WISCONSIN MOTOR VEHICLE CRASH REPORT

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

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	Document Number Override	Primary Crash I	•		Crash Number 923	Investigating Officer/Deputy DEPUTY J. KIRKENG		
.092T5M3	Crash Date 07/01/2018	Crash Time 02:28 AM			rrived 2018	Time Arrived 02:31 AM		
	Date Notified 07/01/2018	Time Notified 02:28 AM	Time Notified		nits	Total Injured Total Killed 01 00		
	On Emergency	Hit and Run	nd Run		☐ Work Zone			Reporting Threshold
6TL	Government Property	Active Sc	Active School Zone		Bus Related	Tags		
)		Amended		Secondary Crash

Description



UNIT 1 WAS TRAVELING W/B ON STH 23-33. UNIT 1 CROSSED THE CENTER LINE ENTERING THE DITCH ON THE SOUTH SIDE OF THE ROADWAY. UNIT 1 STRUCK A CULVER CAUSING THE VEHICLE TO OVERTURN UNTIL IT CAME TO REST ON ITS WHEELS.

Location ON STH23 WB

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Latitude

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Crash Time 02:28 AM

Longitude

		FT E				43.53305	1357		-89.934	387479
		LAKE VIRGINIA RD HE TOWN OF EXCEL	SIOR			X Coordina	ate		Y Coordi	
		AUK COUNTY	OIOR			262895.4	0625		482419	6
						Structure T				
	Cra	sh Scene								
	First	Harmful Event				First Harm	ful Event L	.ocation		
	DIT	СН				SHOULD				
	Man	ner of Collision				Light Cond	lition			
	NO	COLLISION W/VEHIC	LE IN TRANSPORT			DARK/UN	NLIT			
	Road	d Surface Condition(s)				Roadway F	actor(s)			
	WE	Г								
	Envi	ronment Factor(s)								
	МОИ	NE				NONE				
	Wea	ther Condition(s)								
	CLC	OUDY, RAIN								
	Anim	nal Type				Relation To		,		
						TRAFFIC				
		h Classification - Location						Jurisdiction		
		BLIC PROPERTY						RISDICTION		To
	TIDE	al Land				Access Co				Special Study
		in Interchange Area	Junction Location		Intersection	,,				
	NO		NON-JUNCTION		NOT AN	INTERSE	CTION			
		t Summary 💻								
		Status		Vehicle Ope	•	21				
		IN TRANSIT D CLASS						AUTOMO		
5		ehicle Type						Operating A	As Endorsen	nents
•		ORT) UTILITY VEHICE	Train/Bus # Injured	Total # Cita	otal # Citations Issued Total T		Total Trai	railers Total HazMat Types		Mat Types
	2	TOCCS	Trail/bus # Injureu	2			0		0	wat Types
		rance?	Direction Of Travel	Pre CrashTi		Chandli		imit Total Lan		 9S
—	YES	}	WESTBOUND	✓ 116	✓ Mark		55		2	
	Most	Harmful Event: Collision	With	Special Fun				Emergency Motor Vehicle Use		
_		VERT		NO SPEC	NO SPECIAL FUNCTION			NOT APP	LICABLE	
		ic Way		Traffic Cont				Traffic Control Inoperative/Missing		
		D-WAY, NOT DIVIDED) 		NO CONTROL		NO			
		ace Type		Road Curva				Road Grade LEVEL		
		NCRETE		STRAIGH	1					
	NO	k Bus or HazMat								
	'	Vehicle								
		License Plate Number		Plate Type	Plate Type		St	Country of Issuance		
		913PMA			JTOMOBII	LE	WI	UNITED STATES		
5	_	Vehicle Identification Nu		Make		Year	Model			
0	2	KL7CJLSB9FB161872			LET		2015	TRAX		
	Color Body Style GRY - GRAY UT - SPORT UT					TY VEHICI	F	Bus Use NOT A BU	S	
	ш	GRY - GRAY Initial Contact Point			amage	VLINGE				
⊨					- 3 -					
	VEHICL	Extent Of Damage			EAS					
_	VE.	DISABLING DAMAGE								
						- · ·			• • •	07/04/00/0
Visco	nsin N	Motor Vehicle Crash	Th	his report does not	include any	CJIS data.			Crash Date	07/01/2018

