

6TL0B3P3FX

20-00961

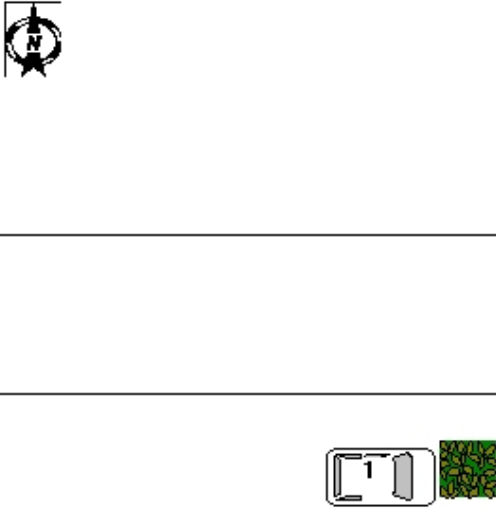
# WISCONSIN MOTOR VEHICLE CRASH REPORT

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>20-00961</b>		Investigating Officer/Deputy <b>DEPUTY S. PARKHURST</b>	
Crash Date <b>01/25/2020</b>		Crash Time <b>06:44 PM</b>		Date Arrived <b>01/25/2020</b>		Time Arrived <b>06:57 PM</b>	
Date Notified <b>01/25/2020</b>		Time Notified <b>06:45 PM</b>		Total Units <b>01</b>		Total Injured <b>01</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 <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

## Description

<p>Diagram</p>  <p style="text-align: center;"><b>South Lake Rd</b></p> <p style="text-align: center;"><b>Not to Scale</b></p>	Reconstruction By
	Photos By
	Additional Information <b>NONE</b>

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

UNIT 1 WAS EASTBOUND ON SOUTH LAKE RD. THE OPERATOR LOST CONTROL AND ENTERED THE DITCH. THE VEH CAME TO REST AGAINST A TREE.

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**Location**

ON S LAKE RD 0.33 MI E OF DEVIL'S LAKE STATE PARK RD IN THE TOWN OF MERRIMAC IN SAUK COUNTY	Latitude <b>43.410756627</b>	Longitude <b>-89.703462852</b>
	X Coordinate <b>281114.09375</b>	Y Coordinate <b>4809980.5</b>
	Structure Type	

**Crash Scene**

First Harmful Event <b>TREE</b>	First Harmful Event Location <b>ROADSIDE</b>	
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DARK/UNLIT</b>	
Road Surface Condition(s) <b>SLUSH</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>		
Weather Condition(s) <b>CLOUDY</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
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>

**Unit Summary**

UNIT 01	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>2</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>		
	Insurance? <b>YES</b>	Direction Of Travel <b>EASTBOUND</b>	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit <b>35</b>	Total Lanes <b>2</b>		
	Most Harmful Event: Collision With <b>TREE</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>		
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>		
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>DOWNHILL</b>		
	Truck Bus or HazMat <b>NO</b>						
	UNIT 01 VEHICLE	<b>Vehicle</b>					
		License Plate Number <b>AGB1876</b>		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
Vehicle Identification Number <b>3VWRA7AU5FM073172</b>		Make <b>VOLKSWAGEN</b>	Year <b>2015</b>	Model <b>GOLF</b>			
Color <b>BLK - BLACK</b>		Body Style <b>HB - HATCHBACK</b>		Bus Use			
Initial Contact Point <b>12 - FRONT</b>		Vehicle Damage					
Extent Of Damage <b>FUNCTIONAL DAMAGE</b>		<b>03 - RIGHT SIDE MIDDLE, 12 - FRONT</b>					

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UNIT VEHICLE	Towed Due To Damage <b>TOWED BUT NOT DUE TO DISABLING DAMAG</b>		Vehicle Removed By <b>CRAIGS 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>			
01	Owner Name <b>BRYCE EDWARD SCHILZ (262) 330-4162</b>		Owner Address <b>15895 W HEATHERLY DR NEW BERLIN, WI 53151 , US</b>	
	<b>Sequence Of Events</b>			
01	Event	<b>TREE</b>		
	Event			
	Event			
	Event			
04	<b>Policy Holder</b>			
	Insurance Company <b>USAA-CASUALTY-INS-CO</b>		Individual <b>BRYCE SCHILZ</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>BRYCE EDWARD SCHILZ (262) 330-4162</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
			Date of Birth	Race <b>WHITE</b>
	Address <b>15895 W HEATHERLY DR NEW BERLIN, WI 53151 , US</b>		Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01	<b>Safety Equipment</b>		On Duty Crash	
			Safety Equipment	
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</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>	
	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		
Hospital		EMS Run #		
Date of Death		Time of Death		
<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>		
Distracted By Action <b>NOT DISTRACTED</b>				

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UNIT	INDIVIDUAL	<b>Non Motorist</b>	Striking Unit #	Location		
		Prior Action				
		Action				
		Action Other		To/From School		
01	001	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>		
		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>				
		<b>Individual</b>				
		Passenger <b>ALMA V GARCIA</b> <b>(619) 992-5911</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>	
				Date of Birth	Race <b>HISPANIC</b>	
		Address <b>3819 50TH ST</b> <b>SAN DIEGO, CA 92105 , US</b>		Driver License Number		
		01	002	<b>Safety Equipment</b>	On Duty Crash	Safety Equipment
Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</b>			<b>SHOULDER &amp; LAP BELT</b>		
Helmet Use				Helmet Compliance		
Eye Protection				Tint Compliance		
<b>Injury</b>	Injury Severity <b>POSSIBLE INJURY</b>			Airbag <b>NON DEPLOYED</b>		
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					
Distracted By Action						
UNIT	INDIVIDUAL	<b>Non Motorist</b>	Striking Unit #	Location		

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UNIT INDIVIDUAL	Prior Action				
	Action				
	Action Other				To/From School
	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>		
	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	
01 002	Drug Type				
	Individual Condition <b>APPEARED NORMAL</b>				