

6TL0DCL4GN
21-11469

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 6TL0D0GSHF		Primary Crash Document#	Agency Crash Number 21-11469	Investigating Officer/Deputy DEPUTY S. FINNEGAN	
Crash Date 11/30/2021		Crash Time 09:55 AM	Date Arrived 11/30/2021	Time Arrived 10:15 AM	
Date Notified 11/30/2021		Time Notified 09:56 AM	Total Units 02	Total Injured 01	Total Killed 02
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input checked="" 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 checked="" type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

<p>Diagram</p>	Reconstruction By SAUK COUNTY SHERIFF
	Photos By LUBER
	Additional Information FATAL CRASH SUPPLEMENT, PHOTOS, RECONSTRUCTION

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

UNIT 1 WAS E/B ON STH 33. UNIT 2 WAS W/B ON STH 33. UNITS COLLIDED NEARLY HEAD ON IN THE E/B LANE.

MORE ACCURATE INFORMATION

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Location

ON STH33 EB 58 FT N OF GREEN VALLEY DR IN THE TOWN OF LA VALLE IN SAUK COUNTY	Latitude 43.613666046	Longitude -90.139903815
	X Coordinate 246626.96875	Y Coordinate 4833756.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT		First Harmful Event Location ON ROADWAY	
Manner of Collision 02 - FRONT TO FRONT		Light Condition DAYLIGHT	
Road Surface Condition(s) DRY		Roadway Factor(s) NONE	
Environment Factor(s) NONE			
Weather Condition(s) CLEAR			
Animal Type		Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY		Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land		Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION	
Closure Type FULL CLOSURE		Reasons for Closure	
Date Initial Lane/Rd Closed 11/30/2021	Time Initial Lane/Rd Closed 09:56 AM	LAW ENFORCEMENT, FIRE/EMS, MED FLIGHT	
Date All Lanes Open 11/30/2021	Time All Lanes Open 01:06 PM	Date Scene Cleared 11/30/2021	Time Scene Cleared

Unit Summary

UNIT	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR	Operating As Endorsements			
	Total Occs 2	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature CURVE RIGHT		Road Grade LEVEL
	Truck Bus or HazMat NO				

Vehicle

License Plate Number 385UVC	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
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01 UNIT VEHICLE	Vehicle Identification Number	3FAHP0HA2BR320263	Make	FORD	Year	2011	Model	FUSION SE
	Color	GRY - GRAY	Body Style	4D - 4DR	Bus Use			
	Initial Contact Point	12 - FRONT	Vehicle Damage	01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT C				
	Extent Of Damage	DISABLING DAMAGE	Towed Due To Damage	TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By	SHIELDS TOWING	
	What Driver Was Doing	NEGOTIATING CURVE	Driver Prior Action Other	NOT APPLICABLE				
01 UNIT VEHICLE	Driver Actions	OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER						
	Owner Name	TRICIA NICOLE WOLF (608) 479-2962	Owner Address	S1494 COUNTY HIGHWAY WW HILLSBORO, WI 54634 , US				
Sequence Of Events								
01 UNIT VEHICLE	Event	MOTOR VEH IN TRANSPORT						
	Event							
	Event							
	Event							
01 UNIT INDIVIDUAL	Policy Holder							
	Insurance Company	ERIE-INS-CO		Individual	TRICIA WOLF			
01 UNIT INDIVIDUAL	Individual							
	Driver	TRICIA NICOLE WOLF (608) 479-2962		Citations Issued	0		Sex	FEMALE
				Date of Birth	[REDACTED]		Race	WHITE
	Address	S1494 COUNTY HIGHWAY WW HILLSBORO, WI 54634 , US		Driver License Number	[REDACTED]			
01 UNIT INDIVIDUAL	Safety Equipment							
	On Duty Crash			Safety Equipment				
	Row	01 - FRONT ROW		Seat Position	07 - LEFT			
	SHOULDER & LAP BELT							
Helmet Use			Helmet Compliance					
Eye Protection			Tint Compliance					
01 UNIT INDIVIDUAL	Injury			Injury Severity	SUSPECTED SERIOUS INJUR		Airbag	DEPLOYED-COMBINATION
	Ejected	NOT EJECTED		Ejection Path	NOT EJECTED/NOT APPLICABLE		Trapped/Extricated	NOT TRAPPED

