19-09161

WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT BARABOO, WI 53913 (608) 356-4895

Document Number Ov	erride	Primary Crash	Document #	Agency 19-091	Crash Numb 61	ber	Investigating DEPUTY T.		ND	
Crash Date 07/24/2019		Crash Time 12:20 PM		Date Arrived 07/24/2019			Time Arrived 12:21 PM			
Date Notified 07/24/2019			Time Notified 12:21 PM		Total Units 02		Total Injured 00		Total Killed 00	
Crash Date 07/24/2019 Date Notified 07/24/2019 On Emergency Governme Property	Hit	and Run	Lane Closu		Work	Zone				Reporting Threshold
Governme Property		Active So	chool Zone	School I NO	Bus Related		Tags			
✓ Reportable	Crash Type DT4000 (STA	I)			Amend	ed		Secondary Crash		
Description Diagram								Reco	nstruction	By
Diagram								Reco		Uy
			-	××						
	I		1	-				Photo	os By	
	6.000									
	22/222							Additi NON	ional Infor	mation
	1 ~							NON	•	
	() () () ()	 =====								
	2	1								
		4								
	×1	12								
408 Linn St										
		1								
Not To Scale										
		Linn Street								
								DEET		Y IN FRONT OF UNIT 1.
UNIT 1 REAR ENDED REPORTED.										
Location										
ON LINN ST/ STH3 76 FT W	3 WB					atitude)		Longitud	de 5550007
OF WALNUT ST	F WEST B	ARABOO			х	Coordinate			Y Coord	linate
IN SAUK COUNTY						276323.25 Structure Type			481725	08
						IO STRUCTU	JRE			

19-09161

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Crash Scene

								First Harmful Event Location				
	MO	FOR VEH IN TRANSP	ORT			ON ROADWAY						
	Manı	ner of Collision			Light Condition							
	02	FRONT TO REAR			DAYLIGHT							
	Road	Surface Condition(s)	Roadway	Factor(s)								
	DRY	/										
	Envii	ronment Factor(s)										
	NOM	NE				NONE						
	Wea	ther Condition(s)										
	CLE	AR										
	Anim	al Type				Relation T		-				
		h Classification - Location						Jurisdiction				
		BLIC PROPERTY						RISDICTION		-		
	Triba	I Land				Access Co NO CON				Special Study		
	Withi	n Interchange Area	Junction Location		Intersectio	n Type						
	NO		NON-JUNCTION		NOT AN INTERSECTION							
l	Unit	t Summary 🛛 💻										
	Unit	Status		Vehicle Ope	erating As C	lassification		Unit Type	Гуре			
		RANSIT		D CLASS	D CLASS			TRUCK				
2		cle Type		Operating As Endorsements								
0	(SPORT) UTILITY VEHICLE											
	Total Occs Train/Bus # Recorded				Total # Citations Issued		Total Trailers		,,			
	2			1			0	0 imit Total Land				
	Insurance? Direction Of Travel			Pre	Pre CrashTire		Speed Lim 25		Total Lane	es		
UNIT	NO WESTBOUND Most Harmful Event: Collision With				Special Function		25		4 Motor Vehi			
5		FOR VEH IN TRANSP		NO SPEC		TION		NOT APP				
	Traff	ic Way		Traffic Cont	rol			Traffic Cont	rol Inoperat	ive/Missing		
	DIVI	DED HWY W/O TRAF	FIC BARRIER	NO CONT	NO CONTROL			NO				
	Surfa	асе Туре		Road Curva	Road Curvature			Road Grade				
		CKTOP (BITUMINOU	S)	STRAIGH	STRAIGHT LEVEL							
	Trucl	k Bus or HazMat										
		Vehicle										
		License Plate Number		Plate Type		I	St	Country of Is	suance			
		ACF8387			AUT - AUTOMOBIL		wi	UNITED ST	TATES			
_		Vehicle Identification Nur	mber	Make			Year	Model				
2	0	1J4GL48K72W31352	7	JEEP			2002	LIBERTY S	6P			
		Color		Body Style			_	Bus Use NOT A BU	<i>د</i>			
		BLU - BLUE				Y VEHICI	E	NOT A BO	5			
ъ	CLE	Initial Contact Point 12FRONT		Vehicle Da	mage							
UNIT	Ч	Extent Of Damage		12FRO	лт							
2	I2FRONT Extent Of Damage MINOR DAMAGE				12FRONT							
		Towed Due To Damage		Vehicle Removed By								
		NOT TOWED		OWNER	OWNER							
		What Driver Was Doing		Vehicle Fa	Vehicle Factors							
		GOING STRAIGHT										
		Driver Prior Action Other			PLICABLE							

