

6TL0D2XVN3

20-06018

# 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>20-06018</b>	Investigating Officer/Deputy <b>DEPUTY C. GALLAGHER</b>	
Crash Date <b>06/22/2020</b>		Crash Time <b>07:41 PM</b>	Date Arrived <b>06/27/2020</b>	Time Arrived <b>12:31 AM</b>	
Date Notified <b>06/22/2020</b>		Time Notified <b>07:41 PM</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 <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>	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 TRAVELING SB ON CTH PF IN THE AREA OF PAGEL RD. WHILE NEGOTIATING A CURVE, UNIT 1 OBSERVED A COW IN THE ROADWAY. UNIT 1 SWERVED TO MISS THE ANIMAL AND CROSSED INTO THE NB LANE. UNIT 1 STARTED TO SLIDE AND CAME TO REST FACING NB IN THE NB DITCH.

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**Location**

ON CTHPF SB 0.33 MI S OF PAGEL DR IN THE TOWN OF HONEY CREEK IN SAUK COUNTY	Latitude <b>43.365449327</b>	Longitude <b>-89.970255157</b>
	X Coordinate <b>259332.84375</b>	Y Coordinate <b>4805684</b>
	Structure Type <b>NO STRUCTURE</b>	

**Crash Scene**

First Harmful Event <b>DITCH</b>	First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>WET</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>ANIMAL (S) IN ROADWAY</b>		
Weather Condition(s) <b>RAIN</b>		
Animal Type <b>OTHER NON DOMESTICATED</b>	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**

<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 <b>0</b>
	Insurance? <b>YES</b>	Direction Of Travel <b>SOUTHBOUND</b>	<input checked="" type="checkbox"/> <b>Pre CrashTire Mark</b>	Speed Limit <b>55</b>	Total Lanes <b>2</b>
	Most Harmful Event: Collision With <b>DITCH</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>CURVE LEFT</b>		Road Grade <b>DOWNHILL</b>	
	Truck Bus or HazMat <b>NO</b>				

<b>UNIT</b>	<b>Vehicle</b>				
	<b>01</b>	License Plate Number <b>593TXS</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>NM</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>4S3BH675347639251</b>	Make <b>SUBARU</b>	Year <b>2004</b>	Model <b>OUTBACK</b>
	<b>VEHICLE</b>	Color <b>GRN - GREEN</b>	Body Style <b>4H - HATCHBACK 4 DOOR</b>		Bus Use
		Initial Contact Point <b>14 - UNDERCARRIAGE</b>	Vehicle Damage <b>01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 04 - RIGHT SIDE REAR, 05 - RIGHT REAR CORNER, 06 - REAR, 07 - LEFT REAR CORNER, 12 - FRONT</b>		
Extent Of Damage <b>FUNCTIONAL 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>NEGOTIATING CURVE</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
01 01	Owner Name <b>JILLIAN R SCORELLE</b>		Owner Address <b>200 MAIN ST PO BOX/64 LOGANVILLE, WI 53943 , US</b>	
	<b>Sequence Of Events</b>			
01 01	01	Event <b>DITCH</b>		
	02	Event		
	03	Event		
	04	Event		
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>GEICO-CASUALTY-CO</b>		Individual <b>JILLIAN SCORELLE</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>JILLIAN R SCORELLE</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>
	Address <b>200 MAIN ST PO BOX/64 LOGANVILLE, WI 53943 , US</b>		Date of Birth	Race <b>WHITE</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>	
	Helmet Use		Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
	Eye Protection		Helmet Compliance	
01 001	<b>Injury</b>		Airbag	
	Injury Severity <b>NO APPARENT INJURY</b>		<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>	
Hospital		EMS Agency Identifier		
Date of Death		EMS Run #		
Time of Death		Hospital		
<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>		
Distracted By Action <b>NOT DISTRACTED</b>				

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<b>UNIT</b>	<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>					