

6TL092T5MM  
18-13248

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

6TL092T5MM

|   |                                      |  |  |  |  |
|---|--------------------------------------|--|--|--|--|
| Document Number Override                                |                                      | Primary Crash Document #                         | Agency Crash Number<br><b>18-13248</b> | Investigating Officer/Deputy<br><b>DEPUTY J. KIRKENG</b> |  |
| Crash Date<br><b>11/28/2018</b>                         |                                      | Crash Time<br><b>10:14 PM</b>                    | Date Arrived<br><b>11/28/2018</b>      | Time Arrived<br><b>10:38 PM</b>                          |  |
| Date Notified<br><b>11/28/2018</b>                      |                                      | Time Notified<br><b>10:18 PM</b>                 | Total Units<br><b>01</b>               | Total Injured<br><b>01</b>                               | Total Killed<br><b>00</b>                    |
| <input type="checkbox"/> On Emergency                   | <input type="checkbox"/> Hit and Run | <input checked="" 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<br><b>NO</b>        | Tags   |  |
| <input checked="" type="checkbox"/> Reportable          |                                      | Crash Type<br><b>DT4000 (STANDARD CRASH)</b>     |  | <input type="checkbox"/> Amended                         | <input type="checkbox"/> Secondary Crash     |

Description

|   |   |
|---|---|
| Diagram   | Reconstruction By                             |
|  | Photos By<br><b>KIRKENG</b>                   |
|   | Additional Information<br><b>NONE, PHOTOS</b> |

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

UNIT 1 WAS TRAVELING W/B ON HILLTOP RD. UNIT 1 WAS NEGOTIATION A CURVE TO TURN S/B ON HILLTOP. UNIT 1 LOST TRACTION AND SLID OFF THE ROADWAY ON THE WEST SIDE OF THE ROAD STRIKING A TREE. THE PASSENGER OF UNIT 1 WAS PINNED AND EXTRICATED.

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Location

|  |                                       |                                   |
|--|---------------------------------------|-----------------------------------|
| ON HILLTOP RD<br>0.43 MI E<br>OF DENZER RD<br>IN THE TOWN OF HONEY CREEK<br>IN SAUK COUNTY | Latitude<br><b>43.368379682</b>       | Longitude<br><b>-89.881188288</b> |
|  | X Coordinate<br><b>266561.15625</b>   | Y Coordinate<br><b>4805756</b>    |
|  | Structure Type<br><b>NO STRUCTURE</b> |                                   |

Crash Scene

|   |   |   |                                       |
|---|---|---|---------------------------------------|
| First Harmful Event<br><b>TREE</b>                                | First Harmful Event Location<br><b>ROADSIDE</b>                       |   |                                       |
| Manner of Collision<br><b>NO COLLISION W/VEHICLE IN TRANSPORT</b> | Light Condition<br><b>DARK/UNLIT</b>                                  |   |                                       |
| Road Surface Condition(s)<br><b>WET, SNOW</b>                     | Roadway Factor(s)<br><br><b>NONE</b>                                  |   |                                       |
| Environment Factor(s)<br><b>WEATHER CONDITIONS</b>                |   |   |                                       |
| Weather Condition(s)<br><b>CLOUDY, SNOW</b>                       |   |   |                                       |
| Animal Type   | Relation To Trafficway<br><b>TRAFFICWAY - ON ROAD</b>                 |   |                                       |
| Crash Classification - Location<br><b>PUBLIC PROPERTY</b>         | Crash Classification - Jurisdiction<br><b>NO SPECIAL JURISDICTION</b> |   |                                       |
| Tribal Land   | Access Control<br><b>NO CONTROL</b>                                   | Special Study                                   |                                       |
| Within Interchange Area<br><b>NO</b>                              | Junction Location<br><b>NON-JUNCTION</b>                              | Intersection Type<br><b>NOT AN INTERSECTION</b> |                                       |
| Closure Type<br><b>FULL CLOSURE</b>                               | Reasons for Closure<br><b>LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS</b>    |   |                                       |
| Date Initial Lane/Rd Closed<br><b>11/28/2018</b>                  | Time Initial Lane/Rd Closed<br><b>10:38 PM</b>                        |   |                                       |
| Date All Lanes Open<br><b>11/29/2018</b>                          | Time All Lanes Open<br><b>12:50 AM</b>                                | Date Scene Cleared<br><b>11/29/2018</b>         | Time Scene Cleared<br><b>12:50 AM</b> |

