

6TL0B655LN  
18-00435

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>18-00435</b>		Investigating Officer/Deputy <b>DEPUTY M. RABATA</b>	
Crash Date <b>01/11/2018</b>		Crash Time <b>03:30 PM</b>		Date Arrived <b>01/12/2018</b>		Time Arrived <b>09:03 AM</b>	
Date Notified <b>01/12/2018</b>		Time Notified <b>08:53 AM</b>		Total Units <b>01</b>		Total Injured <b>01</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>NOT TO SCALE</p>	Reconstruction By
	Photos By <b>RABATA</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 1 WAS TRAVELING EAST ON CTH JJ ON 1-11-18 AT APPROXIMATELY 1530 HOURS. UNIT 1 LOST CONTROL ON THE ICY ROAD AND ENTERED THE SOUTH DITCH WHERE IT STRUCK A UTILITY POLE. UNIT 1 SPUN AND ENTERED A FIELD. OPERATOR DROVE FROM FIELD AND PARKED IN A NEARBY DRIVEWAY. OPERATOR CALLED THE ACCIDENT IN ON 1-12-2018 AT APPROXIMATELY 0848.

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Location

ON CTHJJ WB 0.73 MI W OF DYKE RD IN THE TOWN OF SPRING GREEN IN SAUK COUNTY	Latitude <b>43.213509298</b>	Longitude <b>-90.147644934</b>
	X Coordinate <b>244322.5625</b>	Y Coordinate <b>4789336.5</b>
	Structure Type	

Crash Scene

First Harmful Event <b>DITCH</b>	First Harmful Event Location <b>SHOULDER LEFT</b>	
Manner of Collision <b>NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>ICE</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>WEATHER CONDITIONS</b>		
Weather Condition(s) <b>FREEZING RAIN OR FREEZING DRIZZLE</b>		
Animal Type	Relation To Trafficway <b>TRAFFICWAY - NOT 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

<b>UNIT</b>	<b>01</b>	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>TRUCK</b>			
		Vehicle Type <b>CARGO VAN (10,000 LBS OR LESS)</b>			Operating As Endorsements		
		Total Occs <b>1</b>	Train/Bus # Injured	Total # Citations Issued <b>1</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"/> Pre Crash Tire Mark	Speed Limit <b>55</b>	Total Lanes <b>2</b>	
		Most Harmful Event: Collision With <b>UTILITY POLE</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>					

<b>UNIT</b>	<b>01</b>	<b>Vehicle</b>			
		License Plate Number <b>GA4795</b>	Plate Type <b>LTK - LIGHT TRUCK</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>1GTGG25V861112008</b>	Make <b>GENERAL MOTORS COR</b>	Year <b>2006</b>	Model <b>SAVANA G25</b>
		Color <b>WHI - WHITE</b>	Body Style <b>VN - VAN</b>		Bus Use <b>NOT A BUS</b>
		Initial Contact Point <b>12--FRONT</b>	Vehicle Damage		
		Extent Of Damage <b>DISABLING DAMAGE</b>	<b>1--RIGHT FRONT CORNER, 12--FRONT</b>		

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UNIT	VEHICLE	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>GEORGES AUTO BODY</b>		
		What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors		
		Driver Prior Action Other		<b>NOT APPLICABLE</b>		
		Driver Actions <b>FAILURE TO CONTROL</b>				
01	01	Driver Distractions <b>NOT DISTRACTED</b>				
		Owner Name <b>BJ'S APPLIANCE CENTER INC (608) 742-5351</b>		Owner Address <b>1411 NEW PINERY RD PORTAGE, WI 53901 1309, US</b>		
<b>Sequence Of Events</b>						
UNIT	INDIVIDUAL	01	Event <b>DITCH</b>			
		02	Event <b>UTILITY POLE</b>			
		03	Event			
		04	Event			
<b>Policy Holder</b>						
Insurance Company <b>ALLMERICA-FINANCIAL-BENEFIT-INS-CO</b>		Organization/Company <b>BJ'S APPLIANCE CENTER INC</b>				
<b>Individual</b>						
Driver <b>ROBIN WAYNE MEYERS (608) 234-1287</b>		Citations Issued <b>1</b>		Sex <b>MALE</b>		
Date of Birth [REDACTED]		Race <b>WHITE</b>				
Address <b>2298 S THOMPSON DR MADISON, WI 53716 , US</b>		Driver License Number [REDACTED] <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>				
<b>Equipment</b>		On Duty Crash		Safety Equipment		
Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>		<b>SHOULDER &amp; LAP BELT</b>				
Helmet Use		Helmet Compliance				
Eye Protection		Tint Compliance				
01	001	<b>Injury</b>		Airbag		
		Injury Severity <b>SUSPECTED MINOR INJURY</b>		<b>NON DEPLOYED</b>		
Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABL</b>		Trapped/Extricated <b>NOT TRAPPED</b>		

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UNIT	INDIVIDUAL	Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #	
		Hospital		Date of Death	Time of Death	
		<b>Non Motorist</b>	Striking Unit #	Prior Action	Location	To/From School
		Action				
		Action Other				
		<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>		Suspected Drug Use <b>NO</b>	
		Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type	Alcohol Test Results	
		Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type	Drug Test Results	
		Drug Type				
		Individual Condition <b>NOT OBSERVED</b>				
01	001	<b>Violations</b>				
		UTC Number <b>AD979820</b>	Issue To? <b>001</b>	Statute Number <b>346.70(1)</b>	Seq Num <b>006</b>	Description <b>FAILURE OF OPERATOR TO NOTIFY POLICE OF ACCIDENT</b>
<b>Property Owner</b>						
PROP OWNER	01	Unknown		Address , ,		
		<b>Fixed Objects Struck</b>				
02	01	Striking Unit	Struck Object	Structure Number	Damage Tag Number	
		<b>01</b>	<b>DITCH</b>			
<b>Property Owner</b>						
PROP OWNER	02	Organization/Company <b>ALLIANT ENERGY</b>		Address <b>4902 N BILTMORE MADISON, WI 53707 1077, US</b>		
		<b>Fixed Objects Struck</b>				
01	01	Striking Unit	Struck Object	Structure Number	Damage Tag Number	
		<b>01</b>	<b>UTILITY POLE</b>			