6TL09T1TNZ

19-13630

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	In:	T		Lanca et al.	0#: /5	, ,	
Document Number Override	, , , , , , , , , , , , , , , , , , , ,			ng Officer/Deputy C. GALLAGHER			
Crash Date 11/01/2019	Crash Time 09:30 PM	Date Arrived 11/01/2019	Date Arrived		Time Arrived 10:00 PM		
Date Notified	Time Notified	Total Units		Total Injured Total Killed			
1/01/2019	09:32 PM	01		00 00			
On Emergency Hi	t and Run Lane Clos		k Zone		or Towed	Reporting Threshold	
Government Property	Active School Zone	School Bus Related NO	d	Tags			
✓ Reportable	Crash Type PRIVATE PROPERTY/PARK	PROPERTY/PARKING LOT			ed	Secondary Crash	
escription Diagram					Reconstruction		
N N N N N N N N N N N N N N N N N N N	E3166 F yard	11	seshoe backboard	I	Photos By DEPUTY C. Additional Info PHOTOS	GALLAGHER#9170 rmation	
☑ I, a sworn law enforceme	ent officer, agree that I have n	ot added any CJIS	S data in this r	1			
UNIT 1 WAS TRAVELING ON RP	'S PROPERTY WITHOUT CONSEND LEFT VEHICLE ON SCENE. UNI	NT. UNIT 1 DROVE O	VER THE RP'S I	HORSESHOE			
ocation							
ON E3166 FLOWAGE RD 0.26 MI E			Latitude 43.178974524		Longitu	ıde 971824	
OF LAUDON RD (HOUSE/BUILDING E3166)			X Coordinate	•	Y Coor	dinate	
	DEEN		243196.875		47855	30	
IN THE TOWN OF SPRING G IN SAUK COUNTY		Structure Type					

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Crash Scene

	First	Harmful Event	First Harmful Event Location								
	OTH	IER FIXED OBJECT	OFF ROADWAY, LOCATION UNKNOWN								
	Man	ner of Collision		Light Condition							
	NO	O COLLISION W/VEHICLE IN TRANSPORT				DARK/UNLIT					
	Road	d Surface Condition(s)			Roadway Factor(s)						
	Envi	ronment Factor(s)									
	Wea	ther Condition(s)									
	CLE	EAR									
	Anim	nal Type			Relation To Trafficway NON TRAFFICWAY - OTHER Crash Classification - Jurisdiction						
	Cras	h Classification - Location									
	PRI	VATE PROPERTY			PRIVATE PROPERTY						
	Triba	al Land		Access Control					Special Study		
	\\/ith	in Interchange Area	Junction Location		NO CONTROL						
	NO	=	NON-JUNCTION		Intersection Type NOT AN INTERSECTION						
	Uni	t Summary									
		Status			Vehicle Operating As Classification		Unit Type				
		RANSIT		D CLASS				TRUCK			
10		cle Type				Operating As Endorsements					
•		LITY TRUCK/PICKUP T		I =			Total Tra				
	Total Occs Train/Bus # Recorded			Total # Citations Issued Total Tra 1 0		ailers Total HazMat Types 0		wat Types			
	Insurance? Direction Of Travel				Speed Li	-		es			
⊢	YES NORTHBOUND										
UNIT	Most Harmful Event: Collision With OTHER FIXED OBJECT			Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE					
		ic Way	Traffic Control		Traffic Control Inoperative/Missing						
	PARKING LOT OR PRIVATE PROPERTY			NO CONTROL		NO Dead Goods					
	DIR'	ace Type T		Road Curvature STRAIGHT			Road Grade LEVEL				
		k Bus or HazMat	- CHARGITI				1				
	NO										
	'	Vehicle									
	License Plate Number		Plate Type LTK - LIGHT TRUC		v	St WI	Country of Issuance				
		NW9400	har	Make Make		· N	Year	UNITED STATES Model			
5	Vehicle Identification Number 1GCHK29KX8E116284		CHEVROLET			2008	SILVERADO				
		Color			Body Style			Bus Use NOT A BUS			
	WHI - WHITE Initial Contact Point			PK - PICKUP Vehicle Damage		1101 A 200					
⊨											
UNIT	Extent Of Damage MINOR DAMAGE			1RIGHT FRONT CORNER							
		Towed Due To Damage TOWED BUT NOT DUE TO DISABLING DAMAG			Vehicle Removed By GEORGES AUTO BODY						
		What Driver Was Doing			Vehicle Factors						
		GOING STRAIGHT									
		Driver Prior Action Other			NOT APPLICABLE						
				1							

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		Driver Actions										
_	LE	UNKNOWN										
L	⊢											
-	VEHICLE											
		Owner Name DAMON LAMONTE JO	OHNSTON		Owner Address E2751 PORTER RD							
5	01	(608) 712-7872	om to ron		LONE ROCK, WI 53556 ,	us						
		Sequence Of Events										
	01	Event OTHER FIXED OBJECT										
		Event										
	02											
	03	Event										
	04	Event										
_	ı	Policy Holder										
LIND		Insurance Company			Individual							
		AMERICAN-FAMILY-I	NS-CO		DAMON JOHNSTON							
		Individual										
		Driver DAMON LAMONTE JO	OHNSTON		Citations Issued 1	Sex MALE						
	JAL				Date of Birth	Race						
╘	INDIVIDUAL					WHITE						
	οN	Address E2751 PORTER RD			Driver License Number							
	LONE ROCK, WI 53556, US				STATE: WISCONSIN COUNTRY: UNITED STATES							
	Sat	fety Equipment On	Duty Crash		Safety Equipment							
		Seat Position			SHOULDER & LAP BELT							
		1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY										
		Helmet Use			Helmet Compliance							
		Eye Protection			Tint Compliance							
		Lyc i rotection			Till Compliance							
7	001	Inju	ıry Severity		Airbag							
0	Ō		APPARENT IN	NJURY	NON DEPLOYED Trapped/Extricated							
		Ejected NOT EJECTED	1 '		ICABI F	NOT TRAPPED						
	NOT EJECTED NOT EJECTED/NOT APP Medical Transport NOT TRANSPORTED				EMS Agency Identifier	EMS Run #						
		Hospital			Date of Death	Time of Death						
		Distracted By Source										
	ı	Distracted By UNKNOWN										
		Distracted By Action UNKNOWN										
		Non Motorist	iking Unit #	Location								
		Prior Action										

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		Action									
	_										
_	INDIVIDUAL										
L N	₹										
_ر											
	=										
		Action Other	To/From School								
			Suspected Alco	hol Use	Suspected Drug Use						
		Drug & Alcohol									
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results				
		TEST NOT GIVEN Drug Test Given		Drug Test Type		Drug Test Results					
		TEST NOT GIVEN		1.09 .00,,,,		Drug Foot Rooms					
2	001	Drug Type		•		•					
	0										
		Individual Condition									
		UNDER THE INFL									
	,	Violations			1						
	5	UTC Number AE756634	Issue To? 001	Statute Number 346.94(13)	Description ABANDONED MOTO	OR VEHICLE					