

6TL09JDKWH
18-13411

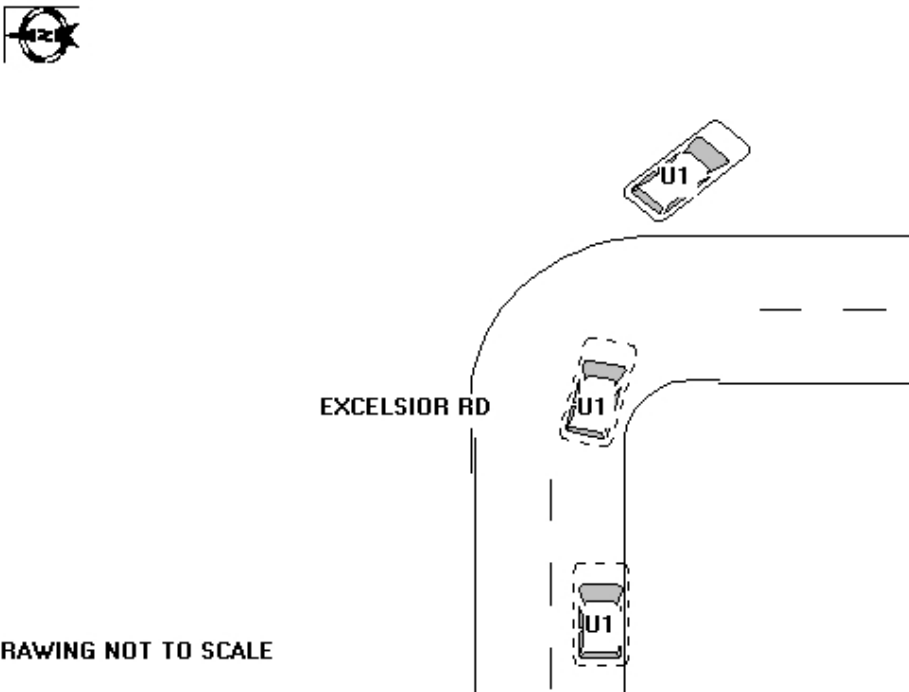
WISCONSIN MOTOR VEHICLE CRASH REPORT

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 18-13411	Investigating Officer/Deputy DEPUTY B. SCHLOUGH	
Crash Date 12/02/2018		Crash Time 07:52 AM	Date Arrived 12/02/2018	Time Arrived 07:54 AM	
Date Notified 12/02/2018		Time Notified 07:52 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 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

Diagram  <p>DRAWING 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 WAS TRAVELING E/B ON A SLIPPERY AND SNOW COVERED EXCELSIOR RD. OPERATOR OF UNIT 1 WAS NEGOTIATING A RIGHT CURVE AND LOST CONTROL CAUSING UNIT 1 TO GO INTO A CLOCKWISE SKID. UNIT 1 LEFT THE ROADWAY AND ENTERED THE W/B DITCH. UNIT 1 THEN IMPACTED A DITCH HEAD ON. UNIT 1 CAME TO REST IN THE W/B DTICH FACING S/E.

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Location

ON EXCELSIOR DR 0.82 MI N OF STH136 EB IN THE TOWN OF EXCELSIOR IN SAUK COUNTY	Latitude 43.48667417	Longitude -89.877581104
	X Coordinate 267307.40625	Y Coordinate 4818884.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event DITCH	First Harmful Event Location SHOULDER LEFT	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAYLIGHT	
Road Surface Condition(s) SNOW	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 PASSENGER CAR	Operating As Endorsements			
	Total Occs 3	Train/Bus # Injured	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel EASTBOUND	<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 CURVE RIGHT		Road Grade DOWNHILL	
	Truck Bus or HazMat NO					

UNIT	01	Vehicle			
		License Plate Number ACV9130	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 2T1BU4EE9CC856996	Make TOYOTA	Year 2012	Model COROLLA/S/
		Color BLK - BLACK	Body Style 4D - 4DR		Bus Use NOT A BUS
		Initial Contact Point 12--FRONT	Vehicle Damage		
		Extent Of Damage FUNCTIONAL DAMAGE	12--FRONT		

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UNIT	VEHICLE	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 CHARLES L ISENHART III (414) 975-9187		Owner Address 8737 S OAK PARK DR APT 1 OAK CREEK, WI 53154 , US		
Sequence Of Events						
UNIT	INDIVIDUAL	01	Event DITCH			
		02	Event			
		03	Event			
		04	Event			
Policy Holder						
UNIT	INDIVIDUAL	Insurance Company PROGRESSIVE-ADVANCED-INSURANCE-CO		Individual CHARLES ISENHART		
		Driver CHARLES L ISENHART III (414) 975-9187		Citations Issued 0	Sex MALE	
		Address 8737 S OAK PARK DR APT 1 OAK CREEK, WI 53154 , US		Date of Birth [REDACTED]	Race WHITE	
				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 MELONIE G HORNER (414) 339-3242		Citations Issued 0	Sex FEMALE		
				Date of Birth [REDACTED]	Race WHITE		
		Address 1507 S 10TH ST MILWAUKEE, WI 53204 , 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 01	INDIVIDUAL	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 01	INDIVIDUAL	Individual				
				Passenger MACKENZIE G ISENHART (414) 975-9187		Citations Issued 0	Sex FEMALE	
				Address 8737 S OAK PARK DR APT 1 OAK CREEK, WI 53154 , US		Date of Birth [REDACTED]	Race WHITE	
Driver License Number								
Equipment	On Duty Crash			Safety Equipment				
	Seat Position 6--SECOND SEAT-RIGHT SIDE			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	003	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		