

6TL0BC3B2H
18-12828

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 18-12828		Investigating Officer/Deputy DEPUTY W. VERTEIN	
Crash Date 11/17/2018		Crash Time 06:38 AM		Date Arrived 11/17/2018		Time Arrived 06:54 AM	
Date Notified 11/17/2018		Time Notified 06:46 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 checked="" 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.

ON THE DESCRIBED DATE, TIME, AND LOCATION, UNIT 1 WAS TRAVELING NORTHBOUND. AS THE OPERATOR WAS ATTEMPTING TO NEGOTIATE A CURVE, HE LOST CONTROL OF UNIT 1 DUE TO SPEED AND SLIPPERY ROAD CONDITIONS. UNIT 1 ENTERED THE DITCH LINE WHERE IT STRUCK A SMALL TREE AND A FENCE POST. NO REPORTED INJURIES.

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Location

ON DENZER RD 0.45 MI N OF WEINKE RD IN THE TOWN OF FREEDOM IN SAUK COUNTY	Latitude 43.402149961	Longitude -89.891415626
	X Coordinate 265862.59375	Y Coordinate 4809535.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event DITCH	First Harmful Event Location ROADSIDE	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAWN	
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 AUTOMOBILE		
	Vehicle Type (SPORT) UTILITY VEHICLE			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 NORTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 45	Total Lanes 2	
	Most Harmful Event: Collision With TREE		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 LEFT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

UNIT 01 VEHICLE	Vehicle				
	License Plate Number ABL4665		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number KNMAT2MV6HP588406		Make NISSAN	Year 2017	Model ROGUE
	Color SIL - SILVER (ALUMINUM)		Body Style UT - SPORT UTILITY VEHICLE		Bus Use NOT A BUS
	Initial Contact Point 12--FRONT		Vehicle Damage		
Extent Of Damage DISABLING DAMAGE		5--RIGHT REAR CORNER, 11--LEFT FRONT CORNER, 12--FRONT			

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UNIT	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By EVERETTS TOWING	
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions SPEED TOO FAST/COND, FAILURE TO CONTROL, RAN OFF ROADWAY			
01	01	Driver Distractions NOT DISTRACTED		
		Owner Name KENT MITCHELL RING (414) 595-8467	Owner Address 9226 WATERSIDE ST # 203 MIDDLETON, WI 53562 , US	
Sequence Of Events				
UNIT	01	Event RUN OFF ROADWAY RIGHT		
		Event DITCH		
		Event TREE		
		Event OTHER POST, POLE OR SUPPORT		
Policy Holder				
UNIT	01	Insurance Company GEICO-ADVANTAGE-INSURANCE-CO	Individual KENT RING	
		Individual		
UNIT	01	Driver KENT MITCHELL RING (414) 595-8467	Citations Issued 0	Sex MALE
		Address 9226 WATERSIDE ST # 203 MIDDLETON, WI 53562 , US	Date of Birth [REDACTED]	Race WHITE
01	001	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
		Equipment	On Duty Crash	Safety Equipment SHOULDER & LAP BELT
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY	Helmet Compliance	
		Helmet Use	Tint Compliance	
		Eye Protection		
		Injury	Injury Severity NO APPARENT INJURY	Airbag DEPLOYED-SIDE
		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 MEGAN LYNNE HARMAN (608) 712-4078		Citations Issued 0	Sex FEMALE		
				Date of Birth [REDACTED]	Race WHITE		
		Address 9226 WATERSIDE ST MIDDLETON, WI 53562 , 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 DEPLOYED-SIDE		
		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		

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

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

Property Owner

PROP OWNER	02	Individual JEFFERY M SCHLENDER (608) 963-4965	Address S6694 ROCK DR NORTH FREEDOM, WI 53951 , US
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Fixed Objects Struck

03	Striking Unit 01	Struck Object OTHER POST, POLE OR SUPPORT	Structure Number	Damage Tag Number N/A
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