# 6TL0F1BQ7R

24-03220

## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash	Primary Crash Document #		Agency Crash Number		Investigating Officer/Deputy			
~	Crash Date	Crash Time	Crash Time		220 rrived	DEPUTY D	DEPUTY D. KROLIKOWSKI			
Z	04/02/2024	10:06 AM		04/02/		10:26 AM				
6TL0F1BQ7R	Date Notified 04/02/2024	Time Notified 10:06 AM			nits	Total Injured	Total Injured     Total Killed       00     00			
-0 F	On Emergency	lit and Run	it and Run				or Towed	Reporting Threshold		
6TL	Government Property		Active School Zone		School Bus Related		Tags			
	Reportable	Crash Type DT4000 (STA	ANDARD CRAS	iH)		Amend	ed	Secondary Crash		
	Description									
							Photos By DEPUTY KR Additional Info NONE, PHO	CLIKOWSKI		
	I, a sworn law enforcem	eent officer, agr	ee that I have r	not addee	d any CJIS data in th	his report.				
	DRIVER WAS DRIVING EAST ON ROAD. THE VEHICLE BEGAN DRI	CO RD K WHEN H	E LOST CONTROL	L DUE TO	DRIVING TOO FAST FOR FERLINE. IT THEN ENTEI		ONDITIONS OF	RAIN AND SLUSH ON THE ROLLED 3/4 OF A		
	ROTATION ENDING UP ON IT'S D									

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	Loc	ation									
		CTHK EB				Latitude			Longitud	de	
	834	FT W				43.48213	89196		-90.141	1087969	
		ELWOOD RD				X Coordin	ate		Y Coord	linate	
		THE TOWN OF IRONT	ON			245979.09375			481915		
	IN S	SAUK COUNTY				Structure	Туре				
						Cudotaro	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
(	Cra	sh Scene 📃				-					
	First	Harmful Event				First Harm	ful Event L	ocation			
	DIT	СН		ON ROA	DWAY						
	Man	ner of Collision				Light Condition					
	00 -	NO COLLISION W/VE	EHICLE IN TRANSPORT			DAYLIG	НТ				
	Road	d Surface Condition(s)				Roadway	Factor(s)				
	WE	T, SLUSH									
	Envi	ronment Factor(s)				-					
	NO	NE				NONE					
	Wea	ther Condition(s)				1					
	CLC	DUDY, RAIN, SLEET/H	IAIL								
	Anim	nal Type				Relation T	o Trafficwa	у			
	<u></u>	h Classification I continu					CWAY - O	N ROAD			
	Crash Classification - Location PUBLIC PROPERTY							ISDICTION			
	Tribal Land				Access Control			Special Study		Special Study	
	14/:44					rsection Type					
	NO	in Interchange Area	Junction Location NON-JUNCTION			INTERSE	CTION				
	Ini	t Summary									
		Status		Vehicle Ope	erating As C	lassification		Unit Type			
	IN TRANSIT D CLASS					AUTOMOBILE					
	Vehicle Type				Operating As Endorsements			ments			
01		ORT) UTILITY VEHICI	LE								
	-	I Occs	Train/Bus # Recorded	Total # Cita	tions Issued	d Total Trail		lers Total Haz		Mat Types	
	2			2		0		0			
	Insu	rance?	Direction Of Travel	Pre	CrashTire	•	Speed Lin	2		ies	
	NO		EASTBOUND		Mark		50				
UNIT	Mos	t Harmful Event: Collision	With		Special Function					Motor Vehicle Use	
	DIT	-			NO SPECIAL FUNCTION			NOT APPLICABLE			
	Traffic Way				Traffic Control					rol Inoperative/Missing	
		TWO-WAY, NOT DIVIDED			NO CONTROL			NO			
	Surface Type				Road Curvature			Road Grade			
	BLACKTOP (BITUMINOUS) S Truck Bus or HazMat				STRAIGHT LEVEL						
	NO										
		Vehicle									
	License Plate Number			21	Plate Type		St	-			
		Color			LTK - LIGHT TRUCK		WI	UNITED STATES			
~	_						Year	Model SILVERADO			
5	0				DLET		2020				
					Body Style			Bus Use			
		WHI - WHITE			PK - PICKUP						
	Щ				Vehicle Damage					7 8 9 10 11	
UNIT	VEHICL	12 - FRONT			01 - RIGHT FRONT CORNER, 02 - R FRONT, 03 - RIGHT SIDE MIDDLE, (				DE	6	
<b>_</b>	H	Extent Of Damage								5 4 3 2 1	
וכ					MIDDLE, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT C				5 7 5 2 1		
ر	×	DISABLING DAMAG		MIDDLE	, 10 - LEF	T SIDE FR	ONT, 11 -	LEFT FROM	IT C		

