# **6TL0BGSFG5** 21-06758

### WISCONSIN MOTOR VEHICLE CRASH REPORT

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

|                           |             | Primary Crash Document# |          | / Crash Number<br>758 | Investigating Officer/Deputy DEPUTY D. KROLIKOWSKI |                |                      |  |
|---------------------------|-------------|-------------------------|----------|-----------------------|--|----------------|----------------------|--|
| rash Date<br>7/20/2021    |             | Crash Time<br>01:43 PM  |          | ਗਂved<br>2021         | Time Arrived<br>01:55 PM                           |                |                      |  |
| ate Notified<br>7/20/2021 | Time Notif  | Time Notified           |          | nits                  | Total Injured                                      | Total Kille    | led                  |  |
| On Emergency              | Hit and Run | Lane Clos               | sure     | Work Zone             | Trailer or   | Towed          | Reporting  Threshold |  |
| Government Property       | Activ       | Active School Zone      |          | Bus Related           | Tags   |                |                      |  |
| Reportable                | Crash Typ   | e<br>STANDARD CRAS      | SH)      |                       | Amended  |                | Secondary<br>Crash   |  |
| escription =              | '           |                         |          |                       |  |                |                      |  |
| agram                     |             |                         |          |                       | R  | econstruction  | n By                 |  |
|                           |             |                         |          |                       |  |                |                      |  |
| , <b>T</b>                |             |                         |          |                       |  |                |                      |  |
|                           |             |                         |          |                       | PI   | notos By       |                      |  |
|                           |             |                         |          |                       |  |                |                      |  |
| 4                         | =           |                         |          |                       |  |                |                      |  |
|                           |             | <b>6</b> 2              |          |                       |  | dditional Info | rmation              |  |
|                           |             |                         |          |                       | N N  | ONE            | ninauoi:             |  |
|                           |             |                         |          |                       |  |                |                      |  |
|                           |             |                         | 国运用的     |                       |  |                |                      |  |
|                           |             |                         |          |                       |  |                |                      |  |
|                           |             |                         |          |                       |  |                |                      |  |
|                           |             |                         |          |                       |  |                |                      |  |
|                           |             | * *                     |          |                       |  |                |                      |  |
|                           |             | *                       |          |                       |  |                |                      |  |
|                           |             | *                       |          |                       |  |                |                      |  |
|                           |             | , F <sub>F</sub>        |          |                       |  |                |                      |  |
|                           |             | 1. SI                   |          |                       |  |                |                      |  |
|                           |             | SIN SIN                 |          |                       |  |                |                      |  |
|                           |             | S Lym                   |          |                       |  |                |                      |  |
|                           |             | SIMINE SIMINE           | , do     |                       |  |                |                      |  |
|                           |             | Elyme                   | Aon      |                       |  |                |                      |  |
|                           |             | SIJIILE                 | don R    |                       |  |                |                      |  |
|                           |             | SILYING                 | don Rd   |                       |  |                |                      |  |
|                           |             | SIMIN                   | don Rd   |                       |  |                |                      |  |
|                           |             | SIN SIN                 | don Rd   |                       |  |                |                      |  |
|                           |             | SIAME.                  | - Aon Rd |                       |  |                |                      |  |
|                           |             | SIMILE                  | non Rd   |                       |  |                |                      |  |
|                           |             | SIMILE                  | don Rd   |                       |  |                |                      |  |
|                           |             | SIMILE                  | don Rd   |                       |  |                |                      |  |
|                           |             | SIMILE                  | - Aon Rd |                       |  |                |                      |  |
| I, a sworn law ent        |             |                         |          |                       |  |                |                      |  |

