6TL0B7D6QX

19-01693

WISCONSIN MOTOR VEHICLE CRASH REPORT

	Document Number Override	Primary Crash Document #	Agency 19-016	Crash Number 93		Officer/Deputy A. SUKOWATEY		
6TL0B7D6QX	Crash Date 02/11/2019	Crash Time 02:38 AM	Date Ar 02/11/2		Time Arrived 02:38 AM			
	Date Notified 02/11/2019	Time Notified 02:38 AM	Total Ui 01	nits	Total Injured Total 00 00		Killed	
n D	On Emergency	and Run		Work Zone		or Towed	wed Reporting Threshold	
0 F	Government Property	Active School Zone	School NO	Bus Related	Tags			
	Reportable	Crash Type DT4000 (STANDARD CRA	.SH)			ed	Secondary Crash	
	Description							
	Diagram					Reconstructio		
	SLIDE OFF					Additional Info	prmation	
	✔ I, a sworn law enforceme	nt officer, agree that I have	not added	I any CJIS data in th	his report.			
	THE OPERATOR OF UNIT ONE V CONDITIONS AND ENTERED TH					HICLE DUE TO) SLIPPERY ROAD	

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	_oc	ation									
f	ON CTHK EB					Latitude			Longitud	de	
	0.97 MI W OF TWIN PINE RD						43.522943796		-90.072	2829603	
							X Coordinate		Y Coordinate		
		IN THE TOWN OF REEDSBURG IN SAUK COUNTY					251666.9375 4823477.5		7.5		
							Structure Type				
L	<u></u> ra	sh Scene									
ī		Harmful Event				First Horn	nful Event Lo	ocation			
	DIT							OF-WAY (TF		(4)	
ŀ		ner of Collision								A1)	
		COLLISION W/VEHIC	I F IN TRANSPORT			Light Condition DARK/UNLIT					
-	-	Surface Condition(s)					Roadway Factor(s)				
		OW, SLUSH									
ŀ	Envi	onment Factor(s)									
	WE	ATHER CONDITIONS				NONE					
F	Wea	ther Condition(s)									
	RAI	N, SNOW									
ŀ	Anim	al Type				Relation T	To Trafficway	/			
						TRAFFIC	CWAY - NO	OT ON ROA	ON ROAD		
ľ	Cras	h Classification - Locatior	1			Crash Cla	ssification -	Jurisdiction			
		SLIC PROPERTY				NO SPECIAL JURISDICTION					
	Tribal Land						Access Control Special Study NO CONTROL				
ŀ	With	n Interchange Area	Junction Location		Intersectio	ection Type					
	NO	Ū	NON-JUNCTION			INTERSE	CTION				
l	Jni	Summary									
_		Status		Vehicle Op	erating As C	lassification	1	Unit Type			
	IN T	RANSIT		D CLASS	i	TRUCK					
_	Vehicle Type					Operating As Endorsements					
61	UTILITY TRUCK/PICKUP TRUCK										
ľ	Total Occs Train/Bus # Recorded			Total # Cita	Total # Citations Issued		Total Traile	ers	Total HazMat Types		
	1			0		0					
Ī			Direction Of Travel	Pre CrashTir				2		ies	
=	NO EASTBOUND				Mark 55		55				
	Most Harmful Event: Collision With				Special Function Emergency Motor Vehicle Use NO SPECIAL FUNCTION NOT APPLICABLE						
-	DIICH					Traffic Control Inoperative/Missing					
					Traffic Control				ioi inopera	uve/wissing	
ŀ		D-WAY, NOT DIVIDED	,		Road Curvature				NO Road Grade		
	Surface Type BLACKTOP (BITUMINOUS)							DOWNHILL			
ŀ		k Bus or HazMat	,0,	STRAIGH	STRAIGHT						
	NO										
	1	Vehicle									
	License Plate Number			Plate Type			St	Country of Issuance			
		M1895N		LTK - LIGHT TRUCK		WI	UNITED STATES				
5	-	Vehicle Identification Nu	Make		Year						
۔ ا	01	1FTZR15E71PB6957		FORD		2001	RANGER				
		Color		Body Style			Bus Use NOT A BUS				
	BLK - BLACK Initial Contact Point 12FRONT Extent Of Damage				PK - PICKUP NOT A BUS Vehicle Damage Vehicle Damage						
⊢∣				venicie Da							
	Ŧ	Extent Of Damage		NO DAM	IAGE						

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		Towed Due To Damage		١	/ehicle Removed By				
		NOT TOWED		(OPERATOR				
		What Driver Was Doing		١	/ehicle Factors				
		GOING STRAIGHT							
		Driver Prior Action Other			NOT APPLICABLE				
		Driver Actions							
	щ	SPEED TOO FAST/COND)						
UNIT	CL								
5	VEHICLE								
	2								
		Owner Name			Owner Address				
		FRANCIS JAMES BREY			687 N JEFFERSON ST				
2	01				RICHLAND CENTER, V	NI 53581 , U	S		
		Sequence Of Events							
	01	Event DITCH							
	02	Event							
	03	Event							
		Event							
	04	Event							
		Individual							
	1	Driver			Citations Issued		Sex		
		FRANCIS JAMES BREY		0		MALE			
_	NDIVIDUAL				Date of Birth		Race WHITE		
UNIT	NI	Address			Driver License Number				
>	IDI	687 N JEFFERSON ST							
	4	RICHLAND CENTER, WI 53581 , US			STATE: WISCONSIN COUNTRY: UNITED STATES				
	Sat	On Duty Crash fety Equipment			Safety Equipment				
		Seat Position			SHOULDER & LAP BELT				
		1FRONT SEAT-LEFT SI	-LEFT SIDE (DRIVER/MOTORCY						
		Helmet Use			Helmet Compliance				
		Eye Protection			Tint Compliance				
	-	Injury Severity			Airbag				
2	001	1	PARENT I	NJURY	NON DEPLOYED				
		Ejected Ejection Path			Trapped/Extricated				
	NOT EJECTED NOT EJECTED/NOT APPL				NOT TRAPPED				
		Medical Transport		EMS Agency Identifier		EMS Run #			
	NOT TRANSPORTED								
		Hospital			Date of Death		Time of Death		
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)								
			PPLICABL	E (NUT DISTRA	CIED)				
		Distracted By Action NOT DISTRACTED							
		Non Motorist	Unit #	Location					

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		Prior Action					
UNIT	INDIVIDUAL	Action					
		Action Other Suspected Alcoh	nol Use	Suspected Drug Use			To/From School
	L	Drug & Alcohol No		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	5	
0	001	Drug Type			•		
		Individual Condition					
		APPEARED NORMAL					