

6TL09XQZ04

19-02927

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 19-02927	Investigating Officer/Deputy DEPUTY I. GALVAN	
Crash Date 03/12/2019		Crash Time 09:03 PM	Date Arrived 03/12/2019	Time Arrived 09:21 PM	
Date Notified 03/12/2019		Time Notified 09:05 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

<h1>NON REPORTABLE</h1>	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.

UNIT 1 WAS TRAVELING WESTBOUND ON FERN DELL ROAD NEAR YELLOW THUNDER TRAIL ON RAIN AND ICE COVERED ROADS. UNIT 1 BEGAN TO SLIDE. UNIT 1S FRONT RIGHT TIRE LEFT ROAD WAY ON TO SNOW COVERED SHOULDER. DUE TO ROAD CONDITIONS UNIT 1 WAS STUCK. UNIT 1 WAS REMOVED BY THE OPERATOR. NO DAMAGE REPORTED.

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Location

Table with location details: ON FERN DELL RD (1) 0.27 MI W OF YELLOW THUNDER TRL IN THE VILLAGE OF LAKE DELTON IN SAUK COUNTY. Includes Latitude (43.561427496), Longitude (-89.790296509), X Coordinate (274644.5625), Y Coordinate (4826946.5), and Structure Type.

Crash Scene

Table with crash scene details: First Harmful Event (OTHER NON-COLLISION), Manner of Collision (NO COLLISION W/VEHICLE IN TRANSPORT), Road Surface Condition(s) (WET, ICE), Environment Factor(s) (NONE), Weather Condition(s) (RAIN), Animal Type, Crash Classification - Location (PUBLIC PROPERTY), and Intersection Type (NOT AN INTERSECTION).

Unit Summary

Table with unit summary details: Unit Status (IN TRANSIT), Vehicle Type (PASSENGER CAR), Total Occs (1), Direction Of Travel (WESTBOUND), Most Harmful Event (OTHER NON-COLLISION), Traffic Way (TWO-WAY, NOT DIVIDED), Surface Type (BLACKTOP (BITUMINOUS)), and Truck Bus or HazMat (NO).

Table with vehicle details: License Plate Number (ACC5300), Vehicle Identification Number (JA3AJ86E55U011867), Color (BLK - BLACK), Make (MITSUBISHI), Year (2005), Model (LANCER OZ), and Vehicle Damage (NO DAMAGE).

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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
01	01	Owner Name BRADY ALLEN REDD (000) 000-0000		Owner Address S3052 E FOX HILL RD BARABOO, WI 53913 , US
Sequence Of Events				
01	01	Event OTHER NON-COLLISION		
02	02	Event		
03	03	Event		
04	04	Event		
Individual				
UNIT INDIVIDUAL	Driver BRADY ALLEN REDD (000) 000-0000		Citations Issued 0	Sex MALE
	Address S3052 E FOX HILL RD BARABOO, WI 53913 , US		Date of Birth	Race WHITE
			Driver License Number	STATE: WISCONSIN COUNTRY: UNITED STATES
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		
01	001	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	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	001			