6TL097RB1Z 18-08518

Wisconsin Motor Vehicle Crash Report

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

ſ	Document Number Override	Primary Cr	ash Document#	Agency Crash Number 18-08518				Investigating Officer/Deputy DEPUTY J. EYTALIS					
]	Crash Date Crash Time								DEPUTY J. EYTALIS Time Arrived				
17	Crash Date 08/04/2018				Date A 08/04/			11:46 PM					
RB1	Date Notified	Time Notifi	ed	Total Units					Total Injured	Total	l Killed		
abla	08/04/2018 11:41 PM ☐On Emergency ☐ Hit and Run ☐ Lane C			01					00	00	ta:		
60-				Closu			ne	Trailer or Towed Reporting Threshold					
<u> 19</u>	Government Property		NO NO	Bus .	Related		Tags						
	∨ Reportable	(ASH))				Amended				Secondary Crash		
Į	_ocation							-2571. 12.25			************		
	ON USH12 WB	Latitu			Longitude		n/LongSource	HEHM	Access	Control			
	131 FT N OF LINN ST/ STH33 WB		751276		-89.76876		PS						
	IN THE VILLAGE OF WEST E		ordinate	. 1	Y Coordina		n Roadway Link ID	ŧ.		idway Lii	nk Offset		
	IN SAUK COUNTY			2760	064.468	57	4817303. Tribal Land	1005	319741		131		
İ								d E			Structure Type NO STRUCTURE		JRE
Č	Crash Scene			,							-		e e jedenika i
	First Harmful Event						nt Location	127					
	WORK ZONE/MAINTENANC	EQUIPM	ENT		ULDE		GHT_		s. Ser				
	Manner of Collision	Light Condition											
ļ	NO COLLISION W/VEHICLE	DARK/LIGHTED											
	Road Surface Condition(s)			Environment Factor(s)									
	DRY			NONE									
Ì	Roadway Factor(s)	Weather Condition(s)											
	NONE			CLEAR									
	Animal Type				Relation To Trafficway TRAFFICWAY - ON ROAD								
ŀ	Crash Classification - Location			77.7	Crash Classification - Jurisdiction								
	PUBLIC PROPERTY	NO SPECIAL JURISDIC											
	Tribal Land	4	ess Control CONTROL			Spec	Special Study						
-	Within Interchange Area Ju	nction Location		Intersection Type				10					
		TERSECTI			FOUR-WAY INTERSECTION								
	Closure Type	.=	The state of the s		Reaso								-
	LANE CLOSURE		Reasons for Closure LAW ENFORCEMENT, TOW TRUCK										
ŀ	Date Initial Lane/Road Closed	d											
l	08/04/2018					•							
Ì	DateAil Lanes Open		Date S	cene	Cleared	Time Scene Cleared							
	08/05/2018 12:03 AM					2018	8	12:03 AM					
ľ	Work Zone Crash Location	Work Zone Crash Type											
						LANE CLOSURE							
	Workers Present NO	Law Enforcement Present NO tory Speed Limit				Normal Posted Speed Limit							
İ	Work Zone Speed Limit												
	25	Y				25							
i	Unit Summary	to the state of											1.118.19
ſ	Unit Status		Vehicle Operation	g As C	lassifica	tion		Unit Type					
	IN TRANSIT		D CLASS					AUTOMOBILE					
_	Vehicle Type						-	Operating	As Endorsements	•		•	
5	PASSENGER CAR												

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	Total Occs Train/Bus # Injured 1			Total # Citations I	Total Trailers 0		Total HazMat Types 0							
UNIT	Insurance? Direction Of Travel UNKNOWN NORTHBOUND			Pre Cras ✓ Mari	25			2	Total Lanes 2					
Ś	Most Harmful Event: Collision With WORK ZONE/MAINTENANCE EQUIP NO SPECI				Special Function NO SPECIAL I	ion Emerge				ency Motor Vehicle Use APPLICABLE				
	Traffic Way Traffic Control TWO-WAY, NOT DIVIDED NO CONTROL					Traffic Control Inc. NO					perative/Missing			
	Surface Type BLACKTOP (BITUMINOUS) Road Curvature STRAIGHT							Road Gr LEVEL				19 (1947–1944)	ia. Guya	
۶	Truck NO	k Bus or HazM	lat								g ⁴⁷ 54			
		Role DRIVER					Citations Issued	j	L		Driver Iress	Individual		
2	5	Last Name TAYLOR			First Name ANDREW					Middle Initial Suffix JUSTIN		Suffix		
		Street Address 702 12TH ST APT 4				Street Address 2			Ż	PO Box				
	7	City BARABOO				1			913		Country of Residence UNITED STATES			
L N N	NDIWIDUAL	DOB		Sex Mi	Rac W	е	Hair BLACK	Eyes HAZE	L	He 50	ight 6	Weight 170		Number 303-6808 EXT.
	Q	Driver's License Number			State License Jursid STATE			liction	UNITED STATES					
		License Type NON-CDL DRIVER'S LICENSE				License Status VALID LICE	NSE				DL Expire 2023	Year		
		Equipment On Duty Accident				Safety Equipment								
	1	Seat Position 1FRONT	1FRONT SEAT-LEFT SIDE (DRIVER/MOTORC				RESTRAINT USE UNKNOWN							
	Σ	Helmet Use			4		Helmet Compli						· · ·	
		Eye Protection	on		1		Tint Complianc	e						
		Property of the property of the	Injury Severity NO APPARENT INJURY				Airbag NON DEPLOYED							
FIND	INDIVIDUAL	Ejected NOT EJECTED				Ejection Path NOT EJECTED/NOT APPL			PLICA					
ີ້ລ	2	MedicalTransport NOT TRANSPORTED			EMS Agency Identifier			_	EMS Run #					
		Hospital			Date of Death				Time of Death					
		Non Motorist Striking Unit #				Location To/FromS			loon		·····			
	5	Prior Action	ga sarii	į			Action							
		A STORY OF THE PROPERTY OF		al , , , , , , , , , , , , , , , , , , ,			Action Other					<u></u>		
		Drug &	Alcoh	Individual C	ONDING	ITLUENCE OF N	MEDICATIONS	/DRUGS	/ A	ГСОНО	L			

