WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Overrid	e Primary Crash	Primary Crash Document #				g Officer/Deputy I. GALVAN				
ב	Crash Date 02/25/2020	Crash Time 06:13 PM			Date Arrived 02/25/2020		Time Arrived 07:45 PM				
OI LUSAQZID	Date Notified 02/25/2020	Time Notified 07:13 PM			nits	Total Injured 00	Total Kille	Total Killed 00			
3	On Emergency	Hit and Run	Lane Clos	sure	☐ Work Zone	Trailer	or Towed	Reporting Threshold			
	Government Property		chool Zone	School NO	Bus Related	Tags					
	✓ Reportable	Crash Type DT4000 (STA	NDARD CRAS	H)		Amend	ed	Secondary Crash			
	Description										
	Diagram	BARREAU RD					Reconstruction Photos By	n By			
				ľ			Additional Info	ormation			
				ľ							
	— — MCLAIN RD			ĺ							
					NOT SCA	ALE					
	I, a sworn law enfo						JOE LINIT 4 W/	AS ADDESTED FOR			
	OPERATING WHILE UNDER	R THE INFLUENCE AND (CITED FOR OPERA	ATING A M	OTOR VEHICLE WITHO	UT PROOF OF INS	URANCE	NO ARRESTED FUR			

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Crash Date 02/25/2020

Crash Time 06:13 PM

L	.oc	ation ——								
-	ON	BARREAU RD				Latitude			Longitud	de
	348 FT N						7147		-90.171	648625
	_	MCLAIN RD	X Coordinate			Y Coord	linate			
	IN THE TOWN OF IRONTON						243512.28125			71
1	IIV 3	AUR COUNTY		Structure -	Туре					
L						NO STRUCTURE				
C	ra	sh Scene								
П	First	Harmful Event		First Harm	ıful Event Lo	cation				
	FEN	CE	OFF RO	ADWAY, L	OCATION	UNKNOV	/N			
	Manı	ner of Collision				Light Cond	dition			
			HICLE IN TRANSPORT			DUSK				
	Road	d Surface Condition(s)				Roadway	Factor(s)			
	DR۱	•								
	Envi	ronment Factor(s)								
١	WE	ATHER CONDITIONS				NONE				
-	Wea	ther Condition(s)				-				
	CLE	AR								
-	Anim	al Type				Relation T	o Trafficway	/		
						TRAFFIC	CWAY - OI	N ROAD		
	Crash Classification - Location						ssification -			
	_	BLIC PROPERTY						SDICTION		Consist Childre
	Tribal Land				Access Control NO CONTROL			Special Study		Special Study
7	With	n Interchange Area	Junction Location		Intersection	on Type				
I	NO		NON-JUNCTION		NOT AN	IN INTERSECTION				
		Summary ==								
		Status		1	•	Classification Unit Type				
	IN TRANSIT				D CLASS			AUTOMOBILE		
		cle Type		Operating As Endorsements				ments		
Ľ		SENGER CAR	T-4-1 # Oit-	Total # Citations Issued Total Tra			ilers Total HazMat Types		Mot Types	
	Total Occs Train/Bus # Recorded 1		Traili/bus # Recorded	rotal iii ottationo locaca			0	0		iwat Types
	Insurance?		Direction Of Travel				Consoltion			
	YES NORTHBOUND			Pre	Pre CrashTire Speed Li			2		
	Most Harmful Event: Collision With			Special Fur	Special Function			Emergency Motor Vehicle Use		
	FENCE				NO SPECIAL FUNCTION			NOT APPLICABLE		
	Traffic Way Traffic Control					Traffic Control Inoperative/Missing				tive/Missing
		D-WAY, NOT DIVIDED	NO CONT				NO			
	Surface Type			Road Curva				Road Grade		
_		CKTOP (BITUMINOUS K Bus or HazMat	5)	STRAIGH				LEVEL		
	NO	K Bus Of Haziviat								
	'	Vehicle								
	License Plate Number			Plate Type	Plate Type St		St	Country of Issuance		
	PX6853 Vehicle Identification Number 1FTZR15X5XPB82174			AUT - AU	AUT - AUTOMOBIL Make FORD		WI	UNITED STATES		
							Year Model 1999 RANGER			
	Color			1	Body Style Bus Use					
	BLK - BLACK Initial Contact Point 01 - RIGHT FRONT CORNER				PK - PICKUP					
				Vehicle Da	Vehicle Damage					
	01 - RIGHT FRONT CORNER Extent Of Damage MINOR DAMAGE			01 - RIGI	01 - RIGHT FRONT CORNER					
	MINOR DAMAGE			31 - IXIGI	VI MOITINONI COMEN					

