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18-03896

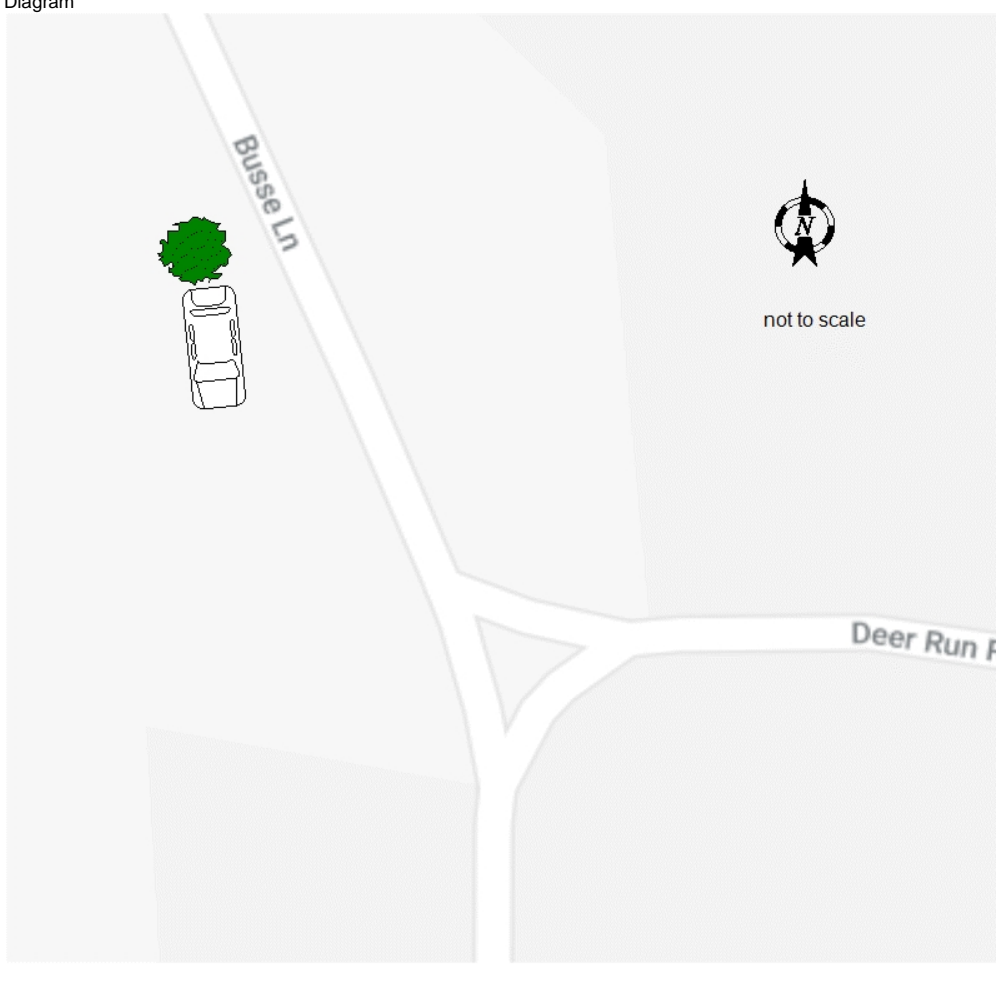
WISCONSIN MOTOR VEHICLE CRASH REPORT

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 18-03896	Investigating Officer/Deputy DEPUTY E. KNULL	
Crash Date 04/18/2018		Crash Time 07:00 AM	Date Arrived 04/18/2018	Time Arrived 09:53 AM	
Date Notified 04/18/2018		Time Notified 09:27 AM	Total Units 01	Total Injured 00	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 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 NONE

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

ON 4-18-18 OPERATOR WAS TRAVELING NB ON BUSSE LN AND LOST CONTROL OF HIS VEHICLE SPINNING OUT AND STRIKING A TREE WITH REAR END OF VEHICLE. NO INJURIES REPORTED. VEHICLE SUSTAINED DISABLING DAMAGE AND WAS REMOVED BY INTERSTATE BP TOWING. OPERATOR ADMITTED TO GOING TOO FAST ON THE ICE COVERED ROAD AND WAS CITED FOR TOO FAST FOR CONDITIONS. OPERATOR ALSO ADMITTED TO NOT HAVING ANY INSURANCE ON VEHICLE AND WAS CITED FOR OPERATE WITHOUT INSURANCE.

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Location

ON BUSSE LN 210 FT N OF YELLOW THUNDER TRL IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude 43.565068609	Longitude -89.787672163
	X Coordinate 274870.09375	Y Coordinate 4827344
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event DITCH	First Harmful Event Location SHOULDER LEFT	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAYLIGHT	
Road Surface Condition(s) ICE	Roadway Factor(s) NONE	
Environment Factor(s) WEATHER CONDITIONS		
Weather Condition(s) CLOUDY		
Animal Type	Relation To Trafficway TRAFFICWAY - NOT ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN 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 2	Total Trailers 0	Total HazMat Types 0	
	Insurance? NO	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 25	Total Lanes 2	
	Most Harmful Event: Collision With TREE		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	VEHICLE	Vehicle			
		License Plate Number ABS1687	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 2G4WS52J431219233	Make BUICK	Year 2003	Model CENTURY
		Color GRY - GRAY	Body Style SD - SEDAN		Bus Use NOT A BUS
		Initial Contact Point 6--REAR	Vehicle Damage 5--RIGHT REAR CORNER, 6--REAR		
Extent Of Damage DISABLING DAMAGE					

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UNIT	VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By INTERSTATE BP			
		What Driver Was Doing GOING STRAIGHT		Vehicle Factors			
		Driver Prior Action Other		NOT APPLICABLE			
		Driver Actions SPEED TOO FAST/COND					
		Driver Distractions NOT DISTRACTED					
01	01	Owner Name JOSIAH NAKAI (608) 387-4374		Owner Address 719 MUBARAK ST TOMAH, WI 54660 , US			
Sequence Of Events							
	01	Event DITCH					
	02	Event TREE					
	03	Event					
	04	Event					
UNIT	INDIVIDUAL	Individual					
		Driver JOSIAH NAKAI (608) 387-4374		Citations Issued 2	Sex MALE		
				Date of Birth	Race INDIAN		
		Address 719 MUBARAK ST TOMAH, WI 54660 , 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			
			001	Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED	
		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	INDIVIDUAL	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 YES	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 NOT OBSERVED				
		UNIT	INDIVIDUAL	Individual		
Passenger KYLE RANK (608) 432-3959	Citations Issued 0			Sex MALE		
Date of Birth				Race WHITE		
Address N5614 BEICH RD PORTAGE, WI 53901 , US				Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
Equipment	On Duty Crash			Safety Equipment SHOULDER & LAP BELT		
Seat Position 3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER				Helmet Compliance		
Helmet Use				Tint Compliance		
Eye Protection				Airbag NON DEPLOYED		
Injury	Injury Severity NO APPARENT INJURY			Ejection Path NOT EJECTED/NOT APPLICABL		
Ejected NOT EJECTED				Trapped/Extricated NOT TRAPPED		
Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #			
Hospital		Date of Death	Time of Death			
UNIT	INDIVIDUAL	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				
			Violations				
	02	01	UTC Number AD979388	Issue To? 001	Statute Number 346.57(3)	Seq Num 001	Description DRIVING TOO FAST FOR CONDITIONS
			UTC Number AD979389	Issue To? 001	Statute Number 344.62(1)	Seq Num 001	Description OPERATE MOTOR VEHICLE W/O INSURANCE