Unit Summary

|   |                              |   |   |  |  |                                |   |
|---|------------------------------|---|---|--|--|--------------------------------|---|
| <b>UNIT</b>   | <b>01</b>                    | Unit Status<br><b>IN TRANSIT</b>                  | Vehicle Operating As Classification<br><b>D CLASS</b> |  | Unit Type<br><b>AUTOMOBILE</b>                       |                                |   |
|   |                              | Vehicle Type<br><b>(SPORT) UTILITY VEHICLE</b>    | Operating As Endorsements                             |  |  |                                |   |
|   |                              | Total Occs<br><b>2</b>                            | Train/Bus # Injured                                   | Total # Citations Issued<br><b>0</b>                   | Total Trailers<br><b>0</b>                           | Total HazMat Types<br><b>0</b> |   |
|   |                              | Insurance?<br><b>YES</b>                          | Direction Of Travel<br><b>WESTBOUND</b>               | <input checked="" type="checkbox"/> Pre CrashTire Mark | Speed Limit<br><b>45</b>                             | Total Lanes<br><b>2</b>        |   |
|   |                              | Most Harmful Event: Collision With<br><b>TREE</b> | Special Function<br><b>NO SPECIAL FUNCTION</b>        |  | Emergency Motor Vehicle Use<br><b>NOT APPLICABLE</b> |                                |   |
|   |                              | Traffic Way<br><b>TWO-WAY, NOT DIVIDED</b>        | Traffic Control<br><b>NO CONTROL</b>                  |  | Traffic Control Inoperative/Missing<br><b>NO</b>     |                                |   |
|   |                              | Surface Type<br><b>CONCRETE</b>                   | Road Curvature<br><b>CURVE LEFT</b>                   |  | Road Grade<br><b>DOWNHILL</b>                        |                                |   |
|   |                              | Truck Bus or HazMat<br><b>NO</b>                  |   |  |  |                                |   |
|   |                              | <b>Vehicle</b>                                    |   |  |  |                                |   |
|   |                              | <b>01</b>   | <b>01</b>   | License Plate Number<br><b>ACW8470</b>                 | Plate Type<br><b>AUT - AUTOMOBILE</b>                | St<br><b>WI</b>                | Country of Issuance<br><b>UNITED STATES</b> |
| Vehicle Identification Number<br><b>4JGAB75E53A428426</b> | Make<br><b>MERCEDES BENZ</b> |   |   | Year<br><b>2003</b>                                    | Model<br><b>ML500</b>                                |                                |   |

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|------|---|---|---|--|
| UNIT | VEHICLE   | Color<br><b>TAN - TAN</b>                                   | Body Style<br><b>UT - SPORT UTILITY VEHICLE</b>   | Bus Use<br><b>NOT A BUS</b>                        |
|      |   | Initial Contact Point<br><b>2--RIGHT SIDE FRONT</b>         | Vehicle Damage<br><b>1--RIGHT FRONT CORNER, 2--RIGHT SIDE FRONT, 3--RIGHT SIDE MIDDLE, 4--RIGHT SIDE REAR</b> |  |
|      |   | Extent Of Damage<br><b>DISABLING DAMAGE</b>                 |   |  |
|      |   | Towed Due To Damage<br><b>TOWED DUE TO DISABLING DAMAGE</b> | Vehicle Removed By<br><b>EVERETTS TOWING</b>  |  |
|      |   | What Driver Was Doing<br><b>NEGOTIATING CURVE</b>           | Vehicle Factors<br><b>NOT APPLICABLE</b>  |  |
| UNIT | VEHICLE   | Driver Prior Action Other                                   |   |  |
|      |   | Driver Actions<br><b>NO CONTRIBUTING ACTION</b>             |   |  |
|      |   | Driver Distractions<br><b>NOT DISTRACTED</b>                |   |  |
| 01   | 01  | Owner Name<br><b>DEVON M AST<br/>(608) 477-8191</b>         | Owner Address<br><b>627 5TH AVE<br/>BARABOO, WI 53913 , US</b>  |  |
|      |   | <b>Sequence Of Events</b>                                   |   |  |
| UNIT | 01  | Event<br><b>DITCH</b>                                       |   |  |
|      |   | Event<br><b>TREE</b>  |   |  |
|      |   | Event   |   |  |
|      |   | Event   |   |  |
| 02   | 03  | <b>Policy Holder</b>  |   |  |
|      |   | Insurance Company<br><b>PROGRESSIVE-CASUALTY-INS-CO</b>     | Individual<br><b>DEVON AST</b>  |  |
| UNIT | INDIVIDUAL  | <b>Individual</b>   |   |  |
|      |   | Driver<br><b>DEVON M AST<br/>(608) 477-8191</b>             | Citations Issued<br><b>0</b>  | Sex<br><b>MALE</b>                                 |
|      |   |   | Date of Birth<br>[REDACTED]   | Race<br><b>WHITE</b>                               |
|      |   | Address<br><b>627 5TH AVE<br/>BARABOO, WI 53913 , US</b>    | Driver License Number<br>[REDACTED]<br><b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>                         |  |
|      |   | <b>Equipment</b>  | On Duty Crash   | Safety Equipment<br><b>SHOULDER &amp; LAP BELT</b> |
|      | Seat Position<br><b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b> |   |   |  |
|      | Helmet Use  | Helmet Compliance   |   |  |

