

6TL0B8M7VT

19-10593

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 19-10593	Investigating Officer/Deputy DEPUTY B. MEARS	
Crash Date 08/24/2019		Crash Time 06:00 AM	Date Arrived 08/24/2019	Time Arrived 06:39 AM	
Date Notified 08/24/2019		Time Notified 06:33 AM	Total Units 01	Total Injured 01	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 DEPUTY MEARS
	Additional Information PHOTOS

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

UNIT WAS WB ON CTH H WEST OF ACORN LANE. OPERATOR STATED SHE SWERVED TO MISS A DEER AND OVER CORRECTED. UNIT TRAVELED ACROSS THE CENTERLINE INTO THE SOUTH SIDE DITCH, CONTINUED SW ABOUT 100 FT WHERE IT THEN STRUCK A CATTLE FENCE AND ROCK NEXT TO A CULVERT FOR A CATTLE CROSSING. UNIT CONTINUED ANOTHER 25 FEET UP AN EMBANKMENT SOUTHBOUND WHERE IT CAME TO REST FACING SW. OPERATOR CALLED FAMILY TO PULL IT OUT BUT THEY WERE NOT ABLE TO. NO ONE WAS ONSCENE WHEN I ARRIVED AND THE OPERATOR DID NOT CONTACT LAW ENFORCEMENT. UNIT HAD SEVERE DAMAGE. OPERATOR WAS CONTACTED AND RESPONDED TO THE SCENE. SHE ADMITTED SHE HAD NOT CONTACTED LAW ENFORCEMENT. SHE STATED SHE SWERVED TO MISS A DEER. SHE ALSO SAID THAT HER RIGHT SIDE WAS SORE BUT REFUSED AN AMBULANCE. SHE WAS CITED FOR FTN POLICE OF AN ACCIDENT. THE UNIT WAS LATER REMOVED BY STEVES AUTO SERVICE.

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Location

ON CTHH SB 580 FT E OF D AND W RD IN THE TOWN OF DELLONA IN SAUK COUNTY	Latitude 43.588215239	Longitude -89.952101815
	X Coordinate 261681.71875	Y Coordinate 4830373.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event DITCH		First Harmful Event Location SHOULDER LEFT	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT		Light Condition DAWN	
Road Surface Condition(s) DRY		Roadway Factor(s) NONE	
Environment Factor(s) ANIMAL (S) IN ROADWAY			
Weather Condition(s) CLOUDY			
Animal Type DEER		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

01	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type (SPORT) UTILITY VEHICLE				Operating As Endorsements	
	Total Occs 01	Train/Bus # Recorded	Total # Citations Issued 01	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel WESTBOUND	<input checked="" type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With FENCE		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 LEVEL	
	Truck Bus or HazMat NO					
01	Vehicle					
	License Plate Number AEZ8673		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number 1FMPU16586LA55178		Make FORD	Year 2006	Model EXPEDITION	
	Color BLU - BLUE		Body Style UT - SPORT UTILITY VEHICLE		Bus Use NOT A BUS	
	Initial Contact Point 12--FRONT		Vehicle Damage 1--RIGHT FRONT CORNER, 2--RIGHT SIDE FRONT, 10--LEFT SIDE FRONT, 11--LEFT FRONT CORNER, 12--FRONT, UNDERCARRIAGE			
	Extent Of Damage DISABLING DAMAGE					
Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By STEVES AUTO SERVICE				

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UNIT VEHICLE	What Driver Was Doing GOING STRAIGHT	Vehicle Factors	
	Driver Prior Action Other	NOT APPLICABLE	
	Driver Actions FAILURE TO CONTROL, RAN OFF ROADWAY, FAILED TO KEEP IN DESIGNATED LANE, SWERVED OR AVOIDED DUE TO WIND, SLIPPERY SURFACE, MOTOR VEHICLE, OBJECT, NON-MOTORIST IN ROADWAY, ETC., OVER-CORRECTING/OVER-STEERING		
	Owner Name DOMINIC S DENMAN (608) 415-3122	Owner Address S3552 OLD LOGANVILLE RD REEDSBURG, WI 53959 , US	
UNIT 01	Sequence Of Events		
	Event CROSS CENTERLINE		
	Event DITCH		
	Event FENCE		
	Event EMBANKMENT		
UNIT 01	Policy Holder		
	Insurance Company PROGRESSIVE-CASUALTY-INS-CO	Individual DOMINIC DENMAN	
UNIT INDIVIDUAL	Individual		
	Driver SAMANTHA L WILLIAMS (608) 415-9733	Citations Issued 01	Sex FEMALE
		Date of Birth	Race WHITE
	Address S103A OLD HWY 12 WISCONSIN DELLS, WI 53965 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
UNIT 01	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
UNIT 01	Injury		Injury Severity SUSPECTED MINOR INJURY
			Airbag DEPLOYED-FRONT
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier
	Hospital		EMS Run #
			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
Prior Action			

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UNIT	INDIVIDUAL	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			
	01	001	Violations			
			UTC Number AD980959	Issue To? 001	Statute Number 346.70(1)	Description FAILURE OF OPERATOR TO NOTIFY POLICE OF ACCIDENT
	Property Owner					
PROP OWNER	01	Individual ROBERT J HORKAN (608) 524-3426			Address E7344 CTH H LYNDON STATION, WI 53944 , US	
		Fixed Objects Struck				
01	01	Striking Unit	Struck Object	Structure Number	Damage Tag Number	
		01	FENCE			