WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash Document #				ating Officer/Deputy TY W. VERTEIN			
7	Crash Date 01/12/2024	Crash Time 01:00 PM	Date Ar			Time Arrived			
מַ	Date Notified	Time Notified				Total Kille	d		
3	01/12/2024	01:03 PM	01		Total Injured	00			
01LUBC3B/2	On Emergency Hit	and Run Lane Closu	ure	☐ Work Zone		or Towed	Reporting Threshold		
_	Government Property	Active School Zone	School NO	Bus Related	Tags				
	Reportable	Crash Type DT4000 (STANDARD CRASH	1)		Amend	ed	Secondary Crash		
Description									
	Diagram					Reconstruction	Ву		
					•	Photos By			
	Non-reportable slide off								
						Additional Info	mation		
	I, a sworn law enforceme	nt officer, agree that I have no	ot added	I any CJIS data in th	is report.				
	ON THE DESCRIBED DATE, TIME, AND LOCATION, UNIT 1 WAS TRAVELING EASTBOUND. DUE TO SPEED AND SNOW COVERED ROADWAY, THE OPERATOR LOST CONTROL OF UNIT 1. UNIT 1 ENTERED THE DITCH WHERE IT CAME TO REST. NO REPORTED INJURIES.								
	LUST CONTROL OF UNIT 1. UNIT	I ENTEKED THE DITCH WHERE IT (JAIVIE 10	KESI. NO KEPOKIED	INJUKIES.				

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Crash Time 01:00 PM

2				
2				
Relation To Trafficway				
TRAFFICWAY - ON ROAD				
Special Study				
Classification Unit Type				
AUTOMOBILE				
pes				
е				
e				
ssing				
ssing				
7 8 9 10 11				
risdiction DICTION Special Stu Unit Type				

2 of 4

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		Towed Due To Damage			nicle Removed By				
		NOT TOWED			OPERATOR				
		What Driver Was Doing GOING STRAIGHT		Vehicle Factors					
		Driver Prior Action Other			NOT APPLICABLE				
		Driver Filor Action Other			NOT ALL LIVABLE				
		Driver Actions							
	щ	SPEED TOO FAST/COND, RAN OFF ROADWAY							
IND	ᄓ								
5	VEHICLE								
	>								
		Owner Name Owner Address							
		ARIBE VARGAS MENDEZ (608) 415-9212		446 W MAIN ST					
6	0			REEDSBURG, WI 53959 , US					
		Sequence Of Events							
	7	Event RUN OFF ROADWAY RIGHT							
	05	Event DITCH							
	03	Event							
		Event							
	04								
╘	ı	Policy Holder							
N N		Insurance Company			Individual ARIBE VARGAS MENDEZ				
		PROGRESSIVE-UNIVERSAL-INSURANCE-COMP ARIBE VARGAS MENDEZ ndividual							
	ľ				Citations Issued Sex				
	_	ARIBE VARGAS MENDEZ (608) 415-9212		- 1	0 MALE Date of Birth Race				
	INDIVIDUAL								
ţ	ē			BLACK/AFRICAN AMERICAN					
N N		Address 446 W MAIN ST REEDSBURG, WI 53959 , US			Driver License Number				
	Z								
	Saf	On Duty Crash fety Equipment			Safety Equipment				
	Sai	Row		┦,					
				SHOULDER & LAP BELT					
				Helmet Compliance					
		Eye Protection		Tint Compliance					
		Eye Protection			Tint Compliance				
10	60	Injury Severity		Airbag					
٦	Ō	Injury NO APPARENT INJURY		NON DEPLOYED					
		Ejected Ejection Path NOT EJECTED NOT EJECTED/NOT APP		PLIC	LICABLE		Trapped/Extricated NOT TRAPPED		
					EMS Agency Identifier		EMS Run #		
		NOT TRANSPORTED							
	Hospital Date				Date of Death Time of Death				
	Distracted By Source								
	Distracted By								
		Distracted By Action UNKNOWN							

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data. $\begin{tabular}{ll} 3 & of & 4 \end{tabular}$

Crash Date 01/12/2024
Crash Time 01:00 PM

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		Non Motori	Striking Unit #	Location					
		Prior Action							
		Action							
	AL								
LIND	IDO.								
5	INDIVIDUAL								
	Z								
		Astina Other						To /France Oak and	
		Action Other						To/From School	
	Drug & Alcohol No			Jse	Suspected Drug Use NO			•	
		Alcohol Test Giver		Alcohol Test Type	3		Alcohol Test Results		
		Drug Test Given TEST NOT GIV	EN	Drug Test Type		Drug Test Results	<u> </u>		
2	001	Drug Type							
		Individual Conditio	n						
	APPEARED NORMAL								
•	Property Owner								
PROP OWNER 01				Address 620 STH 136 PO BOX 26 BARABOO, WI 53913	, US				
	Fixe	d Objects St							
	5		Struck Object DITCH					Damage Tag Number NA	