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|--|------|---|--|---|--|--|---------------------------------|----------------|
| 01                                       | UNIT | INDIVIDUAL  | 001  |   | Eye Protection                                     | Tint Compliance                          |                                 |                |
|  |      |   | <b>Injury</b>  |   | Injury Severity<br><b>NO APPARENT INJURY</b>       | Airbag<br><b>DEPLOYED-COMBINATION</b>    |                                 |                |
|  |      |   | Ejected<br><b>NOT EJECTED</b>                                    |   | Ejection Path<br><b>NOT EJECTED/NOT APPLICABL</b>  | Trapped/Extricated<br><b>NOT TRAPPED</b> |                                 |                |
|  |      |   | Medical Transport<br><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 |
|  |      |   | Action   |   |  |  |                                 |                |
|  |      |   | Action Other   |   |  |  |                                 |                |
|  |      |   | <b>Drug &amp; Alcohol</b>  |   | Suspected Alcohol Use<br><b>NO</b>                 |  | Suspected Drug Use<br><b>NO</b> |                |
|  |      |   | Alcohol Test Given<br><b>TEST NOT GIVEN</b>                      |   | Alcohol Test Type                                  |  | Alcohol Test Results            |                |
| Drug Test Given<br><b>TEST NOT GIVEN</b> |      | Drug Test Type                                    |  | Drug Test Results                               |  |  |                                 |                |
| 01                                       | UNIT | INDIVIDUAL  | 001  |   | Drug Type  |  |                                 |                |
|  |      |   | Individual Condition<br><b>APPEARED NORMAL</b>                   |   |  |  |                                 |                |
|  |      |   | <b>Individual</b>  |   |  |  |                                 |                |
|  |      |   | Passenger<br><b>BRANDON DAVID AST<br/>(608) 477-2744</b>         |   | Citations Issued<br><b>0</b>                       |  | Sex<br><b>MALE</b>              |                |
|  |      |   | Address<br><b>815 SUMMIT ST<br/>BARABOO, WI 53913 , US</b>       |   | Date of Birth<br>[REDACTED]                        |  | Race<br><b>WHITE</b>            |                |
| Driver License Number<br>[REDACTED]      |      | STATE: WISCONSIN COUNTRY: UNITED STATES           |  |   |  |  |                                 |                |
| 01                                       | UNIT | INDIVIDUAL  | 002  |   | <b>Equipment</b>                                   |  |                                 |                |
|  |      |   | On Duty Crash  |   | Safety Equipment<br><b>SHOULDER &amp; LAP BELT</b> |  |                                 |                |
|  |      |   | Seat Position<br><b>3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER</b> |   | Helmet Compliance                                  |  |                                 |                |
|  |      |   | Helmet Use   |   | Tint Compliance                                    |  |                                 |                |
|  |      |   | Eye Protection   |   | Airbag<br><b>DEPLOYED-COMBINATION</b>              |  |                                 |                |
|  |      |   | <b>Injury</b>  |   | Injury Severity<br><b>SUSPECTED SERIOUS INJUR</b>  | Ejected<br><b>NOT EJECTED</b>            |                                 |                |
| Ejected<br><b>NOT EJECTED</b>            |      | Ejection Path<br><b>NOT EJECTED/NOT APPLICABL</b> |  | Trapped/Extricated<br><b>TRAPPED/EXTRICATED</b> |  |  |                                 |                |

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|---|--|--|---|--------------|---------------------------------|--|----------------|
| UNIT<br><br><br><br><br><br><br><br><br><br><br>INDIVIDUAL<br><br><br><br><br><br><br><br><br><br><br>01<br><br><br><br><br><br><br><br><br><br><br>002 | Medical Transport<br><b>EMS GROUND</b>             |  | EMS Agency Identifier<br><b>6000555</b> |              | EMS Run #<br><b>509</b>         |  |                |
|   | Hospital<br><b>UW HEALTH-AMERICAN CENTER</b>       |  | 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<br><b>NO</b>      |              | Suspected Drug Use<br><b>NO</b> |  |                |
|   | Alcohol Test Given<br><b>TEST NOT GIVEN</b>        |  | Alcohol Test Type                       |              | Alcohol Test Results            |  |                |
|   | Drug Test Given<br><b>TEST NOT GIVEN</b>           |  | Drug Test Type                          |              | Drug Test Results               |  |                |
|   | Drug Type  |  |   |              |                                 |  |                |
|   | Individual Condition<br><br><b>APPEARED NORMAL</b> |  |   |              |                                 |  |                |

**Property Owner**

|                     |  |  |  |  |
|---------------------|--|--|--|--|
| PROP<br>OWNER<br>01 | Government<br><b>TOWNSHIP OF HONEY CREEK</b><br>(608) 544-2012 |  | Address<br><b>E8721 CTH C</b><br><b>NORTH FREEDOM, WI 53951 , US</b> |  |
|---------------------|--|--|--|--|

**Fixed Objects Struck**

|    | Striking Unit | Struck Object | Structure Number | Damage Tag Number |
|----|---------------|---------------|------------------|-------------------|
| 01 | 01            | DITCH         |                  | 0000              |
| 02 | 01            | TREE          |                  | 0000              |