

6TL0DBC3CZ  
21-11879

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 21-11879		Investigating Officer/Deputy DEPUTY B. TRAGER	
Crash Date 12/11/2021		Crash Time 12:10 AM		Date Arrived 12/11/2021		Time Arrived 12:29 AM	
Date Notified 12/11/2021		Time Notified 12:11 AM		Total Units 01		Total Injured 00	Total Killed 00
<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 NO		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

Description

<p>Diagram</p> <p style="text-align: center;">Between County Hwy A and the Sauk County Line</p>	Reconstruction By
	Photos By DEPUTY B. TRAGER #9155
	Additional Information PHOTOS

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

ON DECEMBER 11, 2021 AT APPROXIMATELY 0011 UNIT 1 WAS TRAVELING EAST BOUND ON HWY 12/16 BETWEEN COUNTY HWY A AND THE SAUK COUNTY. UNIT 1 WENT OFF THE ROADWAY DUE TO WEATHER CONDITIONS. UNIT 1 ROLLED ONTO ITS RIGHT SIDE. UPON ARRIVING ON SCENE NO OCCUPANTS WERE FOUND. AT APPROXIMATELY 0300 THE OWNER/OPERATOR CONTACTED ME VIA PHONE. SHE ADMITTED TO OPERATING THE VEHICLE. THE OPERATOR TOLD ME THAT SHE LOST CONTROL DUE TO THE ROAD CONDITIONS.

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## Location

ON USH12 EB 0.36 MI N OF BREW FARM RD/ CTHA EB IN THE CITY OF WISCONSIN DELLS IN SAUK COUNTY	Latitude 43.637300418	Longitude -89.795477404
	X Coordinate 274509.875	Y Coordinate 4835387.5
	Structure Type	

## Crash Scene

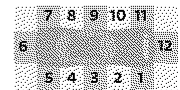
First Harmful Event <b>DITCH</b>	First Harmful Event Location <b>OUTSIDE RIGHT-OF-WAY (TRAFFICWAY)</b>	
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DARK/UNLIT</b>	
Road Surface Condition(s) <b>WET, SNOW, SLUSH, ICE</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>WEATHER CONDITIONS</b>		
Weather Condition(s) <b>RAIN, SNOW, FREEZING RAIN OR FREEZING DRIZZLE</b>		
Animal Type	Relation To Trafficway <b>TRAFFICWAY - NOT 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>(SPORT) UTILITY VEHICLE</b>	Operating As Endorsements			
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>2</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>YES</b>	Direction Of Travel <b>EASTBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit	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>STRAIGHT</b>		Road Grade <b>UPHILL</b>	
	Truck Bus or HazMat <b>NO</b>				

## Vehicle

<b>UNIT</b>	<b>VEHICLE</b>	License Plate Number <b>ANM1946</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>5TDZT34A93S203926</b>	Make <b>TOYOTA</b>	Year <b>2003</b>	Model <b>SEQUOIA</b>
		Color <b>WHI - WHITE</b>	Body Style <b>UT - SPORT UTILITY VEHICLE</b>		Bus Use
		Initial Contact Point <b>11 - LEFT FRONT CORNER</b>	Vehicle Damage <b>10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT</b>		
		Extent Of Damage <b>DISABLING DAMAGE</b>			



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UNIT VEHICLE	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>PLATTS WRECKER</b>	
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>SPEED TOO FAST/COND</b>			
01 01	Owner Name <b>NICOLE MARIE ARNESON (608) 352-1004</b>		Owner Address <b>1421 CANYON DR # 16 JANESVILLE, WI 53546 , 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>PROGRESSIVE-CASUALTY-INS-CO</b>		Individual <b>NICOLE ARNESON</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>NICOLE MARIE ARNESON (608) 352-1004</b>		Citations Issued <b>2</b>	Sex <b>FEMALE</b>
	Address <b>1421 CANYON DR # 16 JANESVILLE, WI 53546 , US</b>		Date of Birth [REDACTED]	Race <b>WHITE</b>
	Driver License Number [REDACTED]		<b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01 001	<b>Safety Equipment</b>		On Duty Crash	
	Safety Equipment		<b>SHOULDER &amp; LAP BELT</b>	
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>		
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	Airbag <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>		EMS Agency Identifier		EMS Run #
Hospital		Date of Death		Time of Death
<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 NO	Suspected Drug Use NO		
	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>NOT OBSERVED</b>					
	<b>Violations</b>					
<b>01</b>	<b>001</b>	UTC Number	Issue To?	Statute Number	Description	
		<b>BG112824</b>	<b>001</b>	<b>346.70(1)</b>	<b>FAILURE OF OPERATOR TO NOTIFY POLICE OF ACCIDENT</b>	
<b>02</b>	<b>01</b>	UTC Number	Issue To?	Statute Number	Description	
		<b>BG112825</b>	<b>001</b>	<b>346.57(3)</b>	<b>DRIVING TOO FAST FOR CONDITIONS</b>	