# 6TL0DQPGFR

24-01450B

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash Document #		Agency Crash Number 24-01450B		Investigating Officer/Deputy DEPUTY B. SONN			
FR	Crash Date 02/10/2024	Crash Time 02:12 AM		Date Ar 02/10/		Time Arrived 02:19 AM			
G	Date Notified	Time Notified		Total Units		Total Injured	Total Kill	ed	
QР	02/10/2024	02:12 AM		01		00 00			
0D(	On Emergency	t and Run 🔽 Lane Closu				Trailer or Towed		Reporting Threshold	
6TL0DQPGFR	Government Property	Active Sch	nool Zone	School NO	Bus Related	Tags			
	✓ Reportable	Crash Type DT4000 (STAN	IDARD CRASH	)		Amend	ed	Secondary Crash	
	Description						1		
	Diagram	F Outer rim sh	ell & tire		Wat	Z ↓ ↓ ↓ ↓ ↓ ↓	Reconstructio Photos By 9104		
	CTY TK BD				Timothy Lane		Additional Info PHOTOS	prmation	
	✔ I, a sworn law enforcement								
	DRIVER OF UNIT 1 STATED A BLAC ON OTHERWISE PRISTINE WHITE I TO BE A SINGLE VEHICLE CRASH. SIGNS OF IMPAIRMENT AND REFU CONDITIONS AS SPEED APPEARE CONTAINER LOCATED ON DRIVER CONSOLE LIQUID HAD ODOR OF II QUANTITY OF OIL WAS ON THE SI	Paint of the ve The tire was l Jsed Sfst and If D to have playi Floor near ga Ntoxicants. Vei	HICLE INDICATING OCATED APPROX MPLIED CONSENT ED A FACTOR IN T & AND BRAKE. FL HICLE WAS TOWE	G A BLAC IMATELY BLOOD I THE CRAS LUIDS HA	K VEHICLE WAS INVOLVED 150-200 FEET NORTH OF T DRAW. DRIVER WAS ARRE SH. SEARCH INCIDENT TO D BEEN SPILLED ALL OVEN	) IN THE CRAS THE VEHICLE'S STED FOR OW ARREST, 1 ALO R THE CENTER	6H. THE EVIDEN 8 RESTING POS 71 AND DRIVING COHOLIC BEVE R CONSOLE AF	NCE ON SCENE APPEARED SITION. DRIVER SHOWED S TOO FAST FOR ERAGE PLASTIC REA. CUP AND CENTER	

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Loc	ation 🛛 🗖											
	USHL U WB						Latitude			Longitud	de	
96 FT N						43.55640	6093		-89.778	3221252		
OF CTHBD NB					X Coordina	X Coordinate Y Coordinate			linate			
IN THE TOWN OF DELTON IN SAUK COUNTY					275601.21875 4826356				56			
IN SAUK COUNT I						Structure 7	Туре		I			
Cra	sh Scene											
-	Harmful Event						First Harm	f				
CUF									Location			
-	her of Collision						ON ROADWAY Light Condition					
	NO COLLISION W/VE	шс					DARK/LIGHTED					
	Surface Condition(s)						Roadway I	-				
							Roddway	1 40(0)(3)				
DRY												
Envir	onment Factor(s)											
NOM	NE						NONE					
W/cc	ther Condition(s)											
CLE	AR											
Anim	al Type						Relation T	o Trafficv	vay			
							TRAFFIC	WAY -	ON ROAD			
Cras	Crash Classification - Location						Crash Clas	ssificatior	n - Jurisdiction			
PUBLIC PROPERTY							NO SPECIAL JURISDICTION					
Tribal Land							Access Control Special Study				Special Study	
						NO CONTROL						
	•					Intersectio						
NO NON-JUNCTION NOT AN							INTERSECTION					
Closure Type Reasons for Cl					ons for Clos	ure						
LANE CLOSURE												
				ENFORC	EMENT, T	OW TR	UCK, OTHEF	\$				
-	02/10/2024 02:19 AM											
Date All Lanes Open Time All Lanes Open				Date Scene Cleared   Time Scene Cleared     02/10/2024   03:12 AM								
02/10/2024 03:12 AM				02/10	/2024	03:12 AM						
	t Summary 🛛 💻											
-	Status				-	erating As C	lassification		Unit Type			
	RANSIT			DC	CLASS			AUTOMOBILE				
	cle Type								Operating	As Endorser	nents	
	SENGER VAN	1-								1 7 1 111	N ( T	
	Total Occs Train/Bus # Recorded				Total # Citations Issued			Total Tr <b>0</b>			Total HazMat Types	
1	Insurance? Direction Of Travel		2	2				imit	0 Total Lan			
						CrashTire	•	15		10tai Lain	55	
YES NORTHBOUND Most Harmful Event: Collision With			Sner	pecial Function			15	Emergency Motor Vehicle Use				
						IAL FUNC	TION		NOT APPLICABLE			
-	ic Way			Traff	ic Cont	rol			Traffic Cor	ntrol Inoperat	tive/Missing	
-					IELD SIGN			NO				
_					ad Curvature			Road Grade				
				IRVE LEFT			LEVEL					
	k Bus or HazMat			_								
NO												
	Ahicle											
Vehicle License Plate Number Plat			te Type		St Country of Issuance							
	AS85RX				21			-	INITED STATES			
	Vehicle Identification Nur	nber		Mal			Year Model					
01	2C4RC1BG6NR1889				RYSL	ER		2022				

