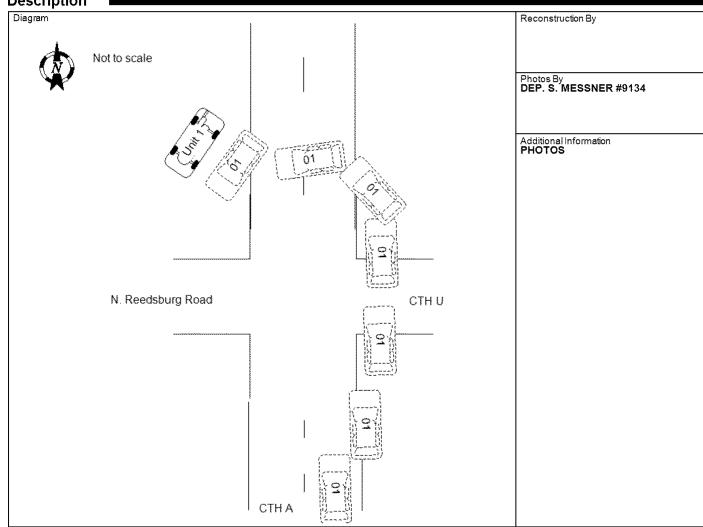
6TL0D1PTLS 21-10965

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

ဌ	Document Number Override		Primary Crash Document#		Agency Crash Number 21-10965		Investigating Officer/Deputy DEPUTY S. MESSNER			
	Crash Date 11/14/2021		Crash Time 01:43 PM		Date Arrived 11/14/2021		Time Arrived 01:48 PM			
1 	Date Notified 11/14/2021		Time Notified 01:45 PM		Total Units 01		Total Injured 01	Total Killed 00		
0			t and Run 🔽 Lane Closu		ure Work Zone		Trailer or	Trailer or Towed		Reporting Threshold
eTL	Government Property		Active Sc	hool Zone	School Bus Related NO		Tags			
	Reportable Crash Type DT4000 (ST/			NDARD CRASH)		Amended	Amended Secondar Crash		Secondary Crash
	Description =									
	Diagram						Re	construction	Rv	



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

ON 11/14/2021, AT APPROXIMATELY 1:43 PM, UNIT 1, A MAROON 2003 PONTIAC VIBE BEARING WISCONSIN REGISTRATION PLATE # AJN7043, WAS BEING DRIVEN BY ITS OWNER, JESINE MOORE. UNIT 1 LEFT THE ROADWAY RIGHT, INTO THE NORTHBOUND DITCH, CROSSED CTH U, RE-ENTERED CTH A, AND CROSSED THE ROADWAY. ONCE UNIT 1 EXITED CTHA ON THE SOUTHBOUND DITCH, UNIT 1 ROLLED TO ITS SIDE. AIRBAGS DID NOT DEPLOY. THE DRIVER WAS ABLE TO REMOVE HERSELF THROUGH THE MOON ROOF. IN SPEAKING TO THE DRIVER, SHE WAS VERBALLY IDENTIFIED AND VERIFIED IDENTITY BY BOOKING PHOTOGRAPHS. THE DRIVER EXPLAINED SHE WAS ON HER CELLPHONE, DROPPED HER CELLPHONE AND WAS ATTEMPTING TO REACH IT WHEN SHE RAN OFF THE ROADWAY. THE DRIVER ADMITTED TO HAVING "BALD" TIRES, UPON REQUEST FOR VALID PROOF OF INSURANCE, THE DRIVER STATED SHE DID NOT HAVE ANY AND "MY BOYFRIEND WAS SUPPOSE TO GET THAT." UPON CHECKING DOT RECORDS, VIA ETIME, IT WAS VERIFIED THE DRIVER HAD A REVOKED DRIVER'S LICENSE AND THE REGISTRATION WAS EXPIRED. CRAIGS TOWING REMOVED THE VEHICLE. THE DRIVER WAS TRANSPORTED TO ST CLARE HOSPITAL BY BARABOO EMS. THE SCENE WAS PHOTOGRAPHED AND UPON INSPECTION THE TIRES HAD VERY LITTLE TREAD. THE DRIVER WAS CITED FOR OPERATING AFTER REVOKED DRIVING STATUS, NO INSURANCE, INATTENTIVE DRIVING, NO INSURANCE AND A WRITTEN WARNING FOR TIRE DEPTH VIOLATION. THE DRIVER WAS ISSUED THE CITATIONS AND WRITTEN WARNING AT THE HOSPITAL

