6TL0BC3B3L 19-13205

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Investigating Officer/Deputy

| | Document Number Override | е | Primary Crash D | Oocument # | Agency Crash Number 19-13205 | |
|------|--------------------------|---|------------------------------------|------------|---------------------------------|--|
| 3L | Crash Date 10/24/2019 | | Crash Time 06:40 AM | | Date Arrived 10/24/2019 | |
| 33B) | Date Notified 10/24/2019 | | Time Notified 07:17 AM | | Total Units 01 | |
| .0B(| On Emergency Hit | | and Run Lane Closu | | ıre Work Zone | |
| 6TL | Government Property | | Active School Zone | | School Bus Related NO | |
| | ✓ Reportable | | Crash Type DT4000 (STANDARD CRASH) | | | |

DEPUTY W. VERTEIN

Time Arrived
07:33 AM

Total Injured
00

Trailer or Towed

Tags

Amended

Total Killed
Tot

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.

ON THE DESCRIBED DATE, TIME, AND LOCATION, UNIT 1 WAS TRAVELING NORTHBOUND. THE OPERATOR STATED AS HE WAS TRAVELING NORTHBOUND, HIS COFFEE CUP FELL OUT OF THE CUP HOLDER AND WAS ROLLING AROUND ON THE PASSENGER FLOOR BOARD. THE OPERATOR STATED HE TRIED TO GRAB THE COFFEE CUP AND ENDED UP DRIVING INTO THE DITCH. UNIT 1 ENTERED THE EASTERNMOST DITCH LINE WHERE IT CAME TO REST. NO REPORTED INJURIES.

| _ocation | | | | | | | |
|---------------------------------------|-------------------------------|----------------------------------|--|--|--|--|--|
| | Latitude 43.495789819 | Longitude -90.155006127 | | | | | |
| OF CTHK NB (FIRE S4150) | X Coordinate 244910.984375 | Y Coordinate 4820710.5 | | | | | |
| IN THE TOWN OF IRONTON IN SAUK COUNTY | Structure Type FIRE | | | | | | |

Not to scale

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Crash Scene

| First Harmful Event | | First Harmful Event Location | | | |
|-------------------------------------|-------------------|------------------------------|-------------------------------------|---------------|--|
| DITCH | | | ON ROADWAY | | |
| Manner of Collision | | Light Condition | | | |
| NO COLLISION W/VEHIC | LE IN TRANSPORT | DARK/UNLIT | | | |
| Road Surface Condition(s) | | Roadway Factor(s) | | | |
| WET | | | | | |
| Environment Factor(s) | | | | | |
| NONE | | NONE | | | |
| Weather Condition(s) | | | | | |
| CLOUDY | | | | | |
| Animal Type | | | Relation To Trafficway | | |
| | | | TRAFFICWAY - ON ROAD | | |
| Crash Classification - Location | | | Crash Classification - Jurisdiction | | |
| PUBLIC PROPERTY | | | NO SPECIAL JURISDICTION | | |
| Tribal Land | | | Access Control | Special Study | |
| | | | NO CONTROL | | |
| Within Interchange Area | Junction Location | Intersection | n Type | | |
| NO NON-JUNCTION NOT AN INTERSECTION | | | | | |
| | | | | | |

| ı | In | iŧ | Sı | ım | m | ary | , |
|---|-----|----|--------------|------|---|------|---|
| • | ,,, | | \mathbf{v} | 4111 | | aı v | |

