WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Override	Primary Crash [1	Agency Crash Number 19-01610 Date Arrived 02/09/2019 Total Units 01		Investigating Officer/Deputy DEPUTY W. VERTEIN			
Crash Date 02/09/2019	Crash Time 99:99				Time Arrived 07:10 AM			
Date Notified 02/09/2019	Time Notified 07:10 AM				Total Injured 00	Total Kille	Total Killed 00	
On Emergency	Hit and Run	Lane Closure				r Towed	owed Reporting Threshold	
Government Property		h a a l 7 a m a	School E NO	Bus Related	Tags			
Reportable	Crash Type DT4000 (STA	NDARD CRASH)			Amende	d	Secondary Crash	
Description Diagram					-	Reconstruction		
	Non-Reportable					Photos By Additional Info	rmation	
		and the state of t	- 4 4 - 1					
I, a sworn law enforce						190 OFF THE	ROADWAY IN THE	
EASTERNMOST DITCH LIN BACKING MANEUVER, BUT OUT OF THE DITCH.	E WITH NO ONE ARO	UND. UPON FURTH	IER INV	ESTIGATION, IT APPE	EARED THE OPER	ATOR ATTEM	IPTED TO PERFORM A	

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	0.42	FREEDOM RD				Latitude 43.40698	36622		Longitud		
	OF HAPPY HILL RD IN THE TOWN OF FREEDOM					X Coordinate 268716			Y Coordinate 4809975		
	IN SAUK COUNTY						Structure Type				
	Cra	sh Scene									
	First	Harmful Event				First Harm	ıful Event Lo	cation			
							DWAY				
							Light Condition				
							DARK/UNLIT				
							Factor(s)				
	ICE										
	Envi	ronment Factor(s)									
	NON	NE				NONE					
	Wea	ther Condition(s)				1					
	CLE	AR									
	Anim	nal Type				Relation To Trafficway					
		1.01				TRAFFICWAY - ON ROAD					
	Crash Classification - Location PUBLIC PROPERTY Tribal Land					Crash Classification - Jurisdiction NO SPECIAL JURISDICTION					
						Access Control Special Study					
						NO CONTROL					
	With	Within Interchange Area Junction Location Intersection NO NON-JUNCTION NOT AN				on Type INTERSECTION					
			NON-JUNCTION		NOT AN	INTERSE	CHON				
	ıını	t Silmmarv									
		t Summary Status		Vehicle One	arating As C	lassification		Unit Type			
	Unit	Status		Vehicle Ope	•	lassification		Unit Type	RII F		
	Unit IN T	Status RANSIT		Vehicle Ope	•	lassification		Unit Type AUTOMO		nents	
	Unit IN T Vehi	Status RANSIT cle Type	.E		•	lassification		AUTOMO		nents	
	Unit IN T Vehi	Status RANSIT	.E				Total Traile	AUTOMOI Operating A			
	Unit IN T Vehi	Status RANSIT cle Type ORT) UTILITY VEHICL	Train/Bus # Recorded	D CLASS			Total Traile	AUTOMO Operating A	s Endorsen		
	Unit IN T Vehic (SPC Total 1	Status RANSIT cle Type ORT) UTILITY VEHICL I Occs rance?	Train/Bus # Recorded Direction Of Travel	D CLASS Total # Cita 0			Total Traile 0 Speed Lim	AUTOMO Operating A	s Endorsen Total Hazl 0 Total Lane	Mat Types	
04	Unit IN T Vehic (SPC Total 1 Insur UNF	Status RANSIT cle Type ORT) UTILITY VEHICL I Occs rance? KNOWN	Train/Bus # Recorded Direction Of Travel EASTBOUND	Total # Cita 0 Pre	tions Issued CrashTire Mark		Total Traile	AUTOMOI Operating A	Total Hazl Total Lane 2	Mat Types	
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Crash Date 02/09/2019

Crash Time 99:99

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		Towed Due To Damage	Vel	nicle Removed By				
	TOWED BUT NOT DUE TO DISABLING DAMAG			EVERETTS TOWING				
	What Driver Was Doing			Vehicle Factors				
	BACKING							
		Driver Prior Action Other	NC	OT APPLICABLE				
		Driver Actions UNSAFE BACKING						
_	ΊE							
	¥							
_	VEHICL							
		Owner Name		Owner Address				
2	01	FELIPE V BARRON (608) 434-9524		S7427 WESTERN AVE NORTH FREEDOM, WI 53951, US				
0	0	(000) 434-3324		NORTH REEDOM, WI 33331 , GO				
		0						
		Sequence Of Events Event						
	01	RUN OFF ROADWAY RIGHT						
	02	Event DITCH						
	03	Event						
	4	Event						
	04							
	ı	ndividual						
		Driver EDGAR O BARRON		Citations Issued	Sex			
	Ļ			0	MALE			
╘	INDIVIDUAL			Date of Birth	Race HISPANIC			
	<u> </u>	Address	[Oriver License Number				
	Ä	S7559 USH 12 #K11 NORTH FREEDOM, WI 53951, US		STATE: WISCONSIN COUNTRY: UN	ITED STATES			
		, , , , , , , , , , , , , , , , , , , ,						
	ļ	On Duty Crash	9	Safety Equipment				
	Sat	ety Equipment						
		Seat Position	ı	RESTRAINT USE UNKNOWN				
		1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY						
		Helmet Use		Helmet Compliance				
		Eye Protection		Tint Compliance				
_	001	Injury Severity	A	Airbag				
6	8	Injury NO APPARENT INJURY	ı	NON DEPLOYED				
		Ejected Ejection Path	DD1 16	A D. F	Trapped/Extricated			
		NOT EJECTED NOT EJECTED/NOT A		EMS Agency Identifier	NOT TRAPPED EMS Run #			
		NOT TRANSPORTED	'	INIO Agency Identine	LIVIS KUIT#			
		Hospital	[Date of Death	Time of Death			
Distracted By Source								
		Distracted By Action						
		Non Motorist Striking Unit # Location						
		14011 MOLOTISE						

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		r								
		Prior Action								
		Action								
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	4									
I⊑	<u></u>									
LNO	>									
–	INDIVIDUAL									
	Z									
İ		Action Other						To/From School		
l	Suspected Alcohol Use				Suspected Drug Use					
	ı	Drug & Alcohol No			NO					
ŀ		Alcohol Test Giver					Alcohol Test Results			
		21		Alcohol Test Type	,		Alcohol Test Nesults			
l		TEST NOT GIVEN								
		Drug Test Given TEST NOT GIVEN Drug Test Typ		Drug Test Type		Drug Test Results	3			
2	001	Drug Type		•		•				
0	ŏ									
		Individual Condition								
		NOT ODOEDVE	·n							
		NOT OBSERVE	יט:							
l .	_									
	Pro	perty Owner	r e							
7	Gove	ernment			Address S4977 CTH D					
0	Government TOWNSHIP OF FREEDOM									
유법	(608	3) 524-6400			ROCK SPRINGS, WI					
PROP OWNER										
		d Objects Ct	mu ale							
	LIXE	ixed Objects Struck								
	_		Struck Object					Damage Tag Number		
	9	01	DITCH					NA		