

6TL0BC3B2G
18-12825

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

Location

ON CTHPF SB 177 FT W OF ORCHARD RD IN THE TOWN OF FREEDOM IN SAUK COUNTY	Latitude 43.391257908	Longitude -89.920111272
	X Coordinate 263496.40625	Y Coordinate 4808407
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event DITCH	First Harmful Event Location ON ROADWAY	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DARK/UNLIT	
Road Surface Condition(s) SNOW, ICE	Roadway Factor(s) NONE	
Environment Factor(s) WEATHER CONDITIONS		
Weather Condition(s) SNOW		
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 TRUCK		
	Vehicle Type UTILITY TRUCK/PICKUP TRUCK		Operating As Endorsements		
	Total Occs 2	Train/Bus # Injured	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel SOUTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	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 CURVE RIGHT	Road Grade DOWNHILL	
	Truck Bus or HazMat NO				

UNIT 01	Vehicle			
	License Plate Number 176396	Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1GCEK19B06Z165786	Make CHEVROLET	Year 2006	Model SILVERADO
	Color GRN - GREEN	Body Style PK - PICKUP		Bus Use NOT A BUS
	Initial Contact Point 9--LEFT SIDE MIDDLE	Vehicle Damage		
	Extent Of Damage NO DAMAGE	NO DAMAGE		

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UNIT	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR				
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors				
	Driver Prior Action Other		NOT APPLICABLE				
	Driver Actions SPEED TOO FAST/COND						
01	01	Driver Distractions NOT DISTRACTED					
		Owner Name KENNETH CLARENCE LANE (608) 415-0982		Owner Address E8741 N REEDSBURG RD REEDSBURG, WI 53959 , US			
Sequence Of Events							
UNIT	01	Event RUN OFF ROADWAY RIGHT					
		Event DITCH					
		Event					
		Event					
Policy Holder							
UNIT	INDIVIDUAL	Insurance Company AMERICAN-FAMILY-INS-CO		Individual KENNETH LANE			
		Driver KENNETH CLARENCE LANE (608) 415-0982		Citations Issued 0			
		Date of Birth [REDACTED]		Sex MALE			
		Race WHITE		Address E8741 N REEDSBURG 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		Safety Equipment SHOULDER & LAP BELT			
		Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
		Injury		Injury Severity NO APPARENT INJURY		Airbag NON DEPLOYED	
		Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABL		Trapped/Extricated NOT TRAPPED	

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UNIT	INDIVIDUAL	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					
UNIT	INDIVIDUAL	Individual					
		Passenger JACOB B LANE (608) 415-0081		Citations Issued 0	Sex MALE		
				Date of Birth [REDACTED]	Race WHITE		
		Address 1723 N RED OAK DR STOUGHTON, WI 53589 , US		Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES			
		Equipment		On Duty Crash	Safety Equipment		
		Seat Position 3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER		SHOULDER & LAP BELT			
		Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
		Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED		
		Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABL	Trapped/Extricated NOT TRAPPED		
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		

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UNIT	INDIVIDUAL	Action			
		Action Other			
	01	002	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		

Property Owner

PROP OWNER	01	Government TOWNSHIP OF FREEDOM (608) 524-6400	Address S4977 CTH D ROCK SPRINGS, WI 53961 , US
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Fixed Objects Struck

PROP OWNER	01	Striking Unit 01	Struck Object DITCH	Structure Number	Damage Tag Number N/A
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