| | Unit Status | | Vehicle Operating As Classification | n | Unit Type | | |
|------|---------------------------------|---------------------|--------------------------------------|-------------|-------------------------------------|-----------------|--|
| | IN TRANSIT | | D CLASS | ' ' | | BILE | |
| l_ | Vehicle Type | | • | _ | | As Endorsements | |
| 2 | PASSENGER CAR | | | | | | |
| İ | Total Occs Train/Bus # Recorded | | Total # Citations Issued | Total Trail | ers Total HazMat Types | | |
| | 1 | | 1 | 0 | | 0 | |
| İ | Insurance? | Direction Of Travel | Pre CrashTire | Speed Lim | it | Total Lanes | |
| l⊨ | YES | NORTHBOUND | Mark | 55 | | 2 | |
| FIND | Most Harmful Event: Collision W | ith | Special Function NO SPECIAL FUNCTION | | Emergency Motor Vehicle Use | | |
| _ | DITCH | | | | NOT APPLICABLE | | |
| İ | Traffic Way | | Traffic Control | | Traffic Control Inoperative/Missing | | |
| | TWO-WAY, NOT DIVIDED | | NO CONTROL | | NO | | |
| İ | Surface Type | | Road Curvature | | Road Grade | е | |
| | BLACKTOP (BITUMINOUS) |) | CURVE LEFT | | DOWNHIL | LL | |
| İ | Truck Bus or HazMat | | | | | | |
| | NO | | | | | | |

| V | | | • | | - |
|----|---|---|---|---|---|
| `\ | _ | n | | ч | c |
| | | | | | |

2

LNO

| | License Plate Number | Plate Type | St | Country of Issuance | | |
|-------|-------------------------------|---|------|---------------------|--|--|
| | AAH9809 | AUT - AUTOMOBILE | WI | UNITED STATES | | |
| | Vehicle Identification Number | Make | Year | Model | | |
| 5 | 1G2AL15F577377069 | PONTIAC | 2007 | G5 | | |
| | Color | Body Style | • | Bus Use | | |
| | RED - RED | CP - COUPE | | NOT A BUS | | |
| щ | Initial Contact Point | Vehicle Damage | | | | |
| _ | 12FRONT | 1RIGHT FRONT CORNER, 11LEFT FRONT CORNER, 12FRONT | | | | |
| 豆 | Extent Of Damage | | | | | |
| VEHIC | DISABLING DAMAGE | | | | | |
| | Towed Due To Damage | Vehicle Removed By | | | | |
| | TOWED DUE TO DISABLING DAMAGE | SHIELDS TOWING | | | | |
| | What Driver Was Doing | Vehicle Factors | | | | |
| | NEGOTIATING CURVE | | | | | |
| | Driver Prior Action Other | NOT APPLICABLE | | | | |
| | | | | | | |

