

6TL09T1TMG  
18-11713

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

6TL09T1TMG

Document Number Override		Primary Crash Document #		Agency Crash Number <b>18-11713</b>		Investigating Officer/Deputy <b>DEPUTY J. BODDEN</b>	
Crash Date <b>10/21/2018</b>		Crash Time <b>06:09 PM</b>		Date Arrived <b>10/21/2018</b>		Time Arrived <b>06:17 PM</b>	
Date Notified <b>10/21/2018</b>		Time Notified <b>06:12 PM</b>		Total Units <b>01</b>		Total Injured <b>01</b>	Total Killed <b>00</b>
<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 <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

<p>Diagram</p> <p>not to scale</p>	Reconstruction By
	Photos By
	Additional Information <b>NONE</b>

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

UNIT 1 WAS TRAVELING EAST ON CTH T. UNIT 1'S DRIVER STATED HE REACHED DOWN TO PICK UP A CELL PHONE. DRIVER STATED HE THEN SWERVED TO MISS A COUPLE DEER IN THE ROADWAY. DRIVER LOST CONTROL OF UNIT 1 AND WENT OFF THE ROADWAY ON THE NORTH SIDE. DRIVER ENTERED THE DITCH, SKIDDED SIDWAYS AND STRUCK SEVERAL SMALL TREES AND BRUSH. UNIT 1 STRUCK A FINAL TREE APPROXIMATELY 10 INCHES IN DIAMETER THAT STOPPED THE VEHICLE FROM GOING DOWN A STEEP EMBANKMENT. DRIVER WAS UNINJURED. PASSENGER HAD A POSSIBLE MINOR ANKLE INJURY BUT REFUSED MEDICAL TREATMENT. DRIVER RECEIVED MULTIPLE CITATIONS.

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Location

ON CTHT EB 0.40 MI W OF GILLEM RD IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude <b>43.565176872</b>	Longitude <b>-89.726848801</b>
	X Coordinate <b>279782.71875</b>	Y Coordinate <b>4827193</b>
	Structure Type	

Crash Scene

First Harmful Event <b>DITCH</b>	First Harmful Event Location <b>ROADSIDE</b>	
Manner of Collision <b>NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>DRY</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>		
Weather Condition(s) <b>CLEAR</b>		
Animal Type <b>DEER</b>	Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>	Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land	Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>

Unit Summary

<b>UNIT</b>	<b>01</b>	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>AUTOMOBILE</b>		
		Vehicle Type <b>PASSENGER CAR</b>			Operating As Endorsements	
	Total Occs <b>2</b>	Train/Bus # Injured	Total # Citations Issued <b>2</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>UNKNOWN</b>	Direction Of Travel <b>EASTBOUND</b>	<input checked="" type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>55</b>	Total Lanes <b>2</b>	
	Most Harmful Event: Collision With <b>TREE</b>		Special Function <b>NO SPECIAL FUNCTION</b>	Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>		
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>NO CONTROL</b>	Traffic Control Inoperative/Missing <b>NO</b>		
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>CURVE LEFT</b>	Road Grade <b>DOWNHILL</b>		
	Truck Bus or HazMat <b>NO</b>					

<b>UNIT</b>	<b>01</b>	<b>Vehicle</b>			
		License Plate Number <b>A3547PE</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>1N4BU31D3VC239022</b>	Make <b>NISSAN</b>	Year <b>1997</b>	Model <b>ALTIMA</b>
		Color <b>TAN - TAN</b>	Body Style <b>4D - 4DR</b>		Bus Use <b>NOT A BUS</b>
		Initial Contact Point <b>12--FRONT</b>	Vehicle Damage <b>3--RIGHT SIDE MIDDLE, 4--RIGHT SIDE REAR, 5--RIGHT REAR CORNER, 6--REAR, 9--LEFT SIDE MIDDLE, 10--LEFT SIDE FRONT, 11--LEFT FRONT CORNER</b>		
		Extent Of Damage <b>DISABLING DAMAGE</b>			