5

UNIT

2

6TL0DQPGFR

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		Color		Body Sty	е		Bus Use					
		WHI - WHITE			N							
	ш	Initial Contact Point			amage							
H	VEHICLE	10 - LEFT SIDE FRONT			amago			7 8 9 10 11				
UNIT	₽				10 - LEFT SIDE FRONT, 11 - LEFT FR		ONT CORNER,	6 12				
	山	Extent Of Damage DISABLING DAMAGE			DERCARRIAGE			54321				
	>			Vehicle Demound Du								
					Vehicle Removed By							
					CRAIGS TOWING							
		What Driver Was Doing	Vehicle Factors									
		NEGOTIATING CURVE										
		Driver Prior Action Other	UNKNOWN									
		Driver Actions										
	Щ	EXCEED SPEED LIMIT, SPEED TOO FAST/COND, FAILURE TO CONTROL, FAILED TO KEEP IN DESIGNATED LANE										
E	VEHICLE											
UNIT	Ĭ											
בן	Ē											
	>											
		Owner Name		Own	er Address							
		EAN HOLDINGS LLC			02 E 21ST ST S	TE 1500						
6	5			SA, OK 74134								
	0			,	,							
	:	Sequence Of Events										
	~	Event										
	0	CURB										
	~	Event										
	02	RUN OFF ROADWAY RIC	GHT									
	Event											
	03											
		Event										
	04	Lvont										
E		Policy Holder		T								
UNIT		Insurance Company			zation/Company							
-		ENTERPRISE-RENT-A-C	AR-CO-&-EAN-TRUST-(W	EAN	HOLDINGS LLC	;						
		Individual										
		Driver		Citatio	ns Issued	Sex						
	_	ROBERT MEDINA				MALE						
	DUAL	(312) 690-0957	(312) 690-0957			Race	3					
F	5				HISPANIC							
.IZ	⋝	Address	Driver License Number									
	INDIVI	5210 S HAMLIN AVE										
	Z	CHICAGO, IL 60632, US	STATE: ILLINOIS COUNTRY: UNITED STATES Safety Equipment									
		On Dut										
	Sat	fety Equipment	y oldon	Salety Equipment								
	Row Seat Position											
					SHOULDER & LAP BELT							
		01 - FRONT ROW	07 - LEF I									
		Helmet Use		Helmet Compliance								
		Eye Protection			ompliance							
2	001	1	Severity	Airbag								
	õ	Injury NO AF	NON DEPLOYED									
		Ejected Ejection Path					Trapped/Extricated					
		NOT EJECTED	NOT EJECTED/NOT API	PLICABL	E		NOT TRAPPED					
		Medical Transport		EMS A	gency Identifier		EMS Run #					
		NOT TRANSPORTED										
I		Matar Vahiela Crash	This son	ort doog og	ot include any C.IIS	, data	Creeb D	ate 02/10/2024				

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		Hospital			Date of Death		Time of Death			
				-						
				Source CABLE (NOT DISTR	ACTED)					
		Distracted By Action								
		Non Motoris	Striking Unit #	Location						
		Prior Action								
		Action								
UNIT	INDIVIDUAL									
	IN									
		Action Other						To/From School		
			Suspected Alc		Suspected Drug Us					
	L	Drug & Alcoho	YES		NO					
		Alcohol Test Given		Alcohol Test Ty	/pe		Alcohol Test Results			
		TEST REFUSED		Drug Test Type	<u>,                                     </u>	Drug Test Desults				
		Drug Test Given TEST NOT GIVE	N	Drug Test Type	;	Drug Test Results				
2	001	Drug Type								
Individual Condition										
	UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL									
	Violations									
	01	UTC Number BG024691	Issue To? 001	Statute Number 346.63(1)(a)	Description OPERATING WH	HILE UNDER THE IN	FLUENCE			
	02 (	UTC Number	Issue To?	Statute Number 346.57(3)	Description	AST FOR CONDITIO				
	BG024692         001         346.57(3)           Property Owner				DRIVING 100 1	ASTTORCOMDITIO	10			
01	Gove SAU	ernment IK COUNTY HWY 356-3855	DEPT		Address 620 STH 136 PO BOX 26 BARABOO, WI 53913 , US					
-	Fixe	d Objects Str	uck							
	01	U	truck Object				Structure Number	Damage Tag Number <b>NA</b>		
- I	Pro	perty Owner								
		,			Address					
	Gove SAU	ernment IK COUNTY HWY 2) 356-3855	DEPT		Address 620 STH 136 PO BOX 26 BARABOO, WI 53	913,US				
PROP OWNER	Gove SAU (608				PO BOX 26	913 , US				