

WISCONSIN MOTOR VEHICLE
CRASH REPORT

6TL0BGSFBW

Document Number Override		Primary Crash Document #		Agency Crash Number 18-10820		Investigating Officer/Deputy DEPUTY B. LUBER		
Crash Date 09/29/2018		Crash Time 06:10 PM		Date Arrived 09/29/2018		Time Arrived 06:43 PM		
Date Notified 09/29/2018		Time Notified 06:33 PM		Total Units 01		Total Injured 00	Total Killed 00	
<input type="checkbox"/> On Emergency	<input checked="" 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>	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.

WISCONSIN STATE TROOPER MARQUARDT CALLED IN A SINGLE VEHICLE CRASH WITH NO DRIVER ON SCENE. I ARRIVED ON SCENE AND OBSERVED A WHITE MOTORCYCLE STANDING UP RIGHT WITH DAMAGE TO THE HANDLEBAR AREA AND POSSIBLE PAINT DAMAGE. I LATER INTERVIEWED OPERATOR OF THE MOTORCYCLE BY PHONE. THE OPERATOR OF UNIT 1 SAID HE WAS TURNING FROM BUCKHORN ROAD, AVOIDED STRIKING AN ANIMAL, AND LEFT THE ROADWAY. OPERATOR OF UNIT 1 DID NOT REPORT ANY INJURIES. VEHICLE WAS REMOVED FROM THE SCENE BY MIKES TOWING. REGISTERED OWNER OF THE VEHICLE WAS ALSO NOTIFIED OF LOCATION OF VEHICLE BY CELL PHONE. I NEED TO CONDUCT FURTHER FOLLOW UP TO CONTACT OPERATOR OF UNIT 1 IN PERSON.

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Location

INTERSECTION ON MIRROR LAKE RD AT BUCKHORN RD (1) IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude 43.535528576	Longitude -89.837261388
	X Coordinate 270753.125	Y Coordinate 4824198.5
	Structure Type	

Crash Scene

First Harmful Event DITCH	First Harmful Event Location OUTSIDE RIGHT-OF-WAY (TRAFFICWAY)	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAYLIGHT	
Road Surface Condition(s) UNKNOWN	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLOUDY		
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 INTERSECTION	Intersection Type T-INTERSECTION

Unit Summary

UNIT 01	Unit Status HIT AND RUN	Vehicle Operating As Classification M CLASS		Unit Type MOTORCYCLE	
	Vehicle Type MOTORCYCLE	Operating As Endorsements			
	Total Occs 1	Train/Bus # Injured	Total # Citations Issued 1	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel SOUTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 45	Total Lanes 2
	Most Harmful Event: Collision With DITCH		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 STRAIGHT		Road Grade LEVEL
	Truck Bus or HazMat NO				

UNIT 01	Vehicle			
	License Plate Number GE389	Plate Type CYC - CYCLE	St MI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1HD1KRM14FB618844	Make HARLEY DAVIDSON	Year 2015	Model SOFTTAIL
	Color WHI - WHITE	Body Style MC - MOTORCYCLE		Bus Use NOT A BUS
	Initial Contact Point 12--FRONT	Vehicle Damage		
Extent Of Damage FUNCTIONAL DAMAGE	12--FRONT, UNDERCARRIAGE			

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UNIT	VEHICLE	Towed Due To Damage TOWED BUT NOT DUE TO DISABLING DAMAG		Vehicle Removed By MIKES TOWING			
		What Driver Was Doing LEFT TURN		Vehicle Factors NOT APPLICABLE			
		Driver Prior Action Other					
		Driver Actions FAILURE TO CONTROL, RAN OFF ROADWAY, UNKNOWN					
01	01	Driver Distractions UNKNOWN IF DISTRACTED					
		Owner Name DENNIS EUGENE BINGAMAN (608) 415-2046		Owner Address 6839 CENTERLINE RD SARANAC, MI 48881 , US			
Sequence Of Events							
UNIT	INDIVIDUAL	01	Event MOTOR VEH IN TRANSPORT				
		02	Event RUN OFF ROADWAY RIGHT				
		03	Event DITCH				
		04	Event				
Policy Holder							
UNIT	INDIVIDUAL	Insurance Company GRANGE-MUTUAL-CASUALTY-CO		Individual DENNIS BINGAMAN			
		Driver DAVID A SPACH (608) 921-9317		Citations Issued 1	Sex MALE		
UNIT	INDIVIDUAL	Date of Birth [REDACTED]		Race WHITE			
		Address E10088 BUCKHORN RD REEDSBURG, WI 53959 , US		Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES			
01	001	Equipment		On Duty Crash			
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		Protective Gear UNKNOWN			
		Helmet Use UNKNOWN		Helmet Compliance UNKNOWN			
		Eye Protection UNKNOWN		Tint Compliance UNKNOWN			
		Injury		Injury Severity NO APPARENT INJURY		Airbag NOT APPLICABLE	
		Ejected NOT APPLICABLE		Ejection Path NOT EJECTED/NOT APPLICABL		Trapped/Extricated NOT APPLICABLE	

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UNIT	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	Suspected Drug Use		
	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 NOT OBSERVED					
01	Violations					
	UTC Number AE139775	Issue To? 001	Statute Number 343.05(3)(b)	Seq Num 001	Description OPERATE MOTORCYCLE W/O VALID LICENSE	