

6TL09T1TN2
19-02840

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 19-02840	Investigating Officer/Deputy DEPUTY J. BODDEN	
Crash Date 03/10/2019		Crash Time 06:00 PM	Date Arrived 03/10/2019	Time Arrived 06:27 PM	
Date Notified 03/10/2019		Time Notified 06:11 PM	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.

NON-REPORTABLE SLIDE OFF

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Location

ON BLUFF RD 1128 FT S OF TOWER RD IN THE TOWN OF GREENFIELD IN SAUK COUNTY	Latitude 43.430326223	Longitude -89.632327823
	X Coordinate 286942.46875	Y Coordinate 4811969.5
	Structure Type	

Crash Scene

First Harmful Event DITCH	First Harmful Event Location ON ROADWAY	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLEAR		
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 01	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type TRUCK	
	Vehicle Type UTILITY TRUCK/PICKUP TRUCK				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 SOUTHBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With OTHER POST, POLE OR SUPPORT		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 DOWNHILL	
	Truck Bus or HazMat NO					

UNIT 01	Vehicle					
	01	License Plate Number 1858282		Plate Type LTK - LIGHT TRUCK	St IL	Country of Issuance UNITED STATES
		Vehicle Identification Number 1GTEC14X35Z256419		Make CHEVROLET	Year 2005	Model SILVERADO
	VEHICLE	Color GRY - GRAY		Body Style TK - TRUCK		Bus Use NOT A BUS
		Initial Contact Point 5--RIGHT REAR CORNER		Vehicle Damage		
Extent Of Damage MINOR DAMAGE		5--RIGHT REAR CORNER				

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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER		
	What Driver Was Doing BACKING		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions UNSAFE BACKING				
01	01	Owner Name DAVID UPTON JOHNSON III (615) 516-9097		Owner Address 976 MCKNIGHT CIR APT 4 ROCKFORD, IL 61107 , US	
		Sequence Of Events			
01	01	Event DITCH			
		Event OTHER POST, POLE OR SUPPORT			
		Event			
		Event			
UNIT	Policy Holder				
	Insurance Company STATE-FARM-GENERAL-INS-CO		Individual DAVID JOHNSON		
UNIT	Individual				
	Driver DAVID UPTON JOHNSON III (615) 516-9097		Citations Issued 0	Sex MALE	
	Address 976 MCKNIGHT CIR APT 4 ROCKFORD, IL 61107 , US		Date of Birth	Race WHITE	
			Driver License Number STATE: ILLINOIS 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 OTHER DISTRACTION (ANIMAL, FOOD, GROOMING)			
Distracted By Action OTHER ACTION (LOOKING AWAY FROM TASK ETC)					

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CRASH REPORT

UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location	
		Prior Action				
	Action					
	Action Other				To/From School	
	01	001	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			