

6TL0BSNQ6Z
18-08827


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 18-08827	Investigating Officer/Deputy DEPUTY M. BURCH	
Crash Date 08/12/2018		Crash Time 10:40 AM	Date Arrived 08/12/2018	Time Arrived 10:47 AM	
Date Notified 08/12/2018		Time Notified 10:41 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

<p>Diagram</p> <p style="text-align: center;">US HWY 12</p> <p style="text-align: center;"> not too scale</p>	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.

UNIT #1 WAS WESTBOUND ON US HWY 12 WHEN THE OPERATOR STATED HE ATTEMPTED TO MISS AN OBJECT IN THE ROAD AND ENTERED THE EAST DITCH OF US HWY 12. UNIT #1 ROLLED OVER AND CAME TO REST ON ITS WHEELS. UNIT # 1 WAS REMOVED BY BILL'S TOWING.

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Location

ON USH12 WB 0.50 MI S OF SHADY LANE RD IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude 43.539755302	Longitude -89.786987297
	X Coordinate 274831.125	Y Coordinate 4824530.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event DITCH	First Harmful Event Location SHOULDER RIGHT	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLEAR		
Animal Type	Relation To Trafficway TRAFFICWAY - 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 1	Train/Bus # Injured	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 65	Total Lanes 4
	Most Harmful Event: Collision With DITCH	Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER	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 01	Vehicle			
	License Plate Number 991XRS	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number KNDUP132356704827	Make KIA MOTORS CORPORA	Year 2005	Model SEDONA
	Color GLD - GOLD	Body Style VN - VAN		Bus Use NOT A BUS
	Initial Contact Point 12--FRONT	Vehicle Damage		
	Extent Of Damage DISABLING DAMAGE	ALL AREAS		

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UNIT	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By BILLS TOWING		
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions FAILURE TO CONTROL				
01	01	Driver Distractions NOT DISTRACTED			
		Owner Name MICHELLE M KEMPER (608) 576-6924		Owner Address 210 1ST ST PRAIRIE DU SAC, WI 53578 , US	
Sequence Of Events					
UNIT	01	Event DITCH			
		Event OVERTURN/ROLLOVER			
		Event			
		Event			
Policy Holder					
UNIT	Insurance Company GEICO-CASUALTY-CO		Individual MICHELLE KEMPER		
	Individual				
	Driver SHAKIRJAN AHMETOVICH KABULOV (620) 591-9245		Citations Issued 0		Sex MALE
	Address 210 1ST ST PRAIRIE DU SAC, WI 53578 , US		Date of Birth [REDACTED]		
UNIT	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		Race WHITE		
	Equipment		Safety Equipment		
	On Duty Crash		SHOULDER & LAP BELT		
	Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		Helmet Compliance		
Helmet Use		Tint Compliance			
Eye Protection		Airbag NON DEPLOYED			
01	001	Injury		Injury Severity NO APPARENT INJURY	
		Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABL	
Trapped/Extricated NOT TRAPPED					

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UNIT 01 001	Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #		
	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					