

6TL0D0GSHQ
22-00013

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 22-00013		Investigating Officer/Deputy DEPUTY S. FINNEGAN	
Crash Date 01/01/2022		Crash Time 03:00 PM		Date Arrived 01/01/2022		Time Arrived 03:34 PM	
Date Notified 01/01/2022		Time Notified 03:06 PM		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>	Reconstruction By
	Photos By
	Additional Information NONE

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

UNIT 1 WAS E/B ON CTH W WHEN DRIVER LOST CONTROL ON THE ICY ROAD AND WENT IN THE DITCH WHERE SHE STRUCK GUIDE WIRES TO A POLE. MIKES TOWING WAS CALLED TO REMOVE THE VEHICLE FROM THE DITCH AND THE DRIVER DROVE THE CAR AWAY.

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Location

ON CTHW WB 641 FT E OF BLUFF RD IN THE TOWN OF GREENFIELD IN SAUK COUNTY	Latitude 43.462229456	Longitude -89.66825334
	X Coordinate 284148.125	Y Coordinate 4815605.5
	Structure Type NO STRUCTURE	

Crash Scene

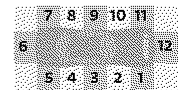
First Harmful Event DITCH	First Harmful Event Location SHOULDER RIGHT	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAYLIGHT	
Road Surface Condition(s) SNOW, ICE	Roadway Factor(s) ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)	
Environment Factor(s) NONE		
Weather Condition(s) CLOUDY		
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

Unit Summary

UNIT 01	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 WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With DITCH	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 STRAIGHT	Road Grade LEVEL		
	Truck Bus or HazMat NO				

Vehicle

UNIT VEHICLE 01	License Plate Number FH4256	Plate Type AUT - AUTOMOBILE	St IN	Country of Issuance UNITED STATES
	Vehicle Identification Number JTDKB20U587772532	Make TOYOTA	Year 2008	Model PRI
	Color BLU - BLUE	Body Style HB - HATCHBACK	Bus Use	
	Initial Contact Point 12 - FRONT	Vehicle Damage		
	Extent Of Damage FUNCTIONAL DAMAGE	12 - FRONT, 14 - UNDERCARRIAGE		



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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By MIKES TOWING	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions SPEED TOO FAST/COND, FAILURE TO CONTROL			
01 01	Owner Name MELODY GRACE GODDARD (574) 214-8118		Owner Address 2006 ROYS AVE ELKHART, IN 46516 3444, US	
	Sequence Of Events			
01 01	01	Event RUN OFF ROADWAY RIGHT		
	02	Event DITCH		
	03	Event OTHER POST, POLE OR SUPPORT		
	04	Event		
UNIT	Policy Holder			
	Insurance Company STATE-FARM-GENERAL-INS-CO		Individual MELODY GODDARD	
UNIT INDIVIDUAL	Individual			
	Driver MELODY GRACE GODDARD (574) 214-8118		Citations Issued 0	Sex FEMALE
	Address 2006 ROYS AVE ELKHART, IN 46516 3444, US		Date of Birth [REDACTED]	Race WHITE
			Driver License Number [REDACTED] STATE: INDIANA COUNTRY: UNITED STATES	
01 001	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	
	Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
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		Time of Death
Distracted By		Distracted By Source		
Distracted By Action UNKNOWN				

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UNIT	INDIVIDUAL	Non Motorist		Striking Unit#	Location		
		Prior Action					
		Action					
		Action Other				To/From School	
01	001	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					
		Individual					
		Passenger BRIANNA RAE DENSMORE (574) 404-3084			Citations Issued 0	Sex FEMALE	
		Address 58088 VERNON DR SOUTH BEND, IN 46619 9611, US			Date of Birth [REDACTED]	Race	
		Driver License Number STATE: INDIANA COUNTRY: UNITED STATES					
		Safety Equipment		On Duty Crash	Safety Equipment		
Row 01 - FRONT ROW	Seat Position 09 - RIGHT	SHOULDER & LAP BELT					
Helmet Use		Helmet Compliance					
Eye Protection		Tint Compliance					
01	002	Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED		
		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		Time of Death	
		Distracted By					
		Distracted By Source					
Distracted By Action							
Non Motorist		Striking Unit#	Location				

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UNIT INDIVIDUAL 01 002	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		