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UNIT INDIVIDUAL	Medical Transport EMS AIR		EMS Agency Identifier 6001285	EMS Run#	
	Hospital UW HEALTH-AMERICAN CENTER		Date of Death	Time of Death	
	Distracted By Source Distracted By PASSENGER/OTHER NON-MOTORIST				
	Distracted By Action OTHER ACTION (LOOKING AWAY FROM TASK ETC)				
	Non Motorist		Striking Unit#	Location	
	Prior Action				
	Action				
	Action Other			To/From School	
	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO	
	Alcohol Test Given TEST GIVEN		Alcohol Test Type BLOOD	Alcohol Test Results UNKNOWN	
Drug Test Given TEST GIVEN		Drug Test Type BLOOD	Drug Test Results UNKNOWN		
Drug Type					
Individual Condition APPEARED NORMAL					
UNIT INDIVIDUAL	Individual				
	Passenger LAURYN E WOLF		Citations Issued 0	Sex FEMALE	
	Date of Birth [REDACTED]		Race WHITE		
	Address S1494 COUNTY HIGHWAY WW HILLSBORO, WI 54634 , US		Driver License Number		
UNIT INDIVIDUAL	Safety Equipment		On Duty Crash		
	Safety Equipment CHILD RESTRAINT SYSTEM - FORWARD FACING				
	Row 02 - SECOND ROW	Seat Position 07 - LEFT			
	Helmet Use		Helmet Compliance		
	Eye Protection		Tint Compliance		
UNIT INDIVIDUAL	Injury		Injury Severity FATAL INJURY		
	Airbag DEPLOYED-SIDE				
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED		
Medical Transport EMS AIR		EMS Agency Identifier 6001285	EMS Run#		

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UNIT 01 INDIVIDUAL 002
Hospital: UW HEALTH-AMERICAN CENTER
Date of Death: 12/03/2021
Time of Death: 10:45
Distracted By: Distracted By Source
Distracted By Action:
Non Motorist: Striking Unit #, Location
Prior Action:
Action:
Action Other: To/From School
Drug & Alcohol: Suspected Alcohol Use NO, Suspected Drug Use NO
Alcohol Test Given: TEST NOT GIVEN, Alcohol Test Type, Alcohol Test Results
Drug Test Given: TEST NOT GIVEN, Drug Test Type, Drug Test Results
Drug Type:
Individual Condition: APPEARED NORMAL

Unit Summary

UNIT 02
Unit Status: IN TRANSIT, Vehicle Operating As Classification: D CLASS, Unit Type: AUTOMOBILE
Vehicle Type: (SPORT) UTILITY VEHICLE, Operating As Endorsements:
Total Occs: 1, Train/Bus # Recorded, Total # Citations Issued: 0, Total Trailers: 0, Total HazMat Types: 0
Insurance?: UNKNOWN, Direction Of Travel: WESTBOUND, Pre Crash Tire Mark: [checked], Speed Limit: 55, Total Lanes: 2
Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT, Special Function: NO SPECIAL FUNCTION, Emergency Motor Vehicle Use: NOT APPLICABLE
Traffic Way: TWO-WAY, NOT DIVIDED, Traffic Control: NO CONTROL, Traffic Control Inoperative/Missing: NO
Surface Type: BLACKTOP (BITUMINOUS), Road Curvature: CURVE LEFT, Road Grade: LEVEL
Truck Bus or HazMat: NO

Vehicle

UNIT 02 002
License Plate Number: FW4103, Plate Type: AUT - AUTOMOBILE, St: WI, Country of Issuance: UNITED STATES
Vehicle Identification Number: 1GNEVGKW7LJ211252, Make: CHEVROLET, Year: 2020, Model: TRAVERSE
Color: RED - RED, Body Style: UT - SPORT UTILITY VEHICLE, Bus Use:

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UNIT VEHICLE	Initial Contact Point 01 - RIGHT FRONT CORNER	Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT C			
	Extent Of Damage DISABLING DAMAGE				
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By STEVES AUTO SERVICE			
	What Driver Was Doing NEGOTIATING CURVE	Vehicle Factors NOT APPLICABLE			
UNIT VEHICLE	Driver Prior Action Other				
	Driver Actions FAILED TO KEEP IN DESIGNATED LANE				
	Owner Name WILLIAM HENRY JOHNSON	Owner Address 29164 KIRKWOOD AVE WILTON, WI 54670 , US			
02	Sequence Of Events				
01	Event CROSS CENTERLINE				
02	Event MOTOR VEH IN TRANSPORT				
03	Event				
04	Event				
UNIT INDIVIDUAL	Individual				
	Driver WILLIAM HENRY JOHNSON	Citations Issued 0	Sex MALE		
		Date of Birth [REDACTED]	Race WHITE		
	Address 29164 KIRKWOOD AVE WILTON, WI 54670 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES			
UNIT INDIVIDUAL	Safety Equipment		On Duty Crash		
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	Safety Equipment SHOULDER & LAP BELT		
	Helmet Use		Helmet Compliance		
	Eye Protection		Tint Compliance		
	02 003	Injury		Injury Severity FATAL INJURY	
		Airbag DEPLOYED-COMBINATION			
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED	
Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #		
Hospital		Date of Death 11/30/2021	Time of Death		
Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)			

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UNIT INDIVIDUAL 02 003	Distracted By Action NOT DISTRACTED		
	Non Motorist	Striking Unit #	Location
	Prior Action		
	Action		
	Action Other		To/From School
	Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use NO
	Alcohol Test Given TEST GIVEN	Alcohol Test Type BLOOD	Alcohol Test Results UNKNOWN
	Drug Test Given TEST GIVEN	Drug Test Type BLOOD	Drug Test Results UNKNOWN
	Drug Type		
	Individual Condition OTHER		