Crash Date 11/14/2021 Crash Time 01:43 PM

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Crash Date 11/14/2021

Crash Time 01:43 PM

Location ====										
ON CTHANB					Latitude			Longitue	de	
505 FT N					43.533651472			-89.738819283		
OF CTHU NB IN THE TOWN OF FAIRFIELD					X Coordinate			Y Coordinate		
IN THE TOWN OF FAIRFIELD					278700.5625 4823723					
					Structure	Гуре		•		
					NO STR	JCTURE				
Crash Scene										
First Harmful Event					FirstHarm	ful Event L	ocation			
DITCH						ER RIGH	T			
Manner of Collision					Light Cond	dition				
00 - NO COLLISION W/VEHICLE IN TRANSPORT						DAYLIGHT				
Road Surface Condition(s)					Roadway	Factor(s)				
DRY										
Environment Factor(s)										
NONE					NONE					
Weather Condition(s)										
CLOUDY										
Animal Type					Relation To Trafficway					
					TRAFFICWAY - NOT ON ROAD					
Crash Classification - Location PUBLIC PROPERTY	1				Crash Classification - Jurisdiction NO SPECIAL JURISDICTION					
Tribal Land					Access Control Special Study PARTIAL CONTROL					
Within Interchange Area	Junction Location			Intersection	ion Type					
YES	INTERSECTION			FOUR-W	AY INTER	SECTIO	N			
Closure Type			Reaso	ons for Clos	Closure					
LANE CLOSURE										
Date Initial Lane/Rd Closed 11/14/2021	Time Initial Lane/Rd Clos 01:45 PM	sed	LAW	ENFORCE	EMENT, TOW TRUCK, FIRE/EMS					
Date All Lanes Open	Time All Lanes Open		Date Scene Cleared			I	Time Scene Cleared			
11/14/2021	02:25 PM		11/14	/2021		02	2:25 PM			
Unit Summary										
Unit Status		I		erating As C	lassification		UnitType			
IN TRANSIT		D CL	D CLASS					AUTOMOBILE Operating As Endorsements		
Vehicle Type PASSENGER CAR							Operating A	s Endorse	ments	
Total Occs	Train/Bus#Recorded	Total	# Citat	ions Issued		Total Trai	lers	TotalHaz	Mat Types	
1		4				0		0		
Insurance?	Direction Of Travel		Pre	CrashTire		Speed Li	mit	TotalLan	es	
NO	NORTHBOUND			Mark		55		2		
Most Harmful Event: Collision DITCH		Special Function NO SPECIAL FUNCTION		TION	NOT APP		y Motor Vehicle Use 'LICABLE			
Traffic Way		Traffi	ic Cont	rol			Traffic Cont	rol Inopera	tive/Missing	
TWO-WAY, NOT DIVIDED		STOP SIGN			NO					
Surface Type BLACKTOP (BITUMINOU	I	Road Curvature STRAIGHT		Road Grade LEVEL						
Truck Bus or HazMat		318	AIGH	•			LEVEL			
NO										
Vehicle	KKEKKEGKEGKEGKEGKEGKEG				ecceccec					
License Plate Number		Plate	е Туре			St	Country of Is:	suance		
AJN7043			AUT - AUTOMOBILE		E WI		UNITED STATES			
Vehicle Identification Nu	mber	Mak	e			Year	Model			
5 5Y2SL628X3Z47170	PO	PONTIAC		2003		VIBE				

