

6TL09B7D8J
18-03251

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 18-03251		Investigating Officer/Deputy DEPUTY A. MEEKER	
Crash Date 03/30/2018		Crash Time 06:28 PM		Date Arrived 03/30/2018		Time Arrived 06:49 PM	
Date Notified 03/30/2018		Time Notified 06:34 PM		Total Units 01		Total Injured 02	Total Killed 00
<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 checked="" type="checkbox"/> Government Property		<input type="checkbox"/> Active School Zone		School Bus Related NO		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram 	Reconstruction By
	Photos By
	Additional Information PHOTOS

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

ON SAID DATE AND TIME UNIT 1 WAS TRAVELING WESTBOUND ON HWY 136 AND ATTEMPTED TO TURN LEFT ONTO JUNCTION RD. UNIT 1 LOST CONTROL AND STRUCK A UTILITY POLE AND TRAFFIC SIGN. DRIVER IDENTIFIED BY WI DL PASSENGER IDENTIFIED BY MS IDENTIFICATION. DRIVER SAID HE WAS DOING APPROXIMATELY 55 MPH PRIOR TO THE INTERSECTION AND BEGAN TO SLOW DOWN TO MAKE THE LEFT TURN. DRIVER SAID THE BRAKES THEN FAILED AND HE FELT THE BRAKE PEDAL PUSHING BACK AGAINST HIS FOOT. DRIVER SAID HE WAS UNABLE TO TURN AND HIT THE POLE. PASSENGER CONFIRMED THIS CLAIM AND SAID HE NOTICED DRIVER ATTEMPTING TO TURN THE WHEEL BUT IT APPEARED TO BE DIFFICULT. DRIVER SAID HE DID NOT HAVE INSURANCE ON THE VEHICLE. DRIVER ALSO SAID HE HAD RECENTLY HAD THE STRUTS REPLACED IN THE VEHICLE AT DOUGLAS AUTO SHOP IN REEDSBURG WI. PHOTOGRAPHS OF THE SCENE WERE TAKEN.

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Location

ON JUNCTION RD 69 FT W OF STH136 WB IN THE TOWN OF EXCELSIOR IN SAUK COUNTY	Latitude 43.519577791	Longitude -89.950054368
	X Coordinate 261576.3125	Y Coordinate 4822744
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event UTILITY POLE	First Harmful Event Location ON ROADWAY	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLEAR		
Animal Type	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control PARTIAL CONTROL	Special Study
Within Interchange Area NO	Junction Location INTERSECTION	Intersection Type T-INTERSECTION

Unit Summary

UNIT 01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE		
	Vehicle Type PASSENGER CAR	Operating As Endorsements			
	Total Occs 2	Train/Bus # Injured	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? NO	Direction Of Travel WESTBOUND	<input checked="" type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With UTILITY POLE		Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL	Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT	Road Grade LEVEL	
	Truck Bus or HazMat NO				

UNIT 01	Vehicle			
	License Plate Number ACF8479	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number JT2BF28K810331668	Make TOYOTA	Year 2001	Model CAMRY LE/X
	Color TAN - TAN	Body Style 4D - 4DR		Bus Use NOT A BUS
	Initial Contact Point 12--FRONT	Vehicle Damage		
Extent Of Damage DISABLING DAMAGE	1--RIGHT FRONT CORNER, 11--LEFT FRONT CORNER, 12--FRONT			

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UNIT	VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By STEVES AUTO SERVICE			
		What Driver Was Doing LEFT TURN		Vehicle Factors BRAKES			
		Driver Prior Action Other					
		Driver Actions FAILURE TO CONTROL					
01	01	Driver Distractions UNKNOWN IF DISTRACTED					
		Owner Name ZANE DE WALLEY (608) 415-2693		Owner Address S3182 STATE ROAD 136 REEDSBURG, WI 53959 , US			
Sequence Of Events							
UNIT	INDIVIDUAL	01	Event UTILITY POLE				
		02	Event				
		03	Event				
		04	Event				
UNIT	INDIVIDUAL	01	001	Driver ZANE DE WALLEY (608) 415-2693		Citations Issued 0	Sex MALE
				Date of Birth		Race WHITE	
		Address S3182 STATE ROAD 136 REEDSBURG, WI 53959 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
		Equipment		On Duty Crash	Safety Equipment		
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		SHOULDER & LAP BELT			
		Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
		Injury		Injury Severity SUSPECTED MINOR INJURY	Airbag DEPLOYED-FRONT		
		Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABL		Trapped/Extricated NOT TRAPPED	
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #	

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UNIT	Hospital		Date of Death		Time of Death	
	Non Motorist		Striking Unit #	Prior Action	Location	To/From School
	Action					
	Action Other					
	Drug & Alcohol		Suspected Alcohol Use NO		Suspected Drug Use NO	
	Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type	Alcohol Test Results	
	Drug Test Given TEST NOT GIVEN			Drug Test Type	Drug Test Results	
	Drug Type					
	Individual Condition APPEARED NORMAL					
	UNIT	Individual				
Passenger GARY MCINTYRE (608) 415-9890			Citations Issued 0		Sex MALE	
			Date of Birth		Race	
Address 41 THOMAS RD REEDSBURG, WI 53959 , US			Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
Equipment		On Duty Crash		Safety Equipment		
Seat Position 3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER			SHOULDER & LAP BELT			
Helmet Use			Helmet Compliance			
Eye Protection			Tint Compliance			
Injury		Injury Severity POSSIBLE INJURY		Airbag DEPLOYED-FRONT		
Ejected NOT EJECTED			Ejection Path NOT EJECTED/NOT APPLICABL		Trapped/Extricated NOT TRAPPED	
Medical Transport NOT TRANSPORTED			EMS Agency Identifier		EMS Run #	
Hospital		Date of Death		Time of Death		
Non Motorist		Striking Unit #	Prior Action	Location	To/From School	

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UNIT	INDIVIDUAL	Action			
		Action Other			
	01	002	Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use NO
			Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	Alcohol Test Results
			Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results
			Drug Type		
			Individual Condition APPEARED NORMAL		

Property Owner

PROP OWNER	01	Organization/Company ALLIANT ENERGY	Address 4902 N BILTMORE MADISON, WI 53707 1077, US
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Fixed Objects Struck

PROP OWNER	01	Striking Unit 01	Struck Object UTILITY POLE	Structure Number	Damage Tag Number
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Property Owner

PROP OWNER	02	Government TOWNSHIP OF EXCELSIOR (608) 522-5115	Address 100 E BROADWAY PO BOX 57 ROCK SPRINGS, WI 53961 , US
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Fixed Objects Struck

PROP OWNER	02	Striking Unit 01	Struck Object TRAFFIC SIGN POST	Structure Number	Damage Tag Number 337751
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