

6TL0B8M7T3
18-03906

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 18-03906 | Investigating Officer/Deputy DEPUTY B. MEARS | |
| Crash Date 04/18/2018 | | Crash Time 02:10 PM | Date Arrived 04/18/2018 | Time Arrived 02:35 PM | |
| Date Notified 04/18/2018 | | Time Notified 02:10 PM | 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

| | |
|--|---|
| <p>Diagram</p> <p style="text-align: center;">*not to scale*</p> | Reconstruction By |
| | Photos By DEPUTY MEARS |
| | Additional Information PHOTOS |

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

..UNIT WAS WB ON 3RD ST GOING INTO A CURVE. THE ROADWAY WAS SNOW/ICE COVERED AND SLIPPERY. UNIT TRAVELED OFF OF THE WEST SIDE OF THE ROADWAY A FEW FEET WHERE IT STRUCK A TREE ON THE FRONT DRIVERS SIDE. OPERATOR WAS NOT INJURED. UNIT HAD FRONT/DRIVERS SIDE DAMAGE. UNIT WAS PULLED OUT ONTO ROADWAY BY A FRIEND AND LEGALLY PARKED. ANOTHER MOTORIST HAD REPORTED THAT THIS UNIT HAD BEEN TAILGATING HIM EARLIER AND PASSED HIM AND LATER HE HAD FOUND HE HAD SLID INTO A TREE OPERATOR WAS CITED FOR NO INSURANCE.

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Location

| | | |
|--|--------------------------------------|----------------------------------|
| ON 3RD ST 242 FT W OF WEST ST IN THE VILLAGE OF IRONTON IN SAUK COUNTY | Latitude 43.544346301 | Longitude -90.14346734 |
| | X Coordinate 246047.921875 | Y Coordinate 4826068 |
| | Structure Type | |

Crash Scene

| | | |
|---|---|---|
| First Harmful Event TREE | First Harmful Event Location SHOULDER RIGHT | |
| Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT | Light Condition DAYLIGHT | |
| Road Surface Condition(s) SNOW, SLUSH, ICE | Roadway Factor(s) ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC) | |
| Environment Factor(s) WEATHER CONDITIONS | | |
| Weather Condition(s) SNOW | | |
| 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 01 | Train/Bus # Injured | Total # Citations Issued 02 | Total Trailers 0 | Total HazMat Types 0 | |
| | Insurance? NO | Direction Of Travel WESTBOUND | <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 CURVE LEFT | | Road Grade DOWNHILL | |
| | Truck Bus or HazMat NO | | | | | |

| | | | | | |
|-------------|--|---|--|---------------------|---|
| UNIT | 01 | Vehicle | | | |
| | | License Plate Number 415XSU | Plate Type AUT - AUTOMOBILE | St WI | Country of Issuance UNITED STATES |
| | | Vehicle Identification Number 3VWCK21CX3M435909 | Make VOLKSWAGEN | Year 2003 | Model NEW BEETLE |
| | | Color GRN - GREEN | Body Style 2H - HATCHBACK 2 DOOR | | Bus Use NOT A BUS |
| | | Initial Contact Point 12--FRONT | Vehicle Damage 10--LEFT SIDE FRONT, 11--LEFT FRONT CORNER, 12--FRONT | | |
| | Extent Of Damage FUNCTIONAL DAMAGE | | | | |

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|---|------------|--|----------------------|--|----------------------|---|--|
| UNIT | VEHICLE | Towed Due To Damage NOT TOWED | | Vehicle Removed By OPERATOR | | | |
| | | What Driver Was Doing NEGOTIATING CURVE | | Vehicle Factors | | | |
| | | Driver Prior Action Other | | NOT APPLICABLE | | | |
| | | Driver Actions SPEED TOO FAST/COND, FAILURE TO CONTROL | | | | | |
| 01 | 01 | Driver Distractions DISTRACTED BY OUTSIDE PERSON, OBJECT, OR EVENT | | | | | |
| | | Owner Name DEVRON B PUTZ (000) 000-0000 | | Owner Address S7559 UH 12 R4 NORTH FREEDOM, WI 53951 , US | | | |
| | | Sequence Of Events | | | | | |
| | | 01 | Event TREE | | | | |
| 02 | Event | | | | | | |
| 03 | Event | | | | | | |
| 04 | Event | | | | | | |
| UNIT | INDIVIDUAL | Individual | | | | | |
| | | Driver BRANDON ALEXANDER NICASTRO (608) 415-3037 | | Citations Issued 02 | Sex MALE | | |
| | | Address 401 3RD ST LA VALLE, WI 53941 , US | | Date of Birth [REDACTED] | Race BLACK | | |
| | | | | Driver License Number [REDACTED] STATE: ILLINOIS 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 | | | |
| | | 01 | 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 | 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 | | | | | |
| | Violations | | | | | |
| 01 | UTC Number | Issue To? | Statute Number | Seq Num | Description | |
| | AD980819 | 001 | 344.62(1) | 001 | OPERATE MOTOR VEHICLE W/O INSURANCE | |
| 02 | UTC Number | Issue To? | Statute Number | Seq Num | Description | |
| | AD980820 | 001 | 343.44(1)(a) | 001 | OPERATING AFTER SUSPENSION | |