

6TLOBMQKWH

19-13813

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 <b>19-13813</b>		Investigating Officer/Deputy <b>SERGEANT E. MILLER</b>	
Crash Date <b>11/06/2019</b>		Crash Time <b>07:49 AM</b>		Date Arrived <b>11/06/2019</b>		Time Arrived <b>08:05 AM</b>	
Date Notified <b>11/06/2019</b>		Time Notified <b>07:49 AM</b>		Total Units <b>01</b>		Total Injured <b>00</b>	Total Killed <b>00</b>
<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		Tags	
<input type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>			<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

Description

Diagram		Reconstruction By	
Non -Reportable		Photos By	
		Additional Information	

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

SLIDE OFF - NO INJURIES OR DAMAGE - PULL OUT ONLY BY BILLS

Location

ON USH12 EB 0.29 MI N OF S GASSER RD IN THE TOWN OF BARABOO IN SAUK COUNTY	Latitude <b>43.449647386</b>	Longitude <b>-89.77818672</b>
	X Coordinate <b>275207.90625</b>	Y Coordinate <b>4814499</b>
	Structure Type	

**Crash Scene**

First Harmful Event <b>DITCH</b>	First Harmful Event Location <b>SHOULDER RIGHT</b>	
Manner of Collision <b>NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>SNOW</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>WEATHER CONDITIONS</b>		
Weather Condition(s) <b>SNOW</b>		
Animal Type	Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>	Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land	Access Control <b>NO CONTROL</b>	Special Study

**Unit Summary**

<b>UNIT</b>	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>AUTOMOBILE</b>		
	Vehicle Type <b>PASSENGER CAR</b>	Operating As Endorsements			
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types
	Insurance? <b>NOT APPLICABLE</b>	Direction Of Travel <b>EASTBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>65</b>	Total Lanes <b>2</b>
	Most Harmful Event: Collision With		Special Function	Emergency Motor Vehicle Use	
	Traffic Way <b>DIVIDED HWY MEDIAN W/BARRIER</b>		Traffic Control <b>NO CONTROL</b>	Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>CONCRETE</b>		Road Curvature <b>STRAIGHT</b>	Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>				

**Vehicle**

<b>UNIT</b>	<b>VEHICLE</b>	License Plate Number <b>189XCH</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>1G1AK15F467632140</b>	Make <b>CHEVROLET</b>	Year <b>2006</b>	Model <b>COBALT LS</b>
		Color <b>AME - AMETHYST</b>	Body Style <b>2D - 2DR</b>	Bus Use <b>NOT A BUS</b>	
		Initial Contact Point <b>NON-COLLISION</b>	Vehicle Damage		
		Extent Of Damage <b>NO DAMAGE</b>	<b>NO DAMAGE</b>		
		Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>BILLS TOWING</b>		
		What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors		
		Driver Prior Action Other	<b>NOT APPLICABLE</b>		
		Driver Actions <b>SPEED TOO FAST/COND</b>			

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01	01	Owner Name <b>TOMAS E VAZQUEZ</b>	Owner Address <b>S8015 MAPLE PARK RD PRAIRIE DU SAC, WI 53578 , US</b>	
		<b>Sequence Of Events</b>		
		01	Event	
		02	Event	
04	03	Event		
	04	Event		
	<b>Individual</b>			
	UNIT INDIVIDUAL	01	Driver <b>TOMAS E VAZQUEZ</b>	Citations Issued <b>0</b>
			Date of Birth	Race <b>WHITE</b>
		Address <b>S8015 MAPLE PARK RD PRAIRIE DU SAC, WI 53578 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
		<b>Safety Equipment</b>	On Duty Crash	Safety Equipment
01	001	Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>	<b>SHOULDER &amp; LAP BELT</b>	
		Helmet Use	Helmet Compliance	
		Eye Protection	Tint Compliance	
		<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
01	001	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
		Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier	EMS Run #
		Hospital	Date of Death	Time of Death
		<b>Distracted By</b>	Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>	
UNIT INDIVIDUAL	001	Distracted By Action <b>NOT DISTRACTED</b>		
		<b>Non Motorist</b>	Striking Unit #	Location
		Prior Action		
		Action		
01	001	Action Other		To/From School
		<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>

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01 001	Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results
	Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results
	Drug Type		
	Individual Condition <b>APPEARED NORMAL</b>		