

6TL09PBQ9W
18-13114

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

6TL09PBQ9W

| | | | | | | | |
|--|--------------------------------------|--|------------------------------------|---|--|---|--------------|
| Document Number Override | | Primary Crash Document # | | Agency Crash Number 18-13114 | | Investigating Officer/Deputy DEPUTY B. STODDARD | |
| Crash Date 11/25/2018 | | Crash Time 12:05 AM | | Date Arrived 11/25/2018 | | Time Arrived 06:29 AM | |
| Date Notified 11/25/2018 | | Time Notified 06:04 AM | | Total Units 01 | | Total Injured | Total Killed |
| <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 type="checkbox"/> Reportable | | Crash Type DT4000 (STANDARD CRASH) | | <input type="checkbox"/> Amended | | <input type="checkbox"/> Secondary Crash | |

Description

| | |
|------------------------------------|---------------------------------------|
| <p>Diagram</p> <p>NOT TO 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 TRAVELED OFF THE ROAD AND WAS DRIVING THROUGH AN ALFALFA FIELD. UNIT 1 DROVE INTO A DRAINAGE DITCH. UNIT 1 GOT STUCK FACING INTO THE STEEP DRAINAGE. UNIT 1 REQUIRED A PULL-OUT TO GET OUT OF THE DRAINAGE DITCH.

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Location

| | | |
|--|------------------------------------|----------------------------------|
| PRIVATE PROPERTY CTHPF WB IN THE TOWN OF HONEY CREEK IN SAUK COUNTY | Latitude 43.309892179 | Longitude -89.89396481 |
| | X Coordinate 265300.5625 | Y Coordinate 4799296.5 |
| | 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 DARK/UNLIT | |
| Road Surface Condition(s) DRY | Roadway Factor(s) NONE | |
| Environment Factor(s) NONE | | |
| Weather Condition(s) CLEAR | | |
| Animal Type | Relation To Trafficway TRAFFICWAY - NOT ON ROAD | |
| Crash Classification - Location PRIVATE PROPERTY | Crash Classification - Jurisdiction PRIVATE PROPERTY | |
| Tribal Land | Access Control NO CONTROL | Special Study |
| Within Interchange Area NO | Junction Location NON-JUNCTION | Intersection Type NOT AN INTERSECTION |

Unit Summary

| | | | | | |
|------------|---|---|--|--|--------------------|
| 01 UNIT | Unit Status IN TRANSIT | Vehicle Operating As Classification D CLASS | Unit Type TRUCK | | |
| | Vehicle Type UTILITY TRUCK/PICKUP TRUCK | | Operating As Endorsements | | |
| | Total Occs 1 | Train/Bus # Injured | Total # Citations Issued 1 | Total Trailers 0 | Total HazMat Types |
| | Insurance? YES | Direction Of Travel WESTBOUND | <input type="checkbox"/> Pre Crash Tire Mark | Speed Limit N/A | Total Lanes |
| | Most Harmful Event: Collision With DITCH | | Special Function NO SPECIAL FUNCTION | Emergency Motor Vehicle Use NOT APPLICABLE | |
| | Traffic Way PARKING LOT OR PRIVATE PROPERTY | | Traffic Control NO CONTROL | Traffic Control Inoperative/Missing NO | |
| | Surface Type DIRT | | Road Curvature STRAIGHT | Road Grade LEVEL | |
| | Truck Bus or HazMat NO | | | | |

| | | | | |
|-----------------------|---|--|---------------------|---|
| 01 UNIT VEHICLE | Vehicle | | | |
| | License Plate Number PK7208 | Plate Type LTK - LIGHT TRUCK | St WI | Country of Issuance UNITED STATES |
| | Vehicle Identification Number 3D7KU28673G735663 | Make DODGE | Year 2003 | Model NO DATA FO |
| | Color TAN - TAN | Body Style PK - PICKUP | | Bus Use NOT A BUS |
| | Initial Contact Point 12--FRONT | Vehicle Damage | | |
| | Extent Of Damage MINOR DAMAGE | | | |

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| | | | | | |
|---------------------------|--|---|---|---|--|
| UNIT | Towed Due To Damage NOT TOWED | | Vehicle Removed By EVERETTS TOWING | | |
| | What Driver Was Doing GOING STRAIGHT | | Vehicle Factors | | |
| | Driver Prior Action Other | | NOT APPLICABLE | | |
| | Driver Actions RAN OFF ROADWAY | | | | |
| 01 | 01 | Driver Distractions UNKNOWN IF DISTRACTED | | | |
| | | Owner Name AARON VINCENT HANKINS (608) 370-4257 | Owner Address 424 CEDAR ST SAUK CITY, WI 53583 , US | | |
| Sequence Of Events | | | | | |
| UNIT | 01 | Event DITCH | | | |
| | | Event | | | |
| | | Event | | | |
| | | Event | | | |
| UNIT | 04 | Policy Holder | | | |
| | | Insurance Company GEICO-ADVANTAGE-INSURANCE-CO | Individual AARON HANKINS | | |
| UNIT | 01 | Individual | | | |
| | | Driver AARON VINCENT HANKINS (608) 370-4257 | Citations Issued 1 | Sex MALE | |
| | | Address 424 CEDAR ST SAUK CITY, WI 53583 , US | Date of Birth [REDACTED] | Race WHITE | |
| | | | Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES | | |
| 01 | 001 | Equipment | On Duty Crash | Safety Equipment | |
| | | Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY | | 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 | 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 YES | | 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 NOT OBSERVED | | | | | | |
| 01 | Violations | | | | | | |
| | 02 | UTC Number AD978903 | Issue To? 001 | Statute Number 346.70(2) | Seq Num 001 | Description FAILURE TO FILE ACCIDENT REPORT | |
| Property Owner | | | | | | | |
| PROP OWNER | 01 Individual TODD M STATZ (608) 370-2364 | | | Address E8495A COUNTY ROAD PF SAUK CITY, WI 53583 , US | | | |
| | Fixed Objects Struck | | | | | | |