

6TL0B7D6QT
19-01079

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 19-01079	Investigating Officer/Deputy DEPUTY A. SUKOWATEY	
Crash Date 01/27/2019		Crash Time 12:44 AM	Date Arrived 01/27/2019	Time Arrived 12:44 AM	
Date Notified 01/27/2019		Time Notified 12:44 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 type="checkbox"/> Reportable	Crash Type DT4000 (STANDARD CRASH)			<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram	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.

THE OPERATOR OF UNIT ONE WAS TRAVELING NORTH ON BRIAR BLUFF ROAD WHEN DUE TO ICY AND SNOWY ROAD CONDITIONS HE SLID OFF THE ROADWAY.

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Location

ON BRIAR BLUFF RD 158 FT N OF N REEDSBURG RD IN THE TOWN OF EXCELSIOR IN SAUK COUNTY	Latitude 43.540484882	Longitude -89.936872265
	X Coordinate 262723.78125	Y Coordinate 4825028.5
	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) SNOW, ICE	Roadway Factor(s) NONE	
Environment Factor(s) WEATHER CONDITIONS		
Weather Condition(s) SNOW		
Animal Type	Relation To Trafficway TRAFFICWAY - NOT 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	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR	Operating As Endorsements			
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types
	Insurance? YES	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre CrashTire 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 STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO				

UNIT	VEHICLE	Vehicle			
		License Plate Number CGS8189	Plate Type AUT - AUTOMOBILE	St GA	Country of Issuance UNITED STATES
		Vehicle Identification Number SHHFK7H65HU226178	Make HONDA	Year 2017	Model CIVIC EX
		Color SIL - SILVER (ALUMINUM)	Body Style 4D - 4DR		Bus Use NOT A BUS
		Initial Contact Point 12--FRONT	Vehicle Damage		
		Extent Of Damage MINOR DAMAGE	12--FRONT		

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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions SPEED TOO FAST/COND			
01 01	Owner Name CHRISTOPHER NOLAN ECHOLS JR (404) 402-5625		Owner Address 4513 ALLEN HOLLOW PLACE SUWANEE, GA 30024 , US	
	Sequence Of Events			
01 02 03 04	Event DITCH			
	Event			
	Event			
	Event			
UNIT	Policy Holder			
	Insurance Company AMICA-MUTUAL-INS-CO		Individual CHRISTOPHER ECHOLS	
UNIT INDIVIDUAL	Individual			
	Driver CHRISTOPHER NOLAN ECHOLS JR (404) 402-5625		Citations Issued 0	Sex MALE
	Address 4513 ALLEN HOLLOW PLACE SUWANEE, GA 30024 , US		Date of Birth	Race WHITE
			Driver License Number STATE: GEORGIA COUNTRY: UNITED STATES	
01 001	Safety 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 APPLICABLE	Trapped/Extricated NOT TRAPPED
Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #	
Hospital		Date of Death	Time of Death	
Distracted By		Distracted By Source		
Distracted By Action NOT DISTRACTED				

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UNIT	Non Motorist	Striking Unit #		Location			
		Prior Action					
	INDIVIDUAL	Action					
		Action Other				To/From School	
		Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO		
	01	001	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				