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Crash Date 07/20/2021

Crash Time 01:43 PM

| Location  |                                |       |                             |   |                           |                |                         |            | :                                |
|---|--------------------------------|-------|-----------------------------|---|---------------------------|----------------|-------------------------|------------|----------------------------------|
| ON 13 5 2 LYNDON RD   |                                |       |                             |   | Latitude                  |                |                         | Longitue   | de                               |
| 1068 FT S   |                                |       |                             |   | 43.6318                   | 55373          |                         | -89.864    | 4288901                          |
| OF OAK HILL RD IN THE TOWN OF DELLONA IN SAUK COUNTY                        |                                |       |                             | X Coordinate<br>268938.28125                                |                           |                | Y Coordinate<br>4834972 |            |                                  |
|   |                                |       |                             | Structure Type UTILITY                                      |                           |                |                         | <u> </u>   |                                  |
|   |                                |       |                             |   | 07:2:11                   |                |                         |            |                                  |
| Crash Scene   |                                |       |                             |   |                           |                |                         |            |                                  |
| First Harmful Event   |                                |       |                             |   | FirstHarmfulEventLocation |                |                         |            |                                  |
| DITCH   |                                |       |                             | ROADSI  |                           |                |                         |            |                                  |
| Manner of Collision   |                                |       |                             | Light Con-  |                           |                |                         |            |                                  |
| 00 - NO COLLISION W/VEHICLE IN TRANSPORT                                    |                                |       |                             | DAYLIG  | HT                        |                |                         |            |                                  |
| Road Surface Condition(s)   |                                |       |                             |   | Roadway                   | Factor(s)      |                         |            |                                  |
| DRY   |                                |       |                             |   |                           |                |                         |            |                                  |
| Environment Factor(s)   |                                |       |                             |   | 1                         |                |                         |            |                                  |
| NONE  |                                |       |                             |   | NONE                      |                |                         |            |                                  |
| Weather Condition(s)  |                                |       |                             |   | 1                         |                |                         |            |                                  |
| CLEAR   |                                |       |                             |   |                           |                |                         |            |                                  |
| Animal Type   |                                |       |                             |   | Relation T                | o Trafficwa    | ay                      |            |                                  |
|   |                                |       |                             |   |                           |                | OT ON ROA               | D          |                                  |
| Crash Classification - Location PUBLIC PROPERTY                             |                                |       |                             | Crash Classification - Jurisdiction NO SPECIAL JURISDICTION |                           |                |                         |            |                                  |
| Tribal Land   |                                |       |                             | Access Control Special Study NO CONTROL                     |                           |                |                         |            |                                  |
| Within Interchange Area   | Junction Location              |       |                             | Intersecti  | on Type                   |                |                         |            |                                  |
| NO  | NON-JUNCTION                   |       |                             | NOT AN  | INTERSE                   | CTION          |                         |            |                                  |
| Closure Type  |                                |       | Reas                        | ons for Clos  | sure                      |                |                         |            |                                  |
| FULL CLOSURE  |                                |       |                             |   |                           |                |                         |            |                                  |
| Date Initial Lane/Rd Closed 07/20/2021 Time Initial Lane/Rd Closed 02:10 PM |                                |       | CEMENT, TOW TRUCK, FIRE/EMS |   |                           |                |                         |            |                                  |
| Date All Lanes Open   | Time All Lanes Open            |       | l .                         | Scene Clea  |                           |                |                         |            |                                  |
|   | 07/20/2021 03:00 PM 07/20/2021 |       |                             |   |                           | 04             | 1:37 PM                 |            |                                  |
| Unit Summary =  |                                |       |                             |   |                           |                | _                       |            |                                  |
| Unit Status Vehicle Operating As  |                                |       | erating As C                |   |                           | UnitType       | * 1                     |            |                                  |
| IN TRANSIT D CLASS  |                                |       |                             | AUTOMOBILE Operating As Endorsements                        |                           |                |                         |            |                                  |
| Vehicle Type  |                                |       |                             |   |                           |                | Operating A             | s Endorse  | ments                            |
| PASSENGER CAR   | 17 : /8 #8                     |       |                             |   |                           | 17.17          | ,                       |            | 14.47                            |
| Total Occs  | Train/Bus#Recorded             | Tota  | I# Cita                     | tions Issued  | d .                       | TotalTra       | llers                   | l otal Haz | zMat Types                       |
| 1   | Direction Of Travel            |       |                             |   |                           |                | it                      | TotalLan   |                                  |
| Insurance? UNKNOWN  | NORTHBOUND                     |       | Pre                         | CrashTire<br>Mark   | •                         | Speed Li<br>45 | TTILL                   | 2          | .es                              |
| Most Harmful Event: Collision \   |                                |       | cial Fur                    |   |                           | 40             | Emergency               | -          | nicle I Ise                      |
| UTILITY POLE  | / V 184 4                      |       |                             | IAL FUNC  | TION                      |                | NOT APP                 |            |                                  |
| Traffic Wav   |                                | Trafi | fic Con                     | trol  |                           |                | Traffic Conf            | rolinopera | ative/Missing                    |
| TWO-WAY, NOT DIVIDED  |                                |       | NO CONTROL                  |   |                           | NO             |                         |            |                                  |
| Surface Type  |                                |       | Road Curvature CURVE RIGHT  |   | Road Grade                |                |                         |            |                                  |
| ,   |                                |       | KVE R                       | IGHT  |                           |                | DOWNHIL                 | .L         |                                  |
| Truck Bus or HazMat  NO   |                                |       |                             |   |                           |                |                         |            |                                  |
| Vehicle   |                                |       |                             |   |                           |                |                         |            | SASSISA KASSISA SASISISA SASISIS |
| License Plate Number  |                                | Pla   | te Type                     |   |                           | St             | Country of Is           | suance     |                                  |
| ALU7453   |                                | AU    | T - AL                      | TOMOBI  | LE                        | WI             | UNITED ST               | TATES      |                                  |
| Vehicle Identification Nur  |                                | Mai   |                             |   |                           | Year Model     |                         |            |                                  |
| <b>5</b> 1G2ZM17196414949   | 5                              | I PO  | NTIAC                       | 3   |                           | 2006           | G6                      |            |                                  |

