

6TL09JDKVM  
18-03267

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>18-03267</b>		Investigating Officer/Deputy <b>DEPUTY B. SCHLOUGH</b>	
Crash Date <b>03/31/2018</b>		Crash Time <b>03:25 AM</b>		Date Arrived <b>03/31/2018</b>		Time Arrived <b>03:50 AM</b>	
Date Notified <b>03/31/2018</b>		Time Notified <b>03:40 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>FERN DELL RD</p> <p>ISHNALA RD</p> <p>DRAWING NOT TO SCALE</p>	Reconstruction By
	Photos By
	Additional Information <b>NONE</b>

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

UNIT 1 WAS TRAVELING S/B ON ISHNALA RD APPROACHING THE INTERSECTION WITH FERN DELL RD. UNIT 1 FAILED TO STOP AT THE STOP SIGN AND CONTINUED THROUGH THE INTERSECTION LEAVING THE ROADWAY ENTERING THE E/B DITCH OF FERN DELL RD. UNIT 1 THEN STRUCK A TREE HEAD AND CAME TO REST APPROXIMATELY 30 YARDS OFF THE ROADWAY FACING EAST.

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Location

<b>INTERSECTION ON FERN DELL RD (1) AT ISHNALA RD IN THE TOWN OF DELTON IN SAUK COUNTY</b>	Latitude <b>43.561241242</b>	Longitude <b>-89.798826035</b>
	X Coordinate <b>273954.96875</b>	Y Coordinate <b>4826949</b>
	Structure Type	

Crash Scene

First Harmful Event <b>TREE</b>	First Harmful Event Location <b>SHOULDER RIGHT</b>	
Manner of Collision <b>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>INTERSECTION</b>	Intersection Type <b>T-INTERSECTION</b>

Unit Summary

<b>UNIT 01</b>	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>	
	Vehicle Type <b>PASSENGER CAR</b>	Operating As Endorsements			
	Total Occs <b>1</b>	Train/Bus # Injured	Total # Citations Issued <b>2</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>NO</b>	Direction Of Travel <b>SOUTHBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>45</b>	Total Lanes <b>2</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>STOP SIGN</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 01</b>	<b>Vehicle</b>				
	License Plate Number <b>498YGV</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
	Vehicle Identification Number <b>2B3HD46R94H629893</b>	Make <b>DODGE</b>	Year <b>2004</b>	Model <b>INTREPID</b>	
	Color <b>SIL - SILVER (ALUMINUM)</b>	Body Style <b>4D - 4DR</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>12--FRONT</b>			

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UNIT	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>MIKES TOWING</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, DISREGARDED STOP SIGN</b>			
01	01	Driver Distractions <b>NOT DISTRACTED</b>		
		Owner Name <b>DAVID PFUTZENREUTER (608) 415-9141</b>	Owner Address <b>614 E EDGEWATER ST #16 PORTAGE, WI 53901 , US</b>	
<b>Sequence Of Events</b>				
UNIT	01	Event <b>TREE</b>		
		Event		
		Event		
		Event		
01	001	<b>Individual</b>		
		Driver <b>DAVID PFUTZENREUTER (608) 415-9141</b>	Citations Issued <b>2</b>	Sex <b>MALE</b>
			Date of Birth	Race <b>WHITE</b>
		Address <b>614 E EDGEWATER ST #16 PORTAGE, WI 53901 , US</b>	Driver License Number <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		
<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 APPLICABL</b>	Trapped/Extricated <b>NOT TRAPPED</b>	
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #	

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UNIT	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>YES</b>		Suspected Drug Use <b>NO</b>	
	Alcohol Test Given <b>TEST REFUSED</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>UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL</b>					
	<b>Violations</b>					
01	001	UTC Number	Issue To?	Statute Number	Seq Num	Description
		<b>AD977748</b>	<b>001</b>	<b>346.63(1)(a)</b>	<b>002</b>	<b>OPERATING WHILE UNDER THE INFLUENCE</b>
02	001	UTC Number	Issue To?	Statute Number	Seq Num	Description
		<b>AD977749</b>	<b>001</b>	<b>344.62(1)</b>	<b>001</b>	<b>OPERATE MOTOR VEHICLE W/O INSURANCE</b>