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19-01864

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 19-01864	Investigating Officer/Deputy DEPUTY A. SUKOWATEY	
Crash Date 02/14/2019		Crash Time 07:41 PM	Date Arrived 02/14/2019	Time Arrived 07:50 PM	
Date Notified 02/14/2019		Time Notified 07:42 PM	Total Units 02	Total Injured 03	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 	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 EASTBOUND ON HIGHWAY H WHEN HE ATTEMPTED TO MAKE A RIGHT HAND TURN ON TO BIRCHWOOD ROAD. DUE TO SNOWY AND ICY ROAD CONDITIONS, THE OPERATOR OF UNIT ONE WAS TRAVELING TOO FAST FOR THOSE CONDITIONS AND STRUCK UNIT TWO, WHICH WAS STOPPED AT THE STOP SIGN ON BIRCHWOOD ROAD WAITING TO TURN ONTO HWY H. UNIT ONE'S DRIVER COMPLAINED OF PAIN IN HIS RIGHT HAND. UNIT ONES PASSENGER COMPLAINED OF MILD CHEST PAIN. UNIT TWO'S OPERATOR COMPLAINED OF LEFT SHOULDER PAIN. ALL INVOLVED DECLINED EMS.

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Location

ON BIRCHWOOD SPUR 116 FT E OF CTHH EB IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude 43.616021965	Longitude -89.829822744
	X Coordinate 271658.8125	Y Coordinate 4833118
	Structure Type	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 08--FRONT TO SIDE	Light Condition DARK/UNLIT	
Road Surface Condition(s) SNOW, ICE	Roadway Factor(s) NONE	
Environment Factor(s) WEATHER CONDITIONS		
Weather Condition(s) SNOW, SEVERE WINDS		
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 YES	Junction Location INTERSECTION	Intersection Type T-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 2	Train/Bus # Recorded	Total # Citations Issued 1	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT	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 LEFT		Road Grade LEVEL	
	Truck Bus or HazMat NO				

UNIT 01	Vehicle			
	License Plate Number 7DXK461	Plate Type AUT - AUTOMOBILE	St CA	Country of Issuance UNITED STATES
	Vehicle Identification Number 1HGCR2F39EA071989	Make HONDA	Year 2014	Model ACCORD
	Color BLU - BLUE	Body Style 4D - 4DR		Bus Use NOT A BUS
	Initial Contact Point 12--FRONT	Vehicle Damage		
	Extent Of Damage DISABLING DAMAGE	1--RIGHT FRONT CORNER, 11--LEFT FRONT CORNER, 12--FRONT		

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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By INTERSTATE BP	
	What Driver Was Doing RIGHT TURN		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions SPEED TOO FAST/COND			
01	Owner Name VICTOR CARLOS MARTIN DELACRUZMATOS (510) 362-2241		Owner Address 362 BALMORAL WY HAYWARD, CA 94544 , US	
	Sequence Of Events			
01	01	Event MOTOR VEH IN TRANSPORT		
	02	Event		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company ALLSTATE-INS-CO		Individual VICTOR DELACRUZMATOS	
UNIT INDIVIDUAL	Individual			
	Driver VICTOR CARLOS MARTIN DELACRUZMATOS (510) 362-2241		Citations Issued 1	Sex MALE
	Address 362 BALMORAL WY HAYWARD, CA 94544 , US		Date of Birth	Race HISPANIC
			Driver License Number STATE: CALIFORNIA COUNTRY: UNITED STATES	
01	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 SUSPECTED MINOR INJURY	Airbag DEPLOYED-FRONT
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 NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				

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UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
01	001	Action Other		To/From School			
		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					
		Individual					
		Passenger LUIS ALFREDO CARDENAS GARCIA			Citations Issued 0	Sex MALE	
		Date of Birth			Race		
		Address 1197 BUNKER DR # 106B BARABOO, WI 53913 , US			Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
01	002	Safety Equipment		On Duty Crash			
		Seat Position 3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER		Safety Equipment SHOULDER & LAP BELT			
		Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
		Injury		Injury Severity SUSPECTED MINOR INJURY	Airbag DEPLOYED-FRONT		
		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							
Non Motorist		Striking Unit #	Location				

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UNIT	INDIVIDUAL	Prior Action				
		Action				
		Action Other			To/From School	
		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				
		Violations				
		01	002	UTC Number AD980415	Issue To? 001	Statute Number 346.57(3)

Unit Summary

UNIT	02	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 0
		Insurance? YES		Direction Of Travel NORTHBOUND		<input type="checkbox"/> Pre CrashTire Mark		Speed Limit 35	Total Lanes 2
		Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT			Special Function NO SPECIAL FUNCTION			Emergency Motor Vehicle Use NOT APPLICABLE	
		Traffic Way TWO-WAY, NOT DIVIDED			Traffic Control STOP SIGN			Traffic Control Inoperative/Missing NO	
		Surface Type BLACKTOP (BITUMINOUS)			Road Curvature STRAIGHT			Road Grade LEVEL	
		Truck Bus or HazMat NO							

Vehicle

02	02	License Plate Number ABW4122		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
		Vehicle Identification Number 5NPE24AFXHH503172		Make HYUNDAI	Year 2017	Model SONATA	
		Color BLU - BLUE		Body Style SD - SEDAN			Bus Use NOT A BUS
		Initial Contact Point 11--LEFT FRONT CORNER					

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UNIT VEHICLE	Vehicle Damage	
	Extent Of Damage DISABLING DAMAGE	9--LEFT SIDE MIDDLE, 10--LEFT SIDE FRONT, 11--LEFT FRONT CORNER, 12--FRONT
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By PLATTS WRECKER
	What Driver Was Doing SLOW/STOPPING	Vehicle Factors
UNIT VEHICLE	Driver Prior Action Other	NOT APPLICABLE
	Driver Actions NO CONTRIBUTING ACTION	
02 02	Owner Name CHRISTOPHER ERIC GOODBEAR (414) 305-7491	Owner Address E8862 WINNIESHIEK DRIVE WISCONSIN DELLS, WI 53965 , US
	Sequence Of Events	
01 02 03 04	Event MOTOR VEH IN TRANSPORT	
	Event	
	Event	
	Event	
UNIT	Policy Holder	
	Insurance Company AMERICAN-FAMILY-INS-CO	Individual CHRISTOPHER GOODBEAR
UNIT INDIVIDUAL	Individual	
	Driver CHRISTOPHER ERIC GOODBEAR (414) 305-7491	Citations Issued 0
		Sex MALE
		Date of Birth
	Race INDIAN	
	Address E8862 WINNIESHIEK DRIVE WISCONSIN DELLS, WI 53965 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES
02 003	Safety Equipment	
	On Duty Crash	Safety Equipment
	Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY	SHOULDER & LAP BELT
	Helmet Use	Helmet Compliance
	Eye Protection	Tint Compliance
	Injury	Injury Severity SUSPECTED MINOR INJURY
	Airbag DEPLOYED-SIDE	
	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
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UNIT	Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
	Distracted By Action NOT DISTRACTED				
	Non Motorist		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other				To/From School
	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				
02	003	Individual Condition			
		APPEARED NORMAL			