

6TL0D0GSML

Document Number Override		Primary Crash Document #	Agency Crash Number <b>SC24-05077</b>	Investigating Officer/Deputy <b>DEPUTY G. AKERS</b>	
Crash Date <b>05/18/2024</b>		Crash Time <b>08:44 PM</b>	Date Arrived <b>05/18/2024</b>	Time Arrived <b>08:44 PM</b>	
Date Notified <b>05/18/2024</b>		Time Notified <b>08:44 PM</b>	Total Units <b>02</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 <b>NO</b>		Tags	
<input type="checkbox"/> Reportable	Crash Type <b>DT4000 (STANDARD CRASH)</b>		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

**Description**

<p>Diagram</p>	<p>Reconstruction By</p> <hr/> <p>Photos By <b>GA</b></p> <hr/> <p>Additional Information <b>PHOTOS</b></p>
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I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

V1 WAS TRAVELING SOUTH ON S. BURRITT AVE. NEAR MONROE AVE. TO TURN INTO THE SPIRIT GAS STATION. TRAFFIC WAS BACKED UP ON S. BURRITT AVE NORTH BOUND DUE TO EVENT TRAFFIC. THERE ARE BIKE LANES ON S. BURRITT AVE. AS V1 TURNED TO THE GAS STATION A BICYCLE WAS TRAVELING NORTH ON S. BURRITT AVE. V1 DID NOT SEE THE BICYCLE AND BOTH UNITS STRUCK AT THE FRONT BUMPER OF V1. THE BICYCLIST WAS NOT INJURED AND ONLY MINOR DAMAGE TO BOTH UNITS. D1 WAS CITED FOR FTY TO BICYCLE. THERE WERE NO INJURIES AND NO VEHICLES WERE TOWED.

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WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

Location

ON S BURRITT AVE 128 FT S OF STH23 EB IN THE VILLAGE OF LAKE DELTON IN SAUK COUNTY	Latitude <b>43.588812535</b>	Longitude <b>-89.797669686</b>
	X Coordinate <b>274151.5</b>	Y Coordinate <b>4830008</b>
	Structure Type <b>NO STRUCTURE</b>	

Crash Scene

First Harmful Event <b>PEDALCYCLE</b>	First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>01 - ANGLE</b>	Light Condition <b>DUSK</b>	
Road Surface Condition(s) <b>DRY</b>	Roadway Factor(s) <b>BACKUP DUE TO PRIOR CRASH</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>YES</b>	Junction Location <b>DRIVEWAY ACCESS</b>	Intersection Type <b>NOT AN INTERSECTION</b>

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>1</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>YES</b>	Direction Of Travel <b>NORTHBOUND</b>	<input type="checkbox"/> <b>Pre CrashTire Mark</b>	Speed Limit <b>25</b>	Total Lanes <b>2</b>
	Most Harmful Event: Collision With <b>PEDALCYCLE</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>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>				

<b>UNIT</b>	<b>Vehicle</b>				
	<b>01</b>	License Plate Number <b>WTUPGRL</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>3VW6T7AU2LM004318</b>	Make <b>VOLKSWAGEN</b>	Year <b>2020</b>	Model <b>GTI</b>
	<b>VEHICLE</b>	Color <b>BLK - BLACK</b>	Body Style <b>HB - HATCHBACK</b>		Bus Use
		Initial Contact Point <b>01 - RIGHT FRONT CORNER</b>	Vehicle Damage <b>01 - RIGHT FRONT CORNER, 12 - FRONT</b>		
Extent Of Damage <b>MINOR DAMAGE</b>					



