6TL0B1714M

18-02345

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Override	18-02345 DEPt Crash Time Date Arrived Time Arrived			restigating Officer/Deputy EPUTY I. HANSON			
Crash Date 03/05/2018						Time Arrived 11:10 PM	
Date Notified	Time Notified		Total Units		Total Injured	d Total Killed	
03/05/2018	11:10 PM		01		00	00	D
On Emergency	it and Run	Lane Clos	sure	Work Zone	Trailer	or Towed	Reporting Threshold
O3/05/2018 Date Notified O3/05/2018 On Emergency Government Property	Active So	chool Zone	School NO	Bus Related	Tags		
Reportable	Crash Type DT4000 (STA	ANDARD CRAS	5H)		Amend	ed	Secondary Crash
Description Diagram						Reconstruction	
↓ I, a sworn law enforcem		reportable	not added	any CJIS data in th	nis report.	Additional Infor	rmation
<u> </u>							
ON 03-05-18 THE OPERATOR V DITCHLINE. VEHICLE WAS REM				AND SLUSH THE DRIV	/ER LOST CONT	ROL AND ENTE	ERED THE WEST

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L	_OC	ation									
ſ	INTERSECTION					Latitude		Longitude			
	ON										
	AT IN THE					X Coordinate		Y Coord	Y Coordinate		
	IN THE IN COUNTY										
	IN COUNTY					Structure Type					
							NO STRUCTURE				
_	`	oh Coone				l					
-		sh Scene									
		Harmful Event					ıful Event L				
L	DIT						ER RIGH	IT			
		ner of Collision				Light Cond					
	NO	COLLISION W/VEHIC	LE IN TRANSPORT			DARK/UNLIT Roadway Factor(s)					
ſ	Road	d Surface Condition(s)									
	SNC	OW									
Ļ											
	Envii	ronment Factor(s)									
	WE	ATHER CONDITIONS				NONE					
- }	Wea	ther Condition(s)									
	SNC	• •									
	SINC	J Y Y									
ļ	Anim	nal Type				Relation T	o Trafficwa	y			
						TRAFFIC	CWAY - O	N ROAD			
f	Cras	sh Classification - Location	1			Crash Clas	ssification -	Jurisdiction			
	PUBLIC PROPERTY					NO SPECIAL JURISDICTION					
F	Tribal Land					Access Control Special Study					
						NO CONTROL					
F	With	in Interchange Area	Junction Location		Intersection	n Type					
	NO					INTERSECTION					
- 1						INIERSE	CHON				
L		. 0			NOT AN	INTERSE	CHON				
į	Jni	t Summary =									
Į	Jni t Unit	Status			erating As C			Unit Type			
_ _	Jnit Unit IN T	Status RANSIT		Vehicle Ope	erating As C			AUTOMO			
<u> </u>	Jnit Unit IN T	Status *RANSIT cle Type			erating As C					ments	
5	Jnit Unit IN T Vehic	Status RANSIT cle Type SSENGER CAR		D CLASS	erating As C	lassification		AUTOMO Operating A	s Endorse		
- - - -	Unit IN T Vehice PAS	Status *RANSIT cle Type	Train/Bus # Injured	D CLASS	erating As C	lassification	Total Trai	AUTOMO Operating A	s Endorse	ments Mat Types	
5	Unit IN T Vehic PAS Total	Status RANSIT cle Type SSENGER CAR	·	D CLASS	erating As C	lassification	Total Trai	AUTOMO Operating A	s Endorsei	Mat Types	
5	Unit Unit IN T Vehice PAS Total 2	Status RANSIT cle Type SSENGER CAR I Occs	Direction Of Travel	D CLASS Total # Cita	erating As C	lassification	Total Trai 0 Speed Lir	AUTOMO Operating A	Total Haz	Mat Types	
5	Jnit Unit IN T Vehic PAS Total 2 Insur YES	Status RANSIT cle Type SSENGER CAR I Occs rance?	Direction Of Travel SOUTHBOUND	Total # Cita	erating As C tions Issued CrashTire Mark	lassification	Total Trai	AUTOMO Operating A	Total Haz Total Lan 2	Mat Types es	
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SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT BARABOO, WI 53913 (608) 356-4895