19-09161

UNIT	VEHICLE	Driver Actions FAILURE TO CONTROL, OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER									
01	01	Owner Name AGUILA L SALAS (608) 495-8393			Owner Address 401 N WALNUT ST #401 REEDSBURG, WI 53959, US						
	Ś	Sequence Of Ever	nts								
	6	Event MOTOR VEH IN TRANSPORT									
	02	Event									
	03	Event									
	04	Event									
	l	ndividual									
					Citations Issued	Sex					
	AL	BASILIA L TORRES VERDE (608) 495-8393			1 Date of Birth	FEMALE Race					
±						HISPANIC					
UNIT	INDIVIDUA	Address 401 N WALNUT ST #4 REEDSBURG, WI 539			Driver License Number						
	Saf	iety Equipment	Duty Crash		Safety Equipment						
		Seat Position 1FRONT SEAT-LEF	T SIDE (DRIVER/N	IOTORCY	SHOULDER & LAP BELT						
		Helmet Use			Helmet Compliance						
		Eye Protection			Tint Compliance						
6	001	Inju	iry Severity		Airbag						
0	Ō	Ejected	Ejection Path	JRY	NON DEPLOYED	Trapped/Extricated					
		NOT EJECTED	-	ED/NOT APPL	ICABLE	NOT TRAPPED					
		Medical Transport			EMS Agency Identifier	EMS Run #					
		NOT TRANSPORTED Hospital			Date of Death	Time of Death					
		rioopilai									
		Distracted By NC	tracted By Source	NOT DISTRA	CTED)						
		Distracted By Action NOT DISTRACTED									
		Non Motorist	iking Unit # Lo	ocation							
		Prior Action	I								

19-09161

UNIT	INDIVIDUAL	Action							
		Action Other					To/From School		
	Ľ	Drug & Alcohol NO	ed Alcohol Use	Suspected Drug Use					
		Alcohol Test Given	Alcohol Test Type	2		Alcohol Test Results			
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results				
6	001	Drug Type							
		Individual Condition APPEARED NORMAL							
	l	ndividual							
		Passenger FIORELLA L CURO TORR	RES	Citations Issued		Sex FEMALE			
⊢	DUAI	(608) 495-8393		Date of Birth		Race HISPANIC			
UNIT	INDIVIDUAL	Address 401 N WALNUT ST #401 REEDSBURG, WI 53959 ,	US	Driver License Number					
	Saf	ety Equipment	Crash	Safety Equipment					
	[Seat Position 3FRONT SEAT-RIGHT S		SHOULDER & LAP BELT					
		Helmet Use		Helmet Compliance					
		Eye Protection		Tint Compliance					
6	002	Injury Se	everity	Airbag					
•	õ	Ejected NO AP	PARENT INJURY	NON DEPLOYED		Trapped/Extricated			
		NOT EJECTED	NOT EJECTED/NOT APPL			NOT TRAPPED			
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #			
		Hospital		Date of Death Time of Death					
		Distracted By	ed By Source			I			
		Distracted By Action							
		Non Motorist	Unit # Location						
		Prior Action							

19-09161

	Ļ	Action										
UNIT	INDIVIDUAL											
>	NDIN											
	-											
		Action Other										To/From School
	L	Drug & Alcohol	Susp NO	pected Alcohol l	Jse	Suspected Drug Use						
		Alcohol Test Given		Alcohol Test Typ	ре				Alcohol Test	t Results		
		TEST NOT GIVEN Drug Test Given TEST NOT GIVEN			Drug Test Type			Drug 7	Test Results			
01	002	Drug Type				I						
		Individual Condition						·				
		APPEARED NORMAL										
		Violations UTC Number		0.4	atute Number							
	Б Unif	BB336996 t Summary ■	001	34	4.62(1)		OPERATE MOTOR \			SURANCE		
		Status				Ve	hicle Operating As Classi	fication		Unit Type		
		RANSIT				D CLASS				TRUCK Operating As Endorsements		
02		ORT) UTILITY VEHI	CLE	:						Operating A	SENUUISEII	ients
	-	I Occs		Train/Bus # Re		То 0	Total # Citations Issued Total Tota			0		
F	Insur NO	ance?		Direction Of Tr	ND		Pre CrashTire Mark		Speed Lim 25	4		
UNIT		Harmful Event: Collision			Special Function NO SPECIAL FUNCTION					Emergency Motor Vehicle Use NOT APPLICABLE		
		ic Way DED HWY W/O TRA	AFFI	C BARRIER		Traffic Control NO CONTROL			Traffic Control Inoperative/Missing NO			
						Road Curvature			Road Grade	l		
		CKTOP (BITUMINC	108))		STRAIGHT LEVEL						
	NO	lahiolo				_						
		Vehicle License Plate Number	r			Р	late Type		St	Country of Is	suance	
		N8519V					MP - TEMPORARY P	LAT		UNITED ST	ATES	
02	02	Vehicle Identification N 1J4FT28B29D1948		ver		J	lake EEP		2009	Model	8P	
		Color ONG - ORANGE				U	ody Style IT - SPORT UTILITY V	/EHICI		Bus Use NOT A BUS		
E	CLE	Initial Contact Point 6REAR				Vehicle Damage						
UNIT	VEHICL	Extent Of Damage				6	REAR					
		Towed Due To Damag	је				ehicle Removed By					
		What Driver Was Doin	ıg				ehicle Factors					
		GOING STRAIGHT				N	IOT APPLICABLE					
		Driver Prior Action Oth	ieľ									