Suspected Alcohol Use

Suspected Drug Use

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	ď	YES					NO						
UNIT	NDIVIDUAL	Alcohol Test Given Alcohol Test Type TEST GIVEN PRELIMINARY BI				EATH T	Alcohol Test F	4					
ر	2	Drug Test Given TEST NOT GIVEN	уре	Drug Test Results									
		Drug Type											
									÷				
		License Plate Number				Plate Type	TOMOBILE	St Wi	4	Country of Issuance UNITED STATES			
		770YTW Vehicle Identification N	1	A01 - A0	TOMOBILE	Year	Make						
		1MEFM58U61G614139				Dadi Chia		2001	MERO	1993			
		Model SABLE	Body Style SW - ST/	TIONWAGO	N W	Color WHI							
		Initial Contact Point	-	Vehicle Damage									
		1RIGHT FRONT CORNER Extent Of Damage				1RIGHT FRONT CORNER, 12FRONT							
5	5	DISABLING DAMA											
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE				Vehicle Factors							
		Vehicle Removed By				NOT APPLICABLE							
		MIKES TOWING What Driver Was Doing				Driver Prio	r Action Other	74 5 ⁷	Bus Use NOT A BUS				
		GOING STRAIGHT	Driver Dist	ractions		NOT	A BUS						
		Driver Actions FAILURE TO CONT	DISTRACTION/INATTENTION										
UNIT	ZETICE VEHICL			1. (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)									
)	ġ			4									
		Vehicle Owner	Same As Op	375			V Use O	perator Addre	ss				
		Organization Type INDIVIDUAL	<u>^.</u>	Com	pany Name	!							
		Last Name GENIS	Name HAEL			Middle B	Suffix	Date of Birth					
		Street Address 702 12TH ST APT 4	t Address2			PO Box							
		City	Zip Cox 53913				Country of Residence UNITED STATES						
		BARABOO Telephone Number	, ORITED STATES										
		Typical (c)	h <u>.</u>										
	δ	Event WORK ZONE/MAINTENANCE EQUIPMENT											
	02	CURB											
	03	Event											
	8	Event											
2	Б	UTC Number Al387798	Issue To? 001	Statute No 346.63(1	ımber)(a)	Seq Nu 002	m Description OPERA	n FING WHILE U	JNDER T	HE INFLUENCE			
		UTC Number	Issue To?	Statute Nu	ımber	Seq Nu	m Description	n					

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								(608) 356-4895
1	S AI387797	001	346.57(2)	007	FAILURE TO KEEP \	VEHICLE U	NDER CONTI	ROL
5	Property Owner Organization/Company TRAFFIC CONTROL (630) 293-0026	AND PROTEC	TiON	Address 225 MILES BARTLET,	PKWY IL 60103 , US			
0.00	Striking Unit 01	Struck Object	MAINTENANCE EQUI	PMENT		Structi	ire Number	Damage Tag Number 337739
ľ	Description 							
	Diagram						Reconstruction Photos By	Ву
		_	W PINE ST				Additional Info	rmation
	NOT TO S	HWY :	136 HWY 136	LINN AV	/E/ STH 33			
	RABBIT, WHICH WAS DISABLING DAMAGE. INVESTIGATION.	IN THE PASSENCE	SER SEAT CAUSED HIM	TO LOSE CO	GOTIATING THE CORNER NTROL OF THE VEHICLE REPORTED. SEE NARRA	STRIKING T	HE CURB AND	A SIGN CAUSING
	Signature I, a sworn law e	nforcement offi	cer, agree that I have	not added	any CJIS data in this	report.		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
į.	aw Enforcemer			·				
_	Agency Space		<u> </u>			- 111		

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Officer Rank DEP	Officer Last Name EYTALIS	fficer First Name OSEPH	Of A	ficer Middle Name	Suffix					
DOT Officer ID 9154		DNR Officer I		Officer Badge Number 9154						
Officer EMail		1				A And And Vice Vice Vice Vice Vice Vice Vice Vice				
Local Agency Nun	nber Law	Enforcement Agen	cy Jurisdiction	Law Enforcement Agency type COUNTY SHERIFF						
Law Enforcement SAUK COUNTY	Agency Name / SHERIFFS DEPART	MEN	I	TAS Agency Name SAUK COUNTY SHERIFF						
Į.	Law Enforcement Agency Street Address 1300 LANGE COURT				Law Enforcement Agency Street Address2					
Law Enforcement Agency City BARABOO LEA State WI				Law Enforcement Agency Zip Code 53913						
Law Enforcement Agency Phone Number ORI Number (608) 356-4895 EXT. WI0570000				BFUNC Agency 5600		Agency Number				