		Towed Due To Dama	ige	Veh	icle Removed By				
		TOWED BUT NOT	DUE TO DISABLING DAMAG	EJ	ESCO				
		What Driver Was Doi	ng	Veh	icle Factors				
		GOING STRAIGH	T						
		Driver Prior Action Other			NOT APPLICABLE				
		Dilver i noi Action Ot	inei		-				
		Dairea Astisas							
		Driver Actions	ITDOL						
	Щ	FAILURE TO CON	IROL						
╘	ರ								
LINO	王								
_	VEHICL								
		Driver Distractions							
		NOT DISTRACTE	D						
5	2								
0	0								
		Owner Name			Owner Address				
			ERNANDEZ SANTOS		1197 BUNKER DR 207B				
					BARABOO, WI 53913 , US				
	;	Sequence Of E	vents						
	_	Event	WAY BIOLIT						
	2	RUN OFF ROADWAY RIGHT							
	~ I	Event							
	02								
		Event							
	03								
		Event							
	9	LVOIR							
⊨		Policy Holder							
UNIT		Insurance Company		li li	ndividual				
_		GEICO-ADVANTA	GE-INSURANCE-CO	١,	JUAN CARLOS HERNANDEZ SANTOS				
		Individual							
				10	Citations Issued	I c			
		Driver MIRAYA M JIMINI	EZ VEGA		diations issued	Sex			
	7	WIIIA IA W SIWIIA	LZ VLGA			FEMALE			
	7			1	Date of Birth	Race			
⊨	₫					HISPANIC			
LNO	INDIVIDUA	Address			river License Number				
_	₽	1197 BUNKER DR 207B							
	=	BARABOO, WI 53	913 , US	STATE: PUERTO RICO COUNTRY: UNITED STATES					
			On Duty Crash	9	Safety Equipment				
		Equipment	on budy cracin		arety Equipment				
		Seat Position			SHOULDER & LAP BELT				
			FET OLDE (DDIVED/MOTODOV	1	SHOULDER & LAP BELT				
			LEFT SIDE (DRIVER/MOTORCY						
		Helmet Use			lelmet Compliance				
				[
		Eye Protection			Tint Compliance				
_	Ξ		Injury Severity	A	irbag				
6	90	Injury	NO APPARENT INJURY	1	ION DEPLOYED				
		Ejected	1	Ejection Path Trapped/Extricated					
		NOT EJECTED			NOT EJECTED/NOT APPLICABL	NOT TRAPPED			
				1 -	_ _				

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

		Medical Transport			LEMO A	:t:	EMC D "			
					EMS Agency Ident	ifier	EMS Run #			
		NOT TRANSPOR	TED							
		Hospital			Date of Death		Time of Death			
			Striking Unit #	Prior Action		Location		To/From School		
		Non Motorist	Striking Onit #	PHOI ACTION		Location		TO/FIGHT SCHOOL		
		Action								
	بِ									
	INDIVIDUAL									
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LINO	Ħ									
\supset	\leq									
	爿									
	=									
		Action Other								
			Suspected Alcohol U	Jse	Suspected Drug U	se				
		Drug & Alcohol	NO		NO					
		Alcohol Test Given			Alcohol Test Type		Alcohol Test Results			
		TEST NOT GIVEN	l							
		Drug Test Given			Drug Test Type		Drug Test Results			
		TEŠT NOT GIVEN	l							
		D T								
5	00	Drug Type								
_	0									
		Individual Condition								
		APPEARED NOR	MAL							
		Individual								
		Passenger			Citations Issued		Sex			
		SANTOS JUAN HERNANDEZ					MALE			
	4				D ((D) (Race			
	3				Date of Birth					
⊨	INDIVIDUAL				HISPANIC					
LNO	≥	Address			Driver License Number					
ر	\Box	1197 BUNKER DE			STATE: WISCONSIN COUNTRY: UNITED STATES					
	=	BARABOO, WI 53	8913 , US							
		Equipment	On Duty Crash		Safety Equipment					
		Equipment								
		Seat Position			SHOULDER & LAP BELT					
		3FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER			OHOGEDER & EAR BEET					
			THOIT OIDE (TITAL	IN ENGINEER	11.1.10					
		Helmet Use			Helmet Compliance	е				
		Eye Protection			Tint Compliance					
_	7	Injury Severity			Airbag					
5	005	Injury NO APPARENT INJURY			NON DEPLOYED					
		• •	INO ALL AKENTI	NOOK I						
		Ejected			Ejection Path		Trapped/Extricated			
		NOT EJECTED			NOT EJECTED/NOT APPLICABL		NOT TRAPPED			
		Medical Transport			EMS Agency Ident	ifier	EMS Run #			
		NOT TRANSPOR	TED		Date of Death		Time of Death			
		Hospital								
		, iospitai			Date of Death		Time of Death			
						T		T =		
		Non Motorist	Striking Unit #	Prior Action		Location	To/From School			
	NON WOTORIST									
				<u> </u>				I		

Crash Time 11:00 PM

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

Crash Date 03/05/2018

Crash Time 11:00 PM

					` ,
		Action			
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	4				
╘	a				
UNIT	>				
_	INDIVIDUAL				
	Z				
		Action Other			
		Suspected Alcohol Use	Suspected Drug Use		
	E	Orug & Alcohol NO	NO		
		Alcohol Test Given	Alcohol Test Type	Alcohol Test Results	
		TEST NOT GIVEN			
		Drug Test Given	Drug Test Type	Drug Test Results	
		TEŠT NOT GIVEN			
_	N	Drug Type	l l	l l	
01	002				
		Individual Condition			
		APPEARED NORMAL			