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Crash Date 11/14/2021

Crash Time 01:43 PM

		Color		Body Style		Bus Use				
		MAR - MAROON (BURGUNE)Y)	4H - HATCH	BACK 4 D	DOR				
	ш	Initial Contact Point	Vehicle Damage		<u> </u>					
 	#	02 - RIGHT SIDE FRONT	• • • • • • • • • • • • • • • • • • •			7 8 9 10 11				
IN S	¥	Extent Of Damage	15 - ALL AI	REAS			5 12			
⊃	VEHICL	DISABLING DAMAGE	· · · · · · · · · · · · · · · · · · ·				5 4 8 2 1			
		Towed Due To Damage	Vehicle Remo	oved By						
		TOWED DUE TO DISABLING	CRAIGS TOWING							
		What Driver Was Doing	Vehicle Factors							
		GOING STRAIGHT								
		Driver Prior Action Other	NOT APPLICABLE							
		Driver Actions Driver Actions								
	ш	RAN OFF ROADWAY, OTHER CONTRIBUTING ACTION								
⊨	ರ									
N N	EHICI									
–	3									
		Owner Name	Owner Address							
-	-	JESINE MARY MOORE	229 N SUPERIOR AVE # 62							
9	0.1		TOMAH, WI 54660 , US							
		Sequence Of Events	144744744744	verene e e e e e e e e e e e e e e e e e						
	-	Event								
	01	RUN OFF ROADWAY RIGHT								
	62	Event REENTERING ROADWAY								
	03	RUN OFF ROADWAY LEFT								
	8	Event DITCH								
		Individual								
		Driver	Citations is	sued	Sex					
	4	JESINE MARY MOORE	4 FEMALE							
	3		Date of Birt	th	Race WHITE	E				
EN S	NDIVIDUA	A al al un m m								
5	6	Address 229 N SUPERIOR AVE # 62	Driver License Number							
	Z	TOMAH, WI 54660 , US		STATE: WISCONSIN COUNTRY: UNITED STATES						
		On Duty Cr	Safety Equipment							
	Safety Equipment									
		Row Seat Position		SHOULDER & LAP BELT						
		01 - FRONT ROW	07 - LEFT							
		HelmetUse		Helmet Compliance						
			,							
		Eye Protection	Tint Compliance							
9	5	Injury Seve	Airbag							
0	8	injury suspec	NON DEPLOYED							
		· .	ection Path				Trapped/Extricated			
			OT EJECTED/NOT API				NOT TRAPPED			
		Medical Transport	1 ,			EMS Run#				
		EMS GROUND	6000368							
		Hospital	Date of Dea	of Death Time of Death						
		ST CLARE HOSP								

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	Distracted B	Distracted By S HAND-HELD	ource MOBILE PHONE							
		Distracted By Action MANUALLY OPERATING(TEXTING, DIALING, PLAYING GAME ETC)								
	Non Motoris	Striking Unit#	Location							
	Prior Action									
	Action									
	Action Other						To/From School			
	Drug & Alcoho	Suspected Alco	phol Use	Suspected Drug Use NO						
	Alcohol Test Given		Alcohol Test Type	•		Alcohol Test Results				
	Drug Test Given TEST NOT GIVE	EN .	Drug Test Type		Drug Test Results	3				
2 g	Drug Type									
	Individual Condition									
	CONFUSED OR		NON LUCID)							
	 		,							
5	UTC Number	Issue To?	Statute Number 343.44(1)(b)	Description OPERATING WHILE	REVOKED (FOR	RFEITURE)				
22	UTC Number BG024310	Issue To?	Statute Number 341.04(1)	Description NON-REGISTRATIO	N OF AUTO, ET	c				
8	UTC Number BG024311	Issue To?	Statute Number 346.89(1)	Description INATTENTIVE DRIV	/ING					
8	UTC Number BG024312	Issue To?	Statute Number 344.62(1)	Description OPERATE MOTOR	VEHICLE W/O IN	SURANCE				

Form DT4000