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

| | Щ | Driver Actions FAILURE TO CON | TROL, RAN OFF | ROADWAY | | | | | | | |
|------|---|---|-----------------|---------------|---|------------------------|--|--|--|--|--|
| LIND | VEHICLE | | | | | | | | | | |
| | VE | | | | | | | | | | |
| | | Owner Name BART B ANDERS | ON | | Owner Address 1240 WELLINGTON DR | | | | | | |
| 6 | 01 | (608) 415-3905 | | | REEDSBURG, WI 53959 , US | | | | | | |
| | | Sequence Of Ev | vents | | | | | | | | |
| | 01 | Event RUN OFF ROADW | AY RIGHT | | | | | | | | |
| | 02 | Event DITCH | | | | | | | | | |
| | 03 | Event | | | | | | | | | |
| | 04 | Event | | | | | | | | | |
| _ | | Policy Holder | | | | | | | | | |
| L NO | | Insurance Company | | | Individual | | | | | | |
| | | ERIE-INS-CO Individual | | | SCOTT ANDERSON | | | | | | |
| | | Driver | | | Citations Issued | Sex | | | | | |
| | Ļ | SCOTT TAYLOR ANDERSON (608) 415-7353 | | | 1 | MALE | | | | | |
| _ | INDIVIDUAL | | | | Date of Birth | Race WHITE | | | | | |
| | DIVI | Address 1240 WELLINGTON DR | | | Driver License Number | | | | | | |
| | Z | REEDSBURG, WI | | | STATE: WISCONSIN COUNTRY: UNITED STATES | | | | | | |
| | | | On Duty Crash | | Safety Equipment | | | | | | |
| | Saf | ety Equipment | | | | | | | | | |
| | | Seat Position 1FRONT SEAT-L | EFT SIDE (DRIVE | R/MOTORCY | NONE USED - VEHICLE OCCUPAN | Т | | | | | |
| | | Helmet Use | | | Helmet Compliance | | | | | | |
| | | Eye Protection | | | Tint Compliance | | | | | | |
| _ | _ | | Injury Severity | | Airbag | | | | | | |
| 5 | 00 | Injury | NO APPARENT I | NJURY | DEPLOYED-FRONT | | | | | | |
| | | Ejected | Ejection Pa | | | Trapped/Extricated | | | | | |
| | | NOT EJECTED Medical Transport | NOTEJE | CTED/NOT APPL | EMS Agency Identifier | NOT TRAPPED EMS Run # | | | | | |
| | NOT TRANSPORTED | | | | Elvio Agency Identine | EWO Null # | | | | | |
| | | Hospital | | | Date of Death | Time of Death | | | | | |
| | Distracted By Source OTHER DISTRACTION (ANIMAL, FOOD, GROOMING) | | | | | | | | | | |
| | | Distracted By Action OTHER ACTION (I | LOOKING AWAY | FROM TASK ETO | C) | | | | | | |
| | | Non Motorist | Striking Unit # | Location | | | | | | | |
| | | Prior Action | | 1 | | | | | | | |
| | | | | | | | | | | | |

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| | | Action | | | | | | | |
|---------------|------------|--------------------------|----------------|-------------------|--------------------------------------|---------|----------------------|-------------------|--|
| | | | | | | | | | |
| | 4 | | | | | | | | |
| _ | INDIVIDUAL | | | | | | | | |
| UNIT | ₽ | | | | | | | | |
| Б | ≥ | | | | | | | | |
| | 9 | | | | | | | | |
| | = | | | | | | | | |
| | | | | | | | | | |
| | | A -4' O4' | | | | | | T-/F O-b | |
| | | Action Other | | | | | | To/From School | |
| | | | | | | | | | |
| | , | Drug & Alcoh | Suspected Alco | ohol Use | Suspected Drug Use | | | | |
| | | Jiug & Alcon | IOI NO | | NO | | | | |
| | | Alcohol Test Given | | Alcohol Test Type | Alcohol Test Type | | Alcohol Test Results | | |
| | | TEST NOT GIVEN | | | | | | | |
| | | Drug Test Given | | Drug Test Type | Drug Test Type Drug Test Results | | | | |
| | | TEST NOT GIV | EN | | | | | | |
| _ | Ξ | Drug Type | | I | | | | | |
| 0 | 001 | | | | | | | | |
| | | | | | | | | | |
| | | Individual Condition | on | | | | | | |
| | | APPEARED NO | ORMAI | | | | | | |
| | | AFFEARED NORMAL | | | | | | | |
| | Violations | | | | | | | | |
| | | UTC Number | Issue To? | Statute Number | Description | | | | |
| | 2 | AE138382 | 001 | 347.48(2m)(b) | VEHICLE OPERATOR FAIL/WEAR SEAT BELT | | | | |
| | Pro | perty Owne | r 💻 | l | | | | | |
| | | | | | Address | | | | |
| 01 | TÖV | ernment VNSHIP OF IRO | NTON | | E4685 PICKEL RD | | | | |
| ER | (608 | 3) 524-6679 | | | REEDSBURG, WI 539 | 59 , US | | | |
| PROP OWNER | | | | | | | | | |
| | Five | ed Objects St | ruck | | | | | | |
| | · ixe | | | | | | | | |
| | 5 | Striking Unit | Struck Object | | | | Structure Number | Damage Tag Number | |
| | 0 | 01 | DITCH | | | | | NA | |