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		Towed Due To Damage		Vel	nicle Removed By				
		TOWED BUT NOT DUE TO	O DISABLING DAMAG		SHIELDS TOWING				
		What Driver Was Doing							
		GOING STRAIGHT			Vehicle Factors				
					OT APPLICABLE				
		Driver Prior Action Other		110	TAIT LIOABLE				
		Driver Actions							
			EAII ED TO KEEP IN DES	SIGN	IATED LANE OPERATED MOTOR V	/EHICLE IN AGGRESSIVE/RECKLESS			
_	LE				TIVE, CARELESS OR ERRATIC MAN				
LNO	2	,			•				
5	VEHICL								
	>								
		Owner Name NICOLE HELEN BROWN			Owner Address				
5	01	(608) 635-5500			W3788 W LEMONWEIR CT MAUSTON, WI 53948 , US				
0	0	(000) 033-3300							
		Sequence Of Events							
	1	Event							
	01	FENCE							
	7	Event							
	02								
	~	Event							
	03								
		Event							
	04								
		Dallay Halder							
LIND		Policy Holder		1.					
5		Insurance Company			Individual				
		GEICO-GENERAL-INS-CO			NICOLE BROWN				
		Individual							
		Driver NICOLE HELEN BROWN (608) 635-5500			Citations Issued	Sex			
					2	FEMALE			
	INDINIDUAL				Date of Birth	Race			
—	٦					WHITE			
L N N	≥	Address W3788 W LEMONWEIR CT MAUSTON, WI 53948 , US			Driver License Number	l			
_	5				OTATE MUCCONCIN COUNTRY LIMITED OTATEO				
	=				STATE: WISCONSIN COUNTRY: UNITED STATES				
		On Duty Crash			Safety Equipment				
	Sat	fety Equipment							
		Row Seat Position		SHOULDER & LAP BELT					
		01 - FRONT ROW	07 - LEFT						
		Helmet Use		Helmet Compliance					
		Eye Protection			Tint Compliance				
					Till Compilance				
_	_	Injury Severity			Airbag				
5	90	Injury NO APPARENT INJURY		l I	NON DEPLOYED				
		Ejected	Ejection Path			Trapped/Extricated			
		NOT EJECTED NOT EJECTED/NOT AP		PLICABLE		NOT TRAPPED			
		Medical Transport			EMS Agency Identifier	EMS Run #			
		NOT TRANSPORTED			3,				
				1	Time of Death				
	Γιοσριται				Date of Death				
		Distracte	ed By Source			1			
		Distracted By OTHER	R DISTRACTION (ANIMA	L, F	OOD, GROOMING)				
		Distracted By Action	•	-	•				
		OTHER ACTION (LOOKIN	IG AWAY FROM TASK E	TC)					

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		Non Motoris	Striking Unit #	Location							
		Prior Action	•	·							
		Action									
	_										
	INDIVIDUAL										
UNIT	9										
n	≦										
	Z										
		Action Other							To/From School		
	,	Drug & Alcoho	Suspected Alco	hol Use		Suspected Drug Use NO					
	_	Alcohol Test Given	1.20	Alcohol Te	st Tyne			Alcohol Test Results			
		TEST REFUSED		/ lloorlor ro	эс турс			Alcohol Test Results			
		Drug Test Given		Drug Test	Туре	Drug Test Results		3			
		TEST NOT GIVEN	N .								
01	90	Drug Type									
	J										
		Individual Condition									
		UNDER THE INFI	LUENCE OF MI	EDICATIONS/D	RUG	SS/ ALCOHOL					
		P-1-C									
	,	Violations UTC Number	Issue To?	Statuta Number		Description					
	TOTC Number Issue To? Statute Number 346.63(1)(a)			OPERATING WHILE UNDER THE INFLUENCE							
	UTC Number Issue To? Statute Number 344.62(2)			Description OPERATE MOTOR VEHICLE W/O PROOF OF INSURANCE							
			001	()							
Property Owner Address Address											
01	Individual MARCIA C CONNORS (608) 434-2857					S4571 BARREAU RD LA VALLE, WI 53941 , US					
PROP OWNER											
	Fixe	ed Objects Stru									
	5		truck Object					Structure Number	Damage Tag Number 0000		
O1 FENCE									0000		