6TL092T5M3

18-06923

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		Towed Due To Dama		Vehicle Removed By								
		TOWED DUE TO	DISABLING DAMAGE	MIKES TOWING								
		What Driver Was Doi	ng	Vehicle Factors								
		GOING STRAIGH	Т									
		Driver Prior Action Ot	ther	NOT APPLICABLE								
		Driver Actions										
	ш FAILURE TO CONTROL, FAILED TO KEEP IN DESIGNATED LANE											
_	Ë											
LIND	VEHICL											
5	표											
	>											
		Driver Distractions	TD 4 OTED									
		UNKNOWN IF DIS	STRACTED									
_												
5	01											
		Owner Name		Owner Address								
		LINDSEY SUE BE	:I T7	713 S PRESTON AVE #1	15							
		(608) 377-9703		REEDSBURG, WI 53959								
		(000,011 0100		11=====================================	,							
	,	Sequence Of E	vents									
	1	Event										
	01	CROSS CENTERI	LINE									
	~	Event										
	02	DITCH										
		Event										
	03	CULVERT										
		Event										
	04	OVERTURN/ROLI	LOVER									
			plicy Holder									
╘		Policy Holder										
L N		Insurance Company		Individual								
ا ر		RURAL-MUTUAL-	-INS-CO-(ATTN:-CLAIMS-DEPT)	LINDSEY BELTZ								
		Individual										
		Driver		Citations Issued		Sex						
		VIJAY KISAN CHA	ANDELIA	2		MALE						
	٩L	(920) 322-5262				Race						
	ú	` ,		Date of Birth		ASIAN						
	INDIVIDUA					7.0.7.11						
5	\leq	Address 140 W SCHOOL S	ET #404	Driver License Number								
	Ĭ	SHARON, WI 5358		STATE: WISCONSIN COUNTRY: UNITED STATES								
	_	STIARON, WI 555	03 , 03	STATE. WISCONSIN COUNTRY. UNITED STATES								
		Farring manager	On Duty Crash	Safety Equipment								
		Equipment										
		Seat Position		SHOULDER & LAP BELT								
		1FRONT SEAT-L	LEFT SIDE (DRIVER/MOTORCY									
		Helmet Use	-	Helmet Compliance								
				,								
		Eye Protection		Tint Compliance								
		,		This Compilance								
	_		Injury Severity	Airbag								
5	90	Injury	NO APPARENT INJURY	DEPLOYED-COMBINATION								
		Ejected	NO ALLANERT MOON!	Ejection Path Trapped/Extricated								
		NOT EJECTED		NOT EJECTED/NOT APPL	ICARI	NOT TRAPPED						
		HOT ESECTED		NOT ESECTED/NOT APPL	IOABL	NOT INALLED						

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		Medical Transport			EMS Agency Ident	ifier	EMS Run #					
		NOT TRANSPOR	TED									
		Hospital			Date of Death		Time of Death					
	ļ		Striking Unit #	Prior Action		Location		To/From School				
		Non Motorist										
		Action										
		71011011										
	_											
	INDIVIDUAL											
⊢	J											
LINO	1											
\supset)											
	Ĭ											
		Action Other										
		Action Other										
			I Commented Alexhell	1	I Owen a start Down III							
	Г	Drug & Alcohol	Suspected Alcohol L	Jse	Suspected Drug U NO	se						
		a Alconor	123		_							
		Alcohol Test Given			Alcohol Test Type		Alcohol Test Results					
		TEST GIVEN			OTHER		00					
		Drug Test Given			Drug Test Type		Drug Test Results					
		TEST NOT GIVEN	I									
	1	Drug Type										
6	001	Drug Type										
_	0											
		Individual Condition										
		marviadar Condition										
		APPEARED NOR	MAL									
		Individual										
		Passenger Citations Issued Sex										
		LINDSEY SUE BE	:I T7									
	ļ	(608) 377-9703	LIZ		0 FEMALE							
	U	(000) 311-3103			Date of Birth Race							
⊨	INDIVIDUAL						WHITE					
LINO	≥	Address			Driver License Nur	<u>n</u> ber	•					
_	₽	713 S PRESTON			STATE: WISCONSIN COUNTRY: UNITED STATES							
	=	REEDSBURG, WI	53959 , US									
			On Duty Crash		Cofety Familian and							
		Equipment	On Duty Clash		Safety Equipment							
		Seat Position			SHOULDER & LAP BELT							
		3FRONT SEAT-I	RIGHT SIDE (TRAI	N ENGINEER								
		Helmet Use			Helmet Complianc	е						
		Eye Protection			Tint Compliance							
		,			The Compilation							
	~		Injury Severity		Airbag							
6	005	Injury	SUSPECTED MIN	IOD IN HIDV	=							
	_		303FECTED WIII	NOK INJUK I	DEPLOYED-COMBINATION							
		Ejected			Ejection Path Trapped/Extricated							
		NOT EJECTED Medical Transport				NOT APPLICABL	NOT TRAPPED					
					EMS Agency Identifier EMS Run #							
		EMS GROUND			6001024							
		Hospital			Date of Death		Time of Death					
	REEDSBURG AREA MED CTR				Time of Death							
						To/From School						
			Striking Unit #	Drior Action		Location		To/From School				
		Non Motorist	Striking Unit #	Prior Action		Location		To/From School				

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LINI	INDIVIDUAL	Action								
	E	Action Other Prug & Alcoho Alcohol Test Given TEST NOT GIVE		ihol Use	Suspected NO Alcohol Tes		Alcohol Test Results			
10	002	Drug Test Given TEST NOT GIVE Drug Type	EN		Drug Test T	ype	Drug Test Results			
		Individual Condition APPEARED NORMAL Violations								
	01	UTC Number AD978203	Issue To?	Statute Number 346.05(1)	Seq Num					
	02	UTC Number AD978204	Issue To?	Statute Number 346.57(2)	Seq Num 007 Description FAILURE TO KEEP VEHICLE UNDER CONTROL					
	Pro	perty Owner	'		•					
PROP OWNER 01		ernment JK COUNTY HW` 3) 356-3855	/ DEPT		Address 620 STH 13 PO BOX 26 BARABOO					
	Fixe	ed Objects St	ruck							
	5		Struck Object DITCH				Structure Number	Damage Tag Number 0000		
	Striking Unit Struck Object CULVERT						Structure Number	Damage Tag Number 0000		
	Pro	perty Owner								
PROP 02	Individual DONALD F GABELT				Address E7763 STH REEDSBUF	23-33 RG, WI 53959 , US				
	Fixe	d Objects St								
Striking Unit OTHER POST, POLE OR SUPPORT Structure Number Damage Tag Numb 0000							Damage Tag Number 0000			