WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Override	Primary Crash [Document #	24-00677 DEPUTY A					
Crash Date 01/18/2024	Crash Time 08:25 PM		Date Arrived 01/18/2024		Time Arrived 08:31 PM			
Date Notified 01/18/2024	Time Notified 08:25 PM			nits	Total Injured Total Kil		lled	
On Emergency H	t and Run Lane Closu				Trailer or Towed		Reporting Threshold	
Government Property		hool Zone	School NO	Bus Related	Tags			
Reportable	Crash Type DT4000 (STA	NDARD CRASH	l)		Amend	ed	Secondary Crash	
Description Diagram						Poconstruction	2 RV	
Diagram						Reconstruction	n ву	
						Photos By		
						Additional Info	rmation	
						NONE		
, a sworn law enforcem	ent officer, agre	ee that I have no	ot added	d any CJIS data in th	is report.			
SLIDE OFF. NO DAMAGE								

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	റ	ation										
		BIRNAM WOODS RD				Latitude			Longitu	de		
	468 FT W OF FOX HILL CIR					43.488531432		-89.762903793 Y Coordinate				
						X Coordinate						
	IN THE TOWN OF BARABOO IN SAUK COUNTY						276587.9375			4818776.5		
	IN OACK COCKTT						Туре					
						NO STR	UCTURE					
(Cra	sh Scene										
	First	Harmful Event				First Harm	nful Event Lo	ocation				
	DIT	СН				ON ROA	DWAY					
		ner of Collision			Light Condition DARK/UNLIT							
			HICLE IN TRANSPORT									
	Road	d Surface Condition(s)			Roadway Factor(s)							
	SNC	OW, ICE										
	Envi	onment Factor(s)				1						
	NOI	IE				NONE						
	Wea	ther Condition(s)				1						
	SNC	` ,										
	Anım	al Type					o Trafficwag	•				
	Cras	h Classification Location										
	Crash Classification - Location PUBLIC PROPERTY							Crash Classification - Jurisdiction NO SPECIAL JURISDICTION				
	Triba	I Land				Access Co		Special Study				
						NO CON	ITROL					
	With	in Interchange Area	Junction Location		Intersection					•		
	NO		NON-JUNCTION		NOT AN	INTERSE	CTION					
		t Summary 💻										
		Unit Status Vehicle Operating As C				7.						
		IN TRANSIT D CLASS				AUTOMOBILE Operating As Endorsements						
01		cle Type SSENGER CAR						Operating F	s Endorse	ments		
		Occs	Total # Cita	Total # Citations Issued Total Trail			illers Total HazMat Types		zMat Types			
	1			0		0		0		,,		
	Insu	ance?	Direction Of Travel	Pre	Pre CrashTire		Speed Lim		imit Total Lanes			
ь	YES	EASTBOUND			Mark		45		2			
UNIT		Harmful Event: Collision V		Special Function NO SPECIAL FUNCTION			Emergency Motor Vehicle Use NOT APPLICABLE					
	biton					Traffic Control Inoperative/Missing						
		raffic Way WO-WAY, NOT DIVIDED			Traffic Control NO CONTROL			NO		itive/Missing		
		ace Type		Road Curvature				Road Grade				
		CKTOP (BITUMINOUS		STRAIGHT		LEVEL						
		k Bus or HazMat	- ,									
	NO											
	,	Vehicle										
		License Plate Number		Plate Type			St	Country of Is				
		AVB2627					TED STATES					
	5	Vehicle Identification Nun		Make Year Model								
	0	2T1BURHE0FC36048		TOYOTA Rody Style		2015		COA Bus Use				
		Color RED - RED			Body Style Bus Use							
	■ Initial Contact Point			Vehicle Da	Vehicle Damage							
╘	EHICL	01 - RIGHT FRONT C		7 8 9 10 11								
L N D	표	Extent Of Damage 00 - NO			DAMAGE	MAGE 6 5 4 3 2 1						
	₩ NO DAMAGE									3 4 3 2 1		

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		Towed Due To Damage		Vehicle Removed By						
		NOT TOWED		OPERATOR						
		What Driver Was Doing		Vehicle Factors						
		GOING STRAIGHT								
		Driver Prior Action Other		NOT APPLICABLE						
LIND	VEHICLE	Driver Actions NO CONTRIBUTING ACTION								
	01	Owner Name JEFFREY ORKFRTIZ (608) 402-5746		Owner Address S4154 WHISPER BARABOO, WI 53						
		Sequence Of Events								
	01	Event DITCH								
	02	Event								
	03	Event								
	04	Event								
_		Policy Holder								
LIND		Insurance Company		Individual						
–		STATE-FARM-GENERAL	-INS-CO	JEFFREY ORKFRTIZ						
	1	ndividual								
		Driver JACOB ORKFRITZ		Citations Issued	Sex					
	٩L	(608) 402-5746		0 MALE Date of Birth Race						
⊨	יוםוי				WHITE					
LNO	INDIVIDUAL	Address S4154 WHISPERING PINI BARABOO, WI 53913 , U		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sat	On Duty fety Equipment	v Crash	Safety Equipment						
	Ju	Row Seat Position		SHOULDER & LAP BELT						
		01 - FRONT ROW	07 - LEFT							
		lelmet Use		Helmet Compliance						
		Eye Protection		Tint Compliance						
5	00	Injury S NO AP	everity PARENT INJURY	Airbag NON DEPLOYED						
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APP	PLICARI F		Trapped/Extricated NOT TRAPPED				
		Medical Transport	1	EMS Agency Identifier		EMS Run #				
	NOT TRANSPORTED									
		Hospital		Date of Death		Time of Death				
		Distracted By NOT A	ed By Source PPLICABLE (NOT DISTRA	ACTED)						
		Distracted By Action								

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		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		
٦	001	Drug Type						
		Individual Condition APPEARED NORM	AL					