19-09161

		Driver Actions											
		NO CONTRIBUTING ACT											
	VEHICLE	NO CONTRIBUTING ACT											
LINU	C												
z	Ĭ												
	亩												
	>												
		Owner Name			Owner Address								
		AGUILA LUIS SALAS			401 N WALNUT ST #	401							
62	02	(608) 495-8393			REEDSBURG, WI 539								
<u> </u>	0	(,				,							
_		Sequence Of Events											
	01	Event MOTOR VEH IN TRANSPORT											
	0	MOTOR VEH IN TRANSP	OKI										
	•	Event											
	02												
	03	Event											
	0												
		Event											
	04	Event											
	•												
		ndividual											
		Driver			Citations Issued	Sex							
		AGUILA LUIS SALAS											
	Ļ				0	MALE							
	٩ſ	(608) 495-8393			Date of Birth	Race							
<u>с </u>	5												
ΞI	1	Address 401 N WALNUT ST # 401			Driver Lieenee Number								
IN	INDIVIDUAL				Driver License Number								
_					STATE, WISCONSIN C								
	=	REEDSBURG, WI 53959	, 05		STATE: WISCONSIN COUNTRY: UNITED STATES								
		On Dut	v Croch		Safety Equipment								
	Saf	fety Equipment	y Clash		Salety Equipment								
	oui	cty Equipment											
		Seat Position			SHOULDER & LAP BELT								
		1FRONT SEAT-LEFT SI	IDE (DRIVE	R/MOTORCY									
		Helmet Use			Helmet Compliance								
		Heimet Ose			Tiennet Compliance								
		Eye Protection			Tint Compliance								
	8	Injury S	Severity		Airbag								
6	003		PARENT II		NON DEPLOYED								
	0				NON DEFLOTED								
		Ejected	Ejection Par	th		Trapped/Extricated							
		NOT EJECTED	NOT EJE	CTED/NOT APPL	ICABLE	NOT TRAPPED							
		Medical Transport			EMS Agency Identifier	EMS Run #							
		NOT TRANSPORTED			3,								
		Hospital			Date of Death	Time of Death							
		Distract	ted By Source	9	•	•							
		Distracted By NOT A		E (NOT DISTRA	CTED)								
				,	,								
		Distracted By Action											
		NOT DISTRACTED											
		Striking	g Unit #	Location									
		Non Motorist											
		Prior Action											
		PHOF ACTION											

19-09161

UNIT	INDIVIDUAL	Action							
		Action Other					To/From School		
	Ľ	Drug & Alcohol NO	ed Alcohol Use	Suspected Drug Use					
		Alcohol Test Given	Alcohol Test Type			Alcohol Test Results			
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results				
02	003	Drug Type			I				
		Individual Condition APPEARED NORMAL							
	l	ndividual		Citatiana Januari					
		Passenger FIORELLA A SALAS CUR	0	Citations Issued		Sex FEMALE			
⊢	DUAI	(608) 495-8393		Date of Birth		Race HISPANIC			
UNIT	INDIVIDUAL	Address 401 N WALNUT ST # 401 REEDSBURG, WI 53959 ,	US	Driver License Number					
	Saf	ety Equipment	Crash	Safety Equipment					
		Seat Position 5SECOND SEAT-MIDDL	E	CHILD RESTRAINT SYSTEM - FORWARD FACING					
		Helmet Use		Helmet Compliance					
		Eye Protection		Tint Compliance					
03	004	Injury Se		Airbag					
-	0	Ejected NO AP	PARENT INJURY	NON DEPLOYED		Trapped/Extricated			
		NOT EJECTED	NOT EJECTED/NOT APPL	LICABLE		NOT TRAPPED			
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #			
		Hospital		Date of Death		Time of Death			
		Distracted By	ed By Source			1			
		Distracted By Action							
		Non Motorist	Unit # Location						
		Prior Action							

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WISCONSIN MOTOR VEHICLE CRASH REPORT

Action INDIVIDUAL UNIT Action Other To/From School Suspected Alcohol Use Suspected Drug Use Drug & Alcohol NO NO Alcohol Test Given Alcohol Test Type Alcohol Test Results TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Test Type Drug Test Results Drug Type 004 02 Individual Condition APPEARED NORMAL