

6TL0F68VNH  
24-03708

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

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Document Number Override		Primary Crash Document #		Agency Crash Number <b>24-03708</b>		Investigating Officer/Deputy <b>SERGEANT T. CLAUER</b>	
Crash Date <b>04/15/2024</b>		Crash Time <b>04:54 AM</b>		Date Arrived <b>04/15/2024</b>		Time Arrived <b>05:17 AM</b>	
Date Notified <b>04/15/2024</b>		Time Notified <b>04:54 AM</b>		Total Units <b>01</b>		Total Injured <b>00</b>	Total Killed <b>00</b>
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone		<input type="checkbox"/> Trailer or Towed	<input type="checkbox"/> Reporting Threshold	
<input type="checkbox"/> Government Property		<input type="checkbox"/> Active School Zone		School Bus Related <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

<p>Diagram</p> <p style="text-align: center;">CTH P</p> <p style="text-align: center;">NOT TO SCALE</p>	Reconstruction By
	Photos By <b>DEPUTY BARNES</b>
	Additional Information <b>PHOTOS</b>

I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

UNIT ONE WAS TRAVELING WEST ON CTH P. UNIT ONE OPERATOR STATED AN ANIMAL ENTERED THE ROADWAY. UNIT ONE OPERATOR STATED SHE SWERVED TO AVOID HITTING IT. UNIT ONE WAS TRAVELING WEST IN THE EASTBOUND LANE OF CTH P. UNIT ONE MADE AN EVASIVE MANEUVER AND ENTERED THE NORTHSIDE DITCH. UNIT ONE STRUCK TWO TREES. OPERATOR WASN'T INJURED. VEHICLE REMOVED BY PLATTS TOWING. OPERATOR ARRESTED FOR OWI.

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Location

ON CTHP WB 754 FT W OF BIRCHWOOD RD IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude <b>43.590528474</b>	Longitude <b>-89.821462253</b>
	X Coordinate <b>272237.1875</b>	Y Coordinate <b>4830263.5</b>
	Structure Type	

Crash Scene

First Harmful Event <b>TREE</b>	First Harmful Event Location <b>SHOULDER RIGHT</b>	
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DARK/UNLIT</b>	
Road Surface Condition(s) <b>DRY</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>		
Weather Condition(s) <b>CLEAR</b>		
Animal Type	Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>	Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land	Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>

Unit Summary

UNIT 01	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>AUTOMOBILE</b>		
	Vehicle Type <b>(SPORT) UTILITY VEHICLE</b>	Operating As Endorsements			
	Total Occs <b>01</b>	Train/Bus # Recorded	Total # Citations Issued <b>04</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>YES</b>	Direction Of Travel <b>WESTBOUND</b>	<input type="checkbox"/> <b>Pre Crash Tire Mark</b>	Speed Limit <b>45</b>	Total Lanes <b>02</b>
	Most Harmful Event: Collision With <b>TREE</b>	Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>	Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>	Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>				

UNIT 01 VEHICLE	<b>Vehicle</b>			
	License Plate Number <b>AVR9854</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>5XYKT3A63FG601670</b>	Make <b>KIA MOTORS CORPORAT</b>	Year <b>2015</b>	Model <b>SOR</b>
	Color <b>BLK - BLACK</b>	Body Style <b>4D - 4DR</b>		Bus Use
	Initial Contact Point <b>11 - LEFT FRONT CORNER</b>	Vehicle Damage		
Extent Of Damage <b>DISABLING DAMAGE</b>	<b>15 - ALL AREAS</b>			



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UNIT VEHICLE	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>PLATTS WRECKER</b>	
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>SPEED TOO FAST/COND, FAILURE TO CONTROL, FAILED TO KEEP IN DESIGNATED LANE</b>			
01 01	Owner Name <b>FERNANDA VALVERDE MELGAR</b>		Owner Address <b>701 STONY ACRES RD # 318 WISCONSIN DELLS, WI 53965 , US</b>	
	<b>Sequence Of Events</b>			
01 02 03 04	Event <b>DITCH</b>			
	Event <b>TREE</b>			
	Event			
	Event			
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>FIRST-CHICAGO-INSURANCE-CO</b>		Individual <b>FERNANDA VALVERDE MELGAR</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>FERNANDA VALVERDE MELGAR</b>		Citations Issued <b>04</b>	Sex <b>FEMALE</b>
	Address <b>701 STONY ACRES RD # 318 WISCONSIN DELLS, WI 53965 , US</b>		Date of Birth	Race <b>HISPANIC</b>
			Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01 001	<b>Safety Equipment</b>		On Duty Crash	
			Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>		
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</b>
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier		EMS Run #
Hospital		Date of Death		Time of Death
<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>		
Distracted By Action <b>NOT DISTRACTED</b>				

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UNIT	<b>Non Motorist</b>		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other			To/From School	
	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>YES</b>	Suspected Drug Use <b>NO</b>	
	Alcohol Test Given <b>TEST GIVEN</b>		Alcohol Test Type <b>BLOOD</b>	Alcohol Test Results <b>PENDING</b>	
	Drug Test Given <b>TEST GIVEN</b>		Drug Test Type <b>BLOOD</b>	Drug Test Results <b>PENDING</b>	
	Drug Type				
	Individual Condition <b>UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL</b>				
	<b>Violations</b>				
01	01	UTC Number <b>BK2627122</b>	Issue To? <b>001</b>	Statute Number <b>346.05(1)</b>	Description <b>OPERATING LEFT OF CENTER</b>
02	02	UTC Number <b>BK2627100</b>	Issue To? <b>001</b>	Statute Number <b>343.05(3)(a)</b>	Description <b>OPERATE W/O VALID LICENSE (1ST VIOLATION)</b>
03	03	UTC Number <b>BK2627111</b>	Issue To? <b>001</b>	Statute Number <b>346.935(2)</b>	Description <b>POSSESS OPEN INTOXICANTS IN MV-DRIVER</b>
04	04	UTC Number <b>BK2627096</b>	Issue To? <b>001</b>	Statute Number <b>346.63(1)(a)</b>	Description <b>OPERATING WHILE UNDER THE INFLUENCE</b>