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UNIT	VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By		
		What Driver Was Doing <b>NEGOTIATING CURVE</b>		Vehicle Factors		
		Driver Prior Action Other		<b>NOT APPLICABLE</b>		
		Driver Actions <b>OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER</b>				
01	01	Driver Distractions <b>DISTRACTION/INATTENTION, USING OR REACHING FOR DEVICE/OBJECT BROUGHT INTO VEHICLE</b>				
		Owner Name <b>NAVJOT SINGH</b>		Owner Address <b>2965 RED FOX RUN # 102 PORTAGE, WI 53901 , US</b>		
		<b>Sequence Of Events</b>				
		01	Event <b>DITCH</b>			
02	Event <b>TREE</b>					
03	Event					
04	Event					
UNIT	INDIVIDUAL	<b>Individual</b>				
		Driver <b>COLTEN BRIAN WETZEL (608) 886-5847</b>		Citations Issued <b>2</b>	Sex <b>MALE</b>	
				Date of Birth [REDACTED]	Race <b>WHITE</b>	
		Address <b>811 DUNN ST PORTAGE, WI 53901 , US</b>		Driver License Number [REDACTED] <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
		<b>Equipment</b>		On Duty Crash		
				Safety Equipment		
		Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>		<b>SHOULDER &amp; LAP BELT</b>		
		Helmet Use		Helmet Compliance		
		Eye Protection		Tint Compliance		
		01	001	<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>
Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABL</b>		Trapped/Extricated <b>NOT TRAPPED</b>		
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier		EMS Run #		

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UNIT	INDIVIDUAL	Hospital	Date of Death	Time of Death		
		<b>Non Motorist</b>	Striking Unit #	Prior Action	Location	To/From School
		Action				
		Action Other				
		<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>		
		Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results		
		Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results		
		Drug Type				
		Individual Condition <b>APPEARED NORMAL</b>				
		UNIT	INDIVIDUAL	<b>Individual</b>		
Passenger <b>ALISA K SAUER (608) 635-6596</b>	Citations Issued <b>0</b>			Sex <b>FEMALE</b>		
	Date of Birth [REDACTED]			Race <b>WHITE</b>		
Address <b>W10306 STATE ROAD 16 PORTAGE, WI 53901 , US</b>	Driver License Number [REDACTED] <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>					
<b>Equipment</b>	On Duty Crash			Safety Equipment <b>SHOULDER &amp; LAP BELT</b>		
Seat Position <b>3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER</b>	Helmet Compliance					
Helmet Use	Tint Compliance					
Eye Protection	Airbag <b>NON DEPLOYED</b>					
<b>Injury</b>	Injury Severity <b>POSSIBLE INJURY</b>			Ejection Path <b>NOT EJECTED/NOT APPLICABL</b>		
Ejected <b>NOT EJECTED</b>	Trapped/Extricated <b>NOT TRAPPED</b>			Medical Transport <b>NOT TRANSPORTED</b>		
Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier	EMS Run #				
Hospital	Date of Death	Time of Death				
<b>Non Motorist</b>	Striking Unit #	Prior Action	Location	To/From School		

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UNIT	INDIVIDUAL	Action					
		Action Other					
	01	002	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>	
			Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type	Alcohol Test Results	
			Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type	Drug Test Results	
			Drug Type				
	Individual Condition <b>APPEARED NORMAL</b>						
	<b>Violations</b>						
	02	01	UTC Number	Issue To?	Statute Number	Seq Num	Description
			<b>AE756462</b>	<b>001</b>	<b>343.05(3)(a)</b>	<b>002</b>	<b>OPERATE W/O VALID LICENSE</b>
02	01	UTC Number	Issue To?	Statute Number	Seq Num	Description	
		<b>AE756463</b>	<b>001</b>	<b>346.89(1)</b>	<b>001</b>	<b>INATTENTIVE DRIVING</b>	