ31F65U046403 Color GRN - GREEN Initial Contact Point	Direction Of Travel NORTHBOUND ith	Pre Cr M Special Functi NO SPECIA Traffic Control NO CONTRO Road Curvatur STRAIGHT Plate Type AUT - AUTO Make MITSUBISH Body Style UT - SPOR	rashTire lark on L FUNCTION OL re OMOBILE HI T UTILITY VEHIC	St WI Year 2005	Operating A ailers imit Emergency NOT APP Traffic Cont NO Road Grad LEVEL Country of Is UNITED S Model OUTLAND	Total Haz O Total Lar 2 Motor Vel LICABLE trol Inopera	zMat Types nes nicle Use ative/Missing	

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		Towed Due To Damage		Vehicle Removed By					
		TOWED BUT NOT DUE T	O DISABI ING DAMAG	CRAIGS TOWING					
		What Driver Was Doing	0 210/1221110 2/1111/10	Vehicle Factors					
		GOING STRAIGHT		verilicie i actors					
				NOT APPLICABLE					
		Driver Prior Action Other		NOT AFFEIGABLE					
		Dairean A etiene							
		Driver Actions NO CONTRIBUTING ACT	ION						
	Щ	NO CONTRIBUTING ACT	ION						
≒	<u> </u>								
LNO	VEHICLE								
	7								
		Owner Name		Owner Address					
_	_	SAMET DURSUN		813 BROADWAY		_			
5	0	(608) 844-4244		WISCONSIN DEL	LS, WI 53965 , U	S			
		Sequence Of Events							
		Event							
	01	DITCH							
		Event							
	02								
		Event							
	03	270							
		Event							
	04	Lvent							
\vdash		Policy Holder							
UNIT		Insurance Company		Individual					
_		PROGRESSIVE-UNIVERS	SAL-INSURANCE-COMP	SAMET DURSUN					
	1	Individual							
		Driver		Citations Issued Sex					
	_	SAMET DURSUN		0 MALE					
	Ζ	(608) 844-4244		Date of Birth	th Race				
—	INDIVIDUAL				WHITE	<u>:</u>			
	≥	Address		Driver License Number					
\supset	<u>□</u>	813 BROADWAY		STATE: WISCONSIN COUNTRY: UNITED STATES					
	=	WISCONSIN DELLS, WI 5	3965 , US						
	_ '	On Duty	/ Crash	Safety Equipment					
	Saf	ety Equipment							
		Row	Seat Position	SHOULDER & LAP BELT					
		01 - FRONT ROW 07 - LEFT							
		Helmet Use		Helmet Compliance					
		Eye Protection		Tint Compliance					
_	_ '	Injury S	everity	Airbag					
2	00	Injury _{NO AP}	PARENT INJURY	NON DEPLOYED					
		Ejected	Ejection Path			Trapped/Extricated			
		NOT EJECTED NOT EJECTED/NOT APP		LICABLE		NOT TRAPPED			
		Medical Transport	L	EMS Agency Identifier		EMS Run #			
		NOT TRANSPORTED							
		Hospital		Date of Death Time of Death					
		Distract	ed By Source			1			
		Distracted By NOT A	PPLICABLE (NOT DISTR	ACTED)					
			,	,					
		Distracted By Action NOT DISTRACTED		,					

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Crash Date 01/14/2024

Crash Time 11:52 AM

		Non Motorist	Striking Unit #	Location				
		Prior Action						
TIND	INDIVIDUAL	Action						
		Action Other						To/From School
	1	Drug & Alcohol	Suspected Alcohol U NO	Jse	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		
2	001	Drug Type						
		Individual Condition APPEARED NORM	AL					