

6TL0BNZM10

20-01825

# 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<br><b>20-01825</b>    |  | Investigating Officer/Deputy<br><b>DEPUTY A. BREUNIG</b> |                           |
| Crash Date<br><b>02/17/2020</b>                         |                                      | Crash Time<br><b>04:10 PM</b>                |                                    | Date Arrived<br><b>02/17/2020</b>         |  | Time Arrived<br><b>04:34 PM</b>                          |                           |
| Date Notified<br><b>02/17/2020</b>                      |                                      | Time Notified<br><b>04:17 PM</b>             |                                    | Total Units<br><b>01</b>                  |  | Total Injured<br><b>00</b>                               | Total Killed<br><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 checked="" type="checkbox"/> Government Property |                                      | <input type="checkbox"/> Active School Zone  |                                    | School Bus Related<br><b>NO</b>           |  | Tags   |                           |
| <input type="checkbox"/> Reportable                     |                                      | Crash Type<br><b>DT4000 (STANDARD CRASH)</b> |                                    | <input type="checkbox"/> Amended          |  | <input type="checkbox"/> Secondary Crash                 |                           |

## Description

|                                    |                                       |
|------------------------------------|---------------------------------------|
| <p>Diagram</p> <p>NOT TO SCALE</p> | Reconstruction By                     |
|                                    | Photos By                             |
|                                    | Additional Information<br><b>NONE</b> |

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

UNIT 1 WAS TRAVELING WESTBOUND ON CTH O. THE ROAD WAS SNOW COVERED. UNIT 1 WAS NEGOTIATING A CURVE TO THE RIGHT. UNIT 1 LOST CONTROL AND SLID OFF THE NORTH SIDE OF THE ROAD. UNIT 1 STRUCK A TRAFFIC SIGN. UNIT 1 SPUN AROUND AND CAME TO REST FACING EASTBOUND.

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**Location**

|  |                                 |                                  |
|--|---------------------------------|----------------------------------|
| ON CTHO WB<br>0.48 MI W<br>OF CHURCH RD<br>IN THE TOWN OF TROY<br>IN SAUK COUNTY | Latitude<br><b>43.275253803</b> | Longitude<br><b>-89.85099134</b> |
|  | X Coordinate<br><b>268654.5</b> | Y Coordinate<br><b>4795329.5</b> |
|  | Structure Type                  |                                  |

**Crash Scene**

|  |  |   |               |
|--|--|---|---------------|
| First Harmful Event<br><b>TRAFFIC SIGN POST</b>                        |  | First Harmful Event Location<br><b>SHOULDER RIGHT</b>                 |               |
| Manner of Collision<br><b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b> |  | Light Condition<br><b>DAYLIGHT</b>                                    |               |
| Road Surface Condition(s)<br><b>SNOW</b>                               |  | Roadway Factor(s)<br><br><b>NONE</b>                                  |               |
| Environment Factor(s)<br><b>NONE</b>                                   |  |   |               |
| Weather Condition(s)<br><b>SNOW</b>                                    |  |   |               |
| Animal Type  |  | Relation To Trafficway<br><b>TRAFFICWAY - ON ROAD</b>                 |               |
| Crash Classification - Location<br><b>PUBLIC PROPERTY</b>              |  | Crash Classification - Jurisdiction<br><b>NO SPECIAL JURISDICTION</b> |               |
| Tribal Land  |  | Access Control<br><b>NO CONTROL</b>                                   | Special Study |
| Within Interchange Area<br><b>NO</b>                                   | Junction Location<br><b>NON-JUNCTION</b> | Intersection Type<br><b>NOT AN INTERSECTION</b>                       |               |

