6TL0CTJN4M

24-00685

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Crash Time		24-00685 DEPUTY		g Officer/Deputy A. KULAS			
4Μ	Crash Date 01/18/2024						Time Arrived 10:35 PM		
6 I LOCI J N4M	Date Notified 01/18/2024	Time Notified 10:11 PM		Total Units 01		Total Injured 00	Total Kille 00	al Killed	
5	On Emergency	and Run	Lane Clos		Work Zone		or Towed	Reporting Threshold	
6 I L	Government Property		hool Zone	School NO	Bus Related	Tags			
	Reportable	Crash Type DT4000 (STAI	NDARD CRASH	I)		Amend	ed	Secondary Crash	
	Description								
	Diagram						Reconstruction	n By	
							Photos By		
							Additional Info NONE	rmation	
	✓ I, a sworn law enforceme	nt officer, agre	e that I have no	ot added	any CJIS data in th	is report.			
	SLIDE OFF. NO DAMAGE								

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	ation									
ON	HILLMAN RD				Latitude	16075		Longitu		_
-	CTHT EB		43.58341				6993485			
IN THE TOWN OF DELTON						X Coordinate 278222.8125		Y Coord 48292		
IN S	SAUK COUNTY		Structure					4		
					NO STR					
Cra	sh Scene									
First	t Harmful Event				First Harm	nful Event Lo	ocation			٦
DIT				ON ROADWAY						
	ner of Collision			Light Condition						
		HICLE IN TRANSPORT			DARK/U					
	d Surface Condition(s)				Roadway	Factor(s)				
	OW, ICE									
Env	ironment Factor(s)									
NO	NE				NONE					ļ
Wea	ather Condition(s)				1					
SN	ow									
Anir	nal Type				Relation T	o Trafficwa	/			_
						WAY - O				
Cras	sh Classification - Location			Crash Clas	ssification -	Jurisdiction				
PUBLIC PROPERTY					NO SPE	CIAL JUR	ISDICTION			
Tribal Land Within Interchange Area Junction Location					Access Control Specia NO CONTROL			Special Study		
				Intersectio						-
NO		INTERSECTION		T-INTER	SECTION					
	t Summary									
_	Unit Status Vehicle Operating As C					Classification Unit Type AUTOMOBILE				
	FRANSIT icle Type	D CLASS					As Endorsements			
		E								
Tota	Total Occs Train/Bus # Recorded			Total # Citations Issued Total			ailers Total HazMat Types		zMat Types	
1			0	0			0 0			
	Insurance? Direction Of Travel			Pre CrashTire Speed L						
	YES EASTBOUND			Mark 45			2			_
Mos DIT	t Harmful Event: Collision V CH						cy Motor Vehicle Use PLICABLE			
	fic Way	trol	Traffic Control Inoperative/Missing							
	O-WAY, NOT DIVIDED	NO CONT	NO CONTROL			NO				
	асе Туре		Road Curvature			Road Grade				
	ACKTOP (BITUMINOUS	STRAIGH	STRAIGHT LEVEL					_		
NO	k Bus or HazMat									
	Vehicle									
	License Plate Number		Plate Type	;		St	Country of Is	suance		7
	AJG8534		AUT - AUTOMOBILE		WI	UNITED STATES				
	Vehicle Identification Num	Make			Year	Model				
~										
01	W1N0G8EB1MV3020		MERCED	DES BENZ		2021	GLC			_
01	W1N0G8EB1MV3020 Color		MERCED Body Style	;			GLC Bus Use			
	W1N0G8EB1MV3020 Color BLK - BLACK		MERCED Body Style UT - SPC	, DRT UTILI [.]						
ш	W1N0G8EB1MV3020 Color		MERCED Body Style	, DRT UTILI [.]					7 8 9 10 11	
	W1N0G8EB1MV3020 Color BLK - BLACK Initial Contact Point		MERCED Body Style UT - SPC Vehicle Da	, DRT UTILI [.]					7 8 9 10 11 6 7 8 9 10 11 5 4 3 2 1	

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		Towed Due To Damage		Vehicle Removed By						
		TOWED BUT NOT DUE TO DISABLING DAMAG		CRAIGS TOWING						
		What Driver Was Doing GOING STRAIGHT Driver Prior Action Other		Vehicle Factors						
					T APPLICABLE					
		Driver Actions								
	Ш	NO CONTRIBUTING ACTION	1							
UNIT	<u>0</u>									
5	VEHICLE									
	>									
		Oumer Name			Ourper Address					
		Owner Name CARONDA HUNT			Owner Address 5024 N 38TH ST					
	01				MILWAUKEE, WI 5	3209 , US				
		Sequence Of Events								
		Event								
	01	DITCH								
	~	Event								
	02									
	e	Event								
	03									
	04	Event								
	0									
F	I	Policy Holder								
UNIT		Insurance Company		Individual						
5		PROGRESSIVE-CASUALTY-INS-CO		CARONDA HUNT						
	I	Individual								
		Driver		Citations Issued Sex						
	Ļ	DAKALA THOMAS			1	FEMALE				
	INDIVIDUAL				ate of Birth		Race BLACK/AFRICAN AMERICAN			
E	Ð									
UNIT	N	Address 5024 N 38TH ST			Driver License Number					
	Ï	MILWAUKEE, WI 53209 , US			STATE: WISCONSIN COUNTRY: UNITED STATES					
		,								
		On Duty Cra	ash		afety Equipment					
	Saf	fety Equipment								
		Row Seat Position		SHOULDER & LAP BELT						
		01 - FRONT ROW	07 - LEFT	ONOOLDENCU						
		Helmet Use			Helmet Compliance					
		Eye Protection		Tint Compliance						
2	001	Injury Severity			Airbag					
0	0			NON DEPLOYED						
		Ejected Ejection Path				Trapped/Extricated				
		NOT EJECTED NOT EJECTED/NOT AP					NOT TRAPPED EMS Run #			
		Medical Transport NOT TRANSPORTED			EMS Agency Identifier					
		Hospital			Date of Death		Time of Death			
		Distracted E	By Source				1			
		Distracted By NOT APP	LICABLE (NOT DISTR	ACT	ED)					
		Distracted By Action								
		NOT DISTRACTED								

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		Non Motorist	Striking Unit #	Location				
		Prior Action						
UNIT	INDIVIDUAL	Action						
		Action Other						To/From School
	L	Drug & Alcohol	Suspected Alcohol U	Jse	Suspected Drug Use			
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		
0	001	Drug Type		1		1		
		Individual Condition						
		APPEARED NORM	/IAL					