

6TL09T1TNG

19-08227

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 19-08227	Investigating Officer/Deputy DEPUTY C. GALLAGHER	
Crash Date 07/06/2019		Crash Time 08:00 AM	Date Arrived 07/06/2019	Time Arrived 09:17 AM	
Date Notified 07/06/2019		Time Notified 08:49 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 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 OTHER DOCUMENTS

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

UNIT 1 WAS OPERATING EASTBOUND ON DURWARDS GLEN RD WHEN IT ENTERED THE EASTBOUND DITCH FOR APPROXIMATELY 1/4 OF A MILE. UNIT 1 LEFT THE EASTBOUND DITCH AND CROSSED BOTH LANES AND ENTERED THE WESTBOUND DITCH. UNIT 1 CAME TO REST FACING NORTHBOUND IN THE WESTBOUND DITCH.

Location

ON DURWARDS GLEN RD 0.36 MI W OF DURWARD GLENN RD IN THE TOWN OF GREENFIELD IN SAUK COUNTY	Latitude 43.446037339	Longitude -89.606882289
	X Coordinate 289056.6875	Y Coordinate 4813649.5
	Structure Type NO STRUCTURE	

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Crash Scene

First Harmful Event DITCH		First Harmful Event Location OUTSIDE RIGHT-OF-WAY (TRAFFICWAY)	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT		Light Condition DAYLIGHT	
Road Surface Condition(s) WET		Roadway Factor(s) NONE	
Environment Factor(s) NONE			
Weather Condition(s) CLOUDY, RAIN			
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 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 AUTOMOBILE	
	Vehicle Type (SPORT) UTILITY VEHICLE				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 2	Total Trailers 0	Total HazMat Types 0	
	Insurance? UNKNOWN	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With OTHER OBJECT - NOT FIXED		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 STRAIGHT		Road Grade DOWNHILL	
	Truck Bus or HazMat NO					

UNIT 01 VEHICLE	Vehicle				
	License Plate Number R944203		Plate Type AUT - AUTOMOBILE	St IL	Country of Issuance UNITED STATES
	Vehicle Identification Number KL4CJASB4DB073374		Make BUICK	Year 2013	Model ENCORE
	Color TAN - TAN		Body Style UT - SPORT UTILITY VEHICLE		Bus Use NOT A BUS
	Initial Contact Point 12--FRONT		Vehicle Damage		
	Extent Of Damage DISABLING DAMAGE		1--RIGHT FRONT CORNER, 6--REAR, 11--LEFT FRONT CORNER, 12--FRONT		
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By MIKES TOWING		
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors		
Driver Prior Action Other		NOT APPLICABLE			

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UNIT	VEHICLE	Driver Actions FAILURE TO CONTROL, RAN OFF ROADWAY	
		Owner Name KIMBERLY GRANT (999) 999-9999	Owner Address 1750 BROADWAY ST BLUE ISLAND, IL 60406 , US
01	01	Sequence Of Events	
	01	Event DITCH	
	02	Event DOWNHILL RUNAWAY	
	03	Event	
	04	Event	
UNIT	INDIVIDUAL	Individual	
		Driver JOSHUA J LEY (630) 776-2396	Citations Issued 2
		Date of Birth	Sex MALE
		Race ASIAN	
		Address 5728 S MADISON ST HINSDALE, IL 60521 , US	Driver License Number STATE: ILLINOIS COUNTRY: UNITED STATES
UNIT	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 DEPLOYED-FRONT
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE
		Medical Transport NOT TRANSPORTED	Trapped/Extricated NOT TRAPPED
		Hospital	EMS Agency Identifier EMS Run #
			Date of Death Time of Death
		Distracted By	Distracted By Source UNKNOWN
			Distracted By Action UNKNOWN
		Non Motorist	Striking Unit # Location
			Prior Action

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT	INDIVIDUAL	Action			
		Action Other			To/From School
01	001	Drug & Alcohol		Suspected Alcohol Use YES	Suspected Drug Use NO
		Alcohol Test Given TEST GIVEN		Alcohol Test Type BLOOD	Alcohol Test Results PENDING
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results
		Drug Type			
		Individual Condition UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL			
		Violations			
02	01	UTC Number AE7565445	Issue To? 001	Statute Number 346.63(1)(a)	Description OPERATING WHILE UNDER THE INFLUENCE(2ND)
		UTC Number AE7565456	Issue To? 001	Statute Number 343.05(3)(a)	Description OPERATE W/O VALID LICENSE