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Crash Date 07/20/2021

Crash Time 01:43 PM

|      |   | Color<br>BLK - BLACK                  |                             |   | lody Style<br>CP - COUPE                 | Bt  | us Use             |  |  |  |
|------|---|---------------------------------------|-----------------------------|---|--|---|--------------------|--|--|--|
|      | щ   | Initial Contact Point                 |                             |   | Vehicle Damage                           |   |                    |  |  |  |
| N    | ᅙ   | 12 - FRONT                            |                             |   |  |   |                    |  |  |  |
| 5    | VEHICLE   | Extent Of Damage DISABLING DAMAGE     |                             | 1                                       | 5 - ALL AREAS                            |   |                    |  |  |  |
|      |   | Towed Due To Damage TOWED DUE TO DISA | RUNG DAMAGE                 |   | ehicle Removed By                        |   |                    |  |  |  |
|      |   | What Driver Was Doing                 | DEING DAMAGE                |   | ehicle Factors                           |   |                    |  |  |  |
|      |   | NEGOTIATING CURVE                     | <u> </u>                    |   | IOT ADDI IOADI E                         |   |                    |  |  |  |
|      |   | Driver Prior Action Other             |                             | Į.                                      | NOT APPLICABLE                           |   |                    |  |  |  |
|      |   | Driver Actions UNKNOWN                |                             |   |  |   |                    |  |  |  |
| _    | VEHICLE   | DIAMACAMA                             |                             |   |  |   |                    |  |  |  |
| N N  | Ĭ   |                                       |                             |   |  |   |                    |  |  |  |
|      | 3   |                                       |                             |   |  |   |                    |  |  |  |
|      |   | OwnerName                             |                             |   | Owner Address                            |   |                    |  |  |  |
| 2    | 10  | ASHLIE ANN CHALLO                     |                             |   | 1858 ELM DR<br>FRIENDSHIP, WI 53934 , US |   |                    |  |  |  |
|      | 9   |                                       |                             |   | razasora, m occo                         | , 55  |                    |  |  |  |
|      |   | Seguence Of Even                      | ts                          |   |  |   |                    |  |  |  |
|      | 5   | Event<br>DITCH                        | ······                      | <del></del>                             | 100=1a(0=1a(0=1a(0=1a(0=1a(0=1a(0=1a(0=1 | <u></u>   |                    |  |  |  |
|      |   | Event                                 |                             |   |  |   |                    |  |  |  |
|      | 8   | TILITY POLE                           |                             |   |  |   |                    |  |  |  |
|      | 8   | Event                                 |                             |   |  |   |                    |  |  |  |
|      | 2   | Event                                 |                             |   |  |   |                    |  |  |  |
|      |   | ndividual                             |                             |   |  |   |                    |  |  |  |
|      |   | Driver                                |                             |   | Citations issued                         | Total Control | Sex                |  |  |  |
|      | 4   | ASHLIE ANN CHALLO                     | NER                         |   | 0  |   | EMALE              |  |  |  |
| _    | Ħ   |                                       |                             |   | Date of Birth                            |   | Race<br>VHITE      |  |  |  |
| EN S | ፭   | Address                               |                             |   | Driver License Number                    |   |                    |  |  |  |
| _    | Address Address 1858 ELM DR FRIENDSHIP, WI 53934 , US |                                       |                             | STATE: WISCONSIN COUNTRY: UNITED STATES |  |   |                    |  |  |  |
|      |   |                                       |                             |   |  |   |                    |  |  |  |
|      | Sai   | On E<br>ety Equipment                 | Duty Crash                  |   | Safety Equipment                         |   |                    |  |  |  |
|      |   | Row                                   | Seat Position               |   | <br>  RESTRAINT USE UNKNO                | OWN   |                    |  |  |  |
|      |   | 01 - FRONT ROW                        | 07 - LEFT                   |   |  |   |                    |  |  |  |
|      |   | Helmet Use                            |                             |   | Helmet Compliance                        |   |                    |  |  |  |
|      |   | Eye Protection                        |                             |   | Tint Compliance                          |   |                    |  |  |  |
| _    | _   | iniur                                 | y Severity                  |   | Airbag                                   |   |                    |  |  |  |
| Σ    | 8   | Injury <sub>SUS</sub>                 | SPECTED SERIOUS I           | NJUR                                    | DEPLOYED-FRONT                           |   |                    |  |  |  |
|      |   | Ejected NOT EJECTED                   | Ejection Path NOT EJECTED/N | OT APPL                                 | ICABLE                                   |   | rapped/Extricated  |  |  |  |
|      |   | Medical Transport                     |                             |   | EMS Agency Identifier                    |   | MS Run#            |  |  |  |
|      |   | EMS AIR                               |                             |   | 6000123                                  |   | Since and Discosin |  |  |  |
|      |   | Hospital UW HEALTH-AMERICA            | AN CENTER                   |   | Date of Death                            |   | Time of Death      |  |  |  |

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Crash Date 07/20/2021

Crash Time 01:43 PM

| To/From School |
|----------------|
| _              |
| Test Results   |
|                |
|                |
|                |
|                |
|                |
|                |

Wisconsin Motor Vehicle Crash

Form DT4000