**Unit Summary**

|   |  |   |   |                                       |  |   |  |
|---|--|---|---|---------------------------------------|--|---|--|
| UNIT<br>01  | Unit Status<br><b>IN TRANSIT</b>                               |   | Vehicle Operating As Classification<br><b>C CLASS</b> |                                       | Unit Type<br><b>AUTOMOBILE</b>                       |   |  |
|   | Vehicle Type<br><b>PASSENGER CAR</b>                           |   |   |                                       | Operating As Endorsements                            |   |  |
|   | Total Occs<br><b>1</b>   | Train/Bus # Recorded                                | Total # Citations Issued<br><b>0</b>                  | Total Trailers<br><b>0</b>            | Total HazMat Types<br><b>0</b>                       |   |  |
|   | Insurance?<br><b>YES</b>                                       | Direction Of Travel<br><b>WESTBOUND</b>             | <input type="checkbox"/> <b>Pre CrashTire Mark</b>    | Speed Limit<br><b>55</b>              | Total Lanes<br><b>2</b>                              |   |  |
|   | Most Harmful Event: Collision With<br><b>TRAFFIC SIGN POST</b> |   | Special Function<br><b>NO SPECIAL FUNCTION</b>        |                                       | Emergency Motor Vehicle Use<br><b>NOT APPLICABLE</b> |   |  |
|   | Traffic Way<br><b>TWO-WAY, NOT DIVIDED</b>                     |   | Traffic Control<br><b>NO CONTROL</b>                  |                                       | Traffic Control Inoperative/Missing<br><b>NO</b>     |   |  |
|   | Surface Type<br><b>BLACKTOP (BITUMINOUS)</b>                   |   | Road Curvature<br><b>CURVE RIGHT</b>                  |                                       | Road Grade<br><b>LEVEL</b>                           |   |  |
|   | Truck Bus or HazMat<br><b>NO</b>                               |   |   |                                       |  |   |  |
|   | UNIT<br>01<br>VEHICLE<br>01                                    | <b>Vehicle</b>                                      |   |                                       |  |   |  |
|   |  | License Plate Number<br><b>AGN9749</b>              |   | Plate Type<br><b>AUT - AUTOMOBILE</b> | St<br><b>WI</b>                                      | Country of Issuance<br><b>UNITED STATES</b> |  |
| Vehicle Identification Number<br><b>5Y2SL65846Z423931</b> |  | Make<br><b>PONTIAC</b>                              | Year<br><b>2006</b>                                   | Model<br><b>VIBE</b>                  |  |   |  |
| Color<br><b>GRY - GRAY</b>                                |  | Body Style<br><b>4H - HATCHBACK 4 DOOR</b>          |   | Bus Use                               |  |   |  |
| Initial Contact Point<br><b>11 - LEFT FRONT CORNER</b>    |  | Vehicle Damage<br><br><b>11 - LEFT FRONT CORNER</b> |   |                                       |  |   |  |
| Extent Of Damage<br><b>MINOR DAMAGE</b>                   |  |   |   |                                       |  |   |  |