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

2 of 5

Crash Date 04/02/2024 Crash Time 10:06 AM



#### WISCONSIN MOTOR VEHICLE CRASH REPORT

		-			Vehicle Removed By				
					HIELDS TOWING ehicle Factors				
		GOING STRAIGHT	Ū.		venicie ractors				
					IOT APPLICABLE				
		Driver Actions		•					
_	Щ	SPEED TOO FAST/COND							
UNIT	VEHICLE								
2	Ē								
	1								
		Owner Name MARTHA SARMIENTO (608) 415-9724			Owner Address				
2	2				111 CRIMSON DR REEDSBURG, WI				
	Ŭ								
		Sequence Of Events							
		Event							
	5	DITCH							
	02	Event OVERTURN/ROLLOVER							
	03	Event							
	4	Event							
	64								
	1	ndividual							
		Driver SANTIAGO OROZCO PENA (608) 415-9724			Citations Issued Sex				
	AL				2 MALE Date of Birth Race				
⊢	INDIVIDUAL				HISPANIC				
NU	Σ	Address 111 CRIMSON DR			Driver License Number				
_	ž	REEDSBURG, WI 53959 , US							
	~	On Duty	Crash		Safety Equipment				
	Sai	fety Equipment							
		Row	Seat Position 07 - LEFT		SHOULDER & LAP BELT				
		01 - FRONT ROW Helmet Use	07 - Li	= F I	Helmet Compliance				
		Heiner Ose							
		Eye Protection			Tint Compliance				
-	Ξ	Injury Severity			Airbag				
6	00		ARENT I		DEPLOYED-SIDE				
			Ejection Pa		Trapped/Extricated				
		Medical Transport					NOT TRAPPED EMS Run #		
		NOT TRANSPORTED			EMS Agency Identifier				
		Hospital		Date of Death		Time of Death			
		Distracted	d By Source	e	1		1		
		Distracted By Distracted By Action	PLICABL	.E (NOT DISTRAC	CTED)				
		NOT DISTRACTED							
		Non Motorist							
				I					

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data. 3 of 5 Crash Date 04/02/2024 Crash Time 10:06 AM

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#### WISCONSIN MOTOR VEHICLE **CRASH REPORT**

		Prior Action										
ł		Action										
	AL											
⊨	INDIVIDUAL											
UNIT	Σ											
<b> </b>	Ð											
	=											
		Action Other						To/From School				
		Suspect										
		Drug & Alcohol NO			NO							
1		Alcohol Test Given		Alcohol Test Type	9		Alcohol Test Results					
		TEST NOT GIVEN		Dave Test Trees								
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	5					
5	001	Drug Type		•								
	0											
		Individual Condition										
		APPEARED NORMAL										
		Individual										
		Passenger			Citations Issued Sex 0 MALE							
	Ł	JUAN OROZCO-SARMIENTO (608) 495-3477		NIO	0							
	INDIVIDUAL				Date of Birth	Race HISPANIC						
UNIT	Ξ	Address 111 CRIMSON DR REEDSBURG, WI 53959 , US			Driver License Number							
>	ā											
	=											
		On Duty Crash			Safety Equipment							
	Sa	fety Equipment	fety Equipment									
		Row	Seat P	osition	SHOULDER & LAP	BELT						
		01 - FRONT ROW	09 - R	IGHT								
		Helmet Use	Use			Helmet Compliance						
		Eye Protection			Tint Compliance							
5	002	Injury Se			Airbag							
<b> </b>	•	Ejected	PARENT Ejection Pa		DEPLOYED-SIDE Trapped/Extricated							
		NOT EJECTED	-		LICABLE		NOT TRAPPED					
		Medical Transport			EMS Agency Identifier		EMS Run #					
		NOT TRANSPORTED										
		Hospital			Date of Death		Time of Death					
Distracted By Source												
		Striking	Unit #	Location								
		Non Motorist										
		Prior Action										
				This record	t doos not include any C l	IS data	Crash Date	04/02/2024				
	DT40	Motor Vehicle Crash 000		This repor	port does not include any CJIS data. Crash Date 04/02/2024 4 of 5 Crash Time 10:06 AM							

## WISCONSIN MOTOR VEHICLE CRASH REPORT

		Action									
	AL										
UNIT	INDIVIDUAL										
5	DIV										
	Z										
		Action Other						To/From School			
	L	Drug & Alcohol	Suspected Alco	bhol Use	Suspected Drug Use						
		Alcohol Test Given Alcoho TEST NOT GIVEN		Alcohol Test Type	cohol Test Type						
		Drug Test Given		Drug Test Type		Drug Test Results					
6	002	Drug Type									
		Individual Condition									
		APPEARED NORMAL									
		Violations									
	01	UTC Number BK260726	Issue To? 001	Statute Number 344.62(1)	Description OPERATE MOTOR	VEHICLE W/O IN	SURANCE				
	02	UTC Number BK260725	Issue To? 001	Statute Number 343.05(3)(a)	Description OPERATE W/O VAL	ID LICENSE (1S	T VIOLATION)				