

6TL0C713B1

19-01567

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 19-01567	Investigating Officer/Deputy SERGEANT J. SABOL	
Crash Date 02/08/2019		Crash Time 02:30 AM	Date Arrived 02/08/2019	Time Arrived 02:53 AM	
Date Notified 02/08/2019		Time Notified 02:53 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 <p style="text-align: center; font-size: 24px;">Non-reportable crash</p>	Reconstruction By
	Photos By
	Additional Information

I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

UNIT 1 WAS TRAVELING WESTBOUND ON FOREST ROAD. DRIVER OF UNIT 1 WAS ATTEMPTING TO LOCATE THE CASINO BUT LOST HIS WAY. IN AN ATTEMPT TO TURN AROUND IN THE ROADWAY, DRIVER GOT STUCK IN THE WESTBOUND DITCH. DRIVER WAS PULLED OUT BY PASSERBY. NO DAMAGE TO VEHICLE.

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Location

ON FOREST RD 176 FT W OF RED PINE RD IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude 43.531903796	Longitude -89.804849463
	X Coordinate 273358.5	Y Coordinate 4823707
	Structure Type	

Crash Scene

First Harmful Event DITCH	First Harmful Event Location SHOULDER RIGHT	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DARK/UNLIT	
Road Surface Condition(s) SNOW	Roadway Factor(s) NONE	
Environment Factor(s) WEATHER CONDITIONS		
Weather Condition(s) CLEAR		
Animal Type	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction	
Tribal Land	Access Control NO CONTROL	Special Study

Unit Summary

01 UNIT	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type TRUCK		
	Vehicle Type UTILITY TRUCK/PICKUP TRUCK				Operating As Endorsements		
	Total Occs 2	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0		
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 25	Total Lanes 2		
	Most Harmful Event: Collision With DITCH		Special Function		Emergency Motor Vehicle Use		
	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 TRUCK OR TRUCK COMBINATION > 10,000LBS GVWR/GCWR						
	01 UNIT VEHICLE	Vehicle					
		License Plate Number KS8658		Plate Type LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES	
Vehicle Identification Number 1GCEK19Z27Z122453		Make CHEVROLET	Year 2007	Model K1500			
Color RED - RED		Body Style TK - TRUCK		Bus Use NOT A BUS			
Initial Contact Point NON-COLLISION		Vehicle Damage					
Extent Of Damage NO DAMAGE		NO DAMAGE					
Towed Due To Damage TOWED BUT NOT DUE TO DISABLING DAMAG		Vehicle Removed By					

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UNIT VEHICLE	What Driver Was Doing U TURN		Vehicle Factors	
	Driver Prior Action Other			
	Driver Actions FAILURE TO CONTROL, RAN OFF ROADWAY			
	Owner Name TIMOTHY KOLB		Owner Address 201 N GROVE STREET REEDSBURG, WI 53959 , US	
UNIT 01	Sequence Of Events			
	01	Event		
	02	Event		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company		Name	
UNIT INDIVIDUAL	Individual			
	Driver KENNETH WILLIAMS		Citations Issued 0	Sex MALE
	Address 1661 19TH STREET #102 REEDSBURG, WI 53959 , US		Date of Birth	
			Race WHITE	
UNIT 01	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
	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 NOT APPLICABLE (NOT DISTRACTED)	
Distracted By Action NOT DISTRACTED				
Non Motorist		Striking Unit #	Location	

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UNIT	INDIVIDUAL	Prior Action		
		Action		
01	001	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
01	001	Drug Type		
		Individual Condition ASLEEP OR FATIGUED		
UNIT	INDIVIDUAL	Individual		
		Passenger RACHEL BENESH	Citations Issued 0	Sex FEMALE
01	002	Date of Birth		Race WHITE
		Address 1661 19TH STREET #102 REEDSBURG, WI 53959 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES
01	002	Safety Equipment	On Duty Crash	Safety Equipment
		Seat Position 3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER	SHOULDER & LAP BELT	
01	002	Helmet Use	Helmet Compliance	
		Eye Protection	Tint Compliance	
01	002	Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
01	002	Medical Transport NOT TRANSPORTED		EMS Agency Identifier
		Hospital		EMS Run #
01	002	Date of Death		Time of Death
		Distracted By Distracted By Source		
01	002	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										
	01	002									
Carrier											
<input type="checkbox"/> Use Vehicle Owner Same as Carrier					Source						
Name					Address , ,						
GVWR			Vehicle Configuration			Cargo Body Type					
US DOT #			Carrier Type			Permitted Load					
<input type="checkbox"/> OS/OW Load		WI Permit Number		<input type="checkbox"/> Permitted Vehicle On Permitted Route		<input type="checkbox"/> Escort Vehicle Required By Permit		<input type="checkbox"/> Escort Vehicle Present			
Measured Height			Measured Length			Measured Width		Measured Weight			
UNIT		01									
		01									
	TRUCK BUS										