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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>	
	What Driver Was Doing <b>LEFT TURN</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>LOOKED BUT DID NOT SEE</b>			
01 01	Owner Name <b>JOHN VIGUERAS (262) 203-1801</b>		Owner Address <b>123 N CHURCH ST ELKHORN, WA 53121 , US</b>	
	<b>Sequence Of Events</b>			
01 02 03 04	Event <b>PEDALCYCLE</b>			
	Event			
	Event			
	Event			
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>ERIE-INS-CO</b>		Individual <b>JOHN VIGUERAS</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>JOHN VIGUERAS (262) 203-1801</b>		Citations Issued <b>1</b>	Sex <b>MALE</b>
	Address <b>123 N CHURCH ST ELKHORN, WI 53121 , US</b>		Date of Birth	Race <b>HISPANIC</b>
	Driver License Number		<b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01 001	<b>Safety Equipment</b>		On Duty Crash	
	Row <b>01 - FRONT ROW</b>		Seat Position <b>07 - LEFT</b>	Safety Equipment <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	EMS Run #	
Hospital		Date of Death	Time of Death	
<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>		
Distracted By Action <b>UNKNOWN</b>				

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

UNIT	INDIVIDUAL	<b>Non Motorist</b>		Striking Unit #	Location	
		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	
	Drug Type					
	Individual Condition <b>APPEARED NORMAL</b>					
	01	001	<b>Violations</b>			
UTC Number <b>BG945309</b>			Issue To? <b>V01</b>	Statute Number <b>346.23(1)</b>	Description <b>PEDESTRIAN, BICYCLIST, OR EPAMD FYR</b>	

**Unit Summary**

UNIT	02	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>O CLASS</b>		Unit Type <b>BICYCLE</b>							
		Vehicle Type <b>BICYCLE</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 <b>0</b>			
		Insurance? <b>NO</b>		Direction Of Travel <b>NORTHBOUND</b>		<input checked="" type="checkbox"/> <b>Pre Crash Tire Mark</b>		Speed Limit <b>25</b>		Total Lanes <b>2</b>			
		Most Harmful Event: Collision With <b>MOTOR VEH IN TRANSPORT</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>LEVEL</b>			
		Truck Bus or HazMat <b>NO</b>											

**Vehicle**

02	02	License Plate Number		Plate Type	St	Country of Issuance		
		Vehicle Identification Number		Make	Year	Model		
		Color <b>BLK - BLACK</b>		Body Style <b>BI - BICYCLE</b>			Bus Use	
		Initial Contact Point <b>10 - LEFT SIDE FRONT</b>						



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UNIT VEHICLE	Vehicle Damage	
	Extent Of Damage <b>MINOR DAMAGE</b>	<b>08 - LEFT SIDE REAR, 09 - LEFT SIDE MIDDLE</b>
	Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OPERATOR</b>
	What Driver Was Doing	Vehicle Factors
UNIT VEHICLE	Driver Prior Action Other	<b>NOT APPLICABLE</b>
	Driver Actions	
	Owner Name <b>DWAYNE HANNAH (608) 617-8492</b>	Owner Address <b>4408 VILLAGE LN MADISON, WI 53704 , US</b>
	<b>Sequence Of Events</b>	
UNIT VEHICLE	Event <b>MOTOR VEH IN TRANSPORT</b>	
	Event	
	Event	
	Event	
UNIT INDIVIDUAL	<b>Individual</b>	
	Bicyclist <b>DWAYNE HANNAH (608) 617-8492</b>	Citations Issued <b>0</b>
		Sex <b>MALE</b>
		Date of Birth Race <b>WHITE</b>
	Address <b>4408 VILLAGE LN MADISON, WI 53704 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>
UNIT INDIVIDUAL	<b>Safety Equipment</b>	
	On Duty Crash	Safety Equipment
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>
	<b>NONE</b>	
	Helmet Use	Helmet Compliance
	Eye Protection	Tint Compliance
UNIT INDIVIDUAL	<b>Injury</b>	
	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NOT APPLICABLE</b>
	Ejected <b>NOT APPLICABLE</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>
	<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>	

WISCONSIN MOTOR VEHICLE  
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UNIT	Distracted By Action <b>NOT DISTRACTED</b>		
	<b>Non Motorist</b>	Striking Unit # 01	Location BICYCLE LANE
	Prior Action <b>WALKING/CYCLING ALONG ROADWAY WITH TRAFFIC (IN OR ADJACENT TO TRAVEL LANE)</b>		
	Action  <b>UNKNOWN</b>		
	Action Other		To/From School <b>NO</b>
	<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>		