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|   |   |  |  |  |
|---|---|--|--|--|
| UNIT<br>VEHICLE                               | Towed Due To Damage<br><b>NOT TOWED</b>                                 |  | Vehicle Removed By<br><b>OWNER</b>                                       |  |
|   | What Driver Was Doing<br><b>NEGOTIATING CURVE</b>                       |  | Vehicle Factors  |  |
|   | Driver Prior Action Other   |  | <b>NOT APPLICABLE</b>  |  |
|   | Driver Actions<br><b>FAILURE TO CONTROL</b>                             |  |  |  |
| 01  | Owner Name<br><b>MICHELLE L FANDRICH<br/>(608) 495-2670</b>             |  | Owner Address<br><b>S9945 COUNTY ROAD E<br/>SAUK CITY, WI 53583 , US</b> |  |
|   | <b>Sequence Of Events</b>   |  |  |  |
| 01  | Event<br><b>TRAFFIC SIGN POST</b>                                       |  |  |  |
|   | Event   |  |  |  |
|   | Event   |  |  |  |
|   | Event   |  |  |  |
| 04  | <b>Policy Holder</b>  |  |  |  |
|   | Insurance Company<br><b>ERIE-INS-CO</b>                                 |  | Individual<br><b>MICHELLE FANDRICH</b>                                   |  |
| UNIT<br>INDIVIDUAL                            | <b>Individual</b>   |  |  |  |
|   | Driver<br><b>BRAYTON MICHAEL FANDRICH<br/>(608) 495-4530</b>            |  | Citations Issued<br><b>0</b>   | Sex<br><b>MALE</b>                                 |
|   | Address<br><b>S9945 COUNTY ROAD E<br/>SAUK CITY, WI 53583 , US</b>      |  | Date of Birth  | Race<br><b>WHITE</b>                               |
|   | Driver License Number<br><b>STATE: WISCONSIN COUNTRY: UNITED STATES</b> |  |  |  |
| 01  | <b>Safety Equipment</b>   |  | On Duty Crash  |  |
|   | Row<br><b>01 - FRONT ROW</b>  |  | Seat Position<br><b>07 - LEFT</b>  | Safety Equipment<br><b>SHOULDER &amp; LAP BELT</b> |
|   | Helmet Use  |  | Helmet Compliance  |  |
|   | Eye Protection  |  | Tint Compliance  |  |
|   | <b>Injury</b>   |  | Injury Severity<br><b>NO APPARENT INJURY</b>                             | Airbag<br><b>NON DEPLOYED</b>                      |
|   | Ejected<br><b>NOT EJECTED</b>   | Ejection Path<br><b>NOT EJECTED/NOT APPLICABLE</b>             |  | Trapped/Extricated<br><b>NOT TRAPPED</b>           |
|   | Medical Transport<br><b>NOT TRANSPORTED</b>                             |  | EMS Agency Identifier  | EMS Run #  |
|   | Hospital  |  | Date of Death  | Time of Death                                      |
| <b>Distracted By</b>                          |   | Distracted By Source<br><b>NOT APPLICABLE (NOT DISTRACTED)</b> |  |  |
| Distracted By Action<br><b>NOT DISTRACTED</b> |   |  |  |  |

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|---------------------------------|--|---|--|---------------------------------|------------------------------------|
| UNIT<br>INDIVIDUAL<br>01<br>001 | <b>Non Motorist</b>  |   | Striking Unit #  | Location                        |                                    |
|                                 | Prior Action   |   |  |                                 |                                    |
|                                 | Action   |   |  |                                 |                                    |
|                                 | Action Other   |   |  |                                 |                                    |
|                                 | To/From School   |   |  |                                 |                                    |
|                                 | <b>Drug &amp; Alcohol</b>  |   | Suspected Alcohol Use<br><b>NO</b>                             | Suspected Drug Use<br><b>NO</b> |                                    |
|                                 | Alcohol Test Given<br><b>TEST NOT GIVEN</b>                            |   | Alcohol Test Type  |                                 | Alcohol Test Results               |
|                                 | Drug Test Given<br><b>TEST NOT GIVEN</b>                               |   | Drug Test Type   | Drug Test Results               |                                    |
|                                 | Drug Type  |   |  |                                 |                                    |
|                                 | Individual Condition<br><b>APPEARED NORMAL</b>                         |   |  |                                 |                                    |
| <b>Property Owner</b>           |  |   |  |                                 |                                    |
| PROP<br>OWNER<br>01             | Government<br><b>SAUK COUNTY HIGHWAY DEPT</b><br><b>(608) 356-4856</b> |   | Address<br><b>620 STH 136</b><br><b>BARABOO, WI 53913 , US</b> |                                 |                                    |
| <b>Fixed Objects Struck</b>     |  |   |  |                                 |                                    |
| 01                              | Striking Unit<br><b>01</b>   | Struck Object<br><b>TRAFFIC SIGN POST</b> |  | Structure Number                | Damage Tag Number<br><b>337710</b> |