6TL0C884HM 22-00731

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 01/24/2022

Document Number Override	Primary Crash	Document#	Agend	cy Crash Number	Investigating	Officer/Dep	uty	
	ash Date Crash Time		22-00731		DEPUTY T. SUTHERLAND			
Crash Date 01/24/2022			- 1	Date Arrived 01/24/2022		Time Arrived 07:11 AM		
Date Notified	Time Notified 06:30 AM		Total	Jnits	Total Injured		Killed	
01/24/2022		01		00	00			
On Emergency	lit and Run	Lane Clo	sure Work Zone		Trailer or Towed		Reporting Threshold	
Government Property	Active School Zone School Bus Related NO			ol Bus Related	Tags			
Reportable	Crash Type DT4000 (STANDARD CRASH)			Amended Secondar				
Description					•			
	Slide	e-Off				Additional I	Information	
La la sworn law enforcem	ent officer agr	ee that I have	not adde	ed any CJIS data in ti	his report			
I, a sworn law enforcem								
ON 01-24-22 VEHICLE WAS EAST NORTH DITCH LINE BECOMING:	BOLIND ON SCHM	INT ROAD OPER	ATOD LOS	CT CONTROL OF VEHICL	E ON CHOW COVE	-DED DOV <u>DI</u>	MANA AND CLIDE INTO THE	
					E ON SINOW COVI	ERED ROADI	WAY AND SLIDE INTO THE	

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Location —											
ON SCHMIDT RD				Latitude			Longi	tude			
0.32 MI S					43.445734713			-89.942423865			
OF CAMP RD					X Coordinate			Y Coordinate			
IN THE TOWN OF FREEDOM IN SAUK COUNTY					261902.953125 48			521			
	Structure NO STR	Type UCTURE									
Crash Scene				1							
First Harmful Event				Tivat Laws	nful Event Lo						
DITCH)ER LEFT	ocation					
Manner of Collision				Light Cone							
	VEHICLE IN TRANSPORT			DARK/U							
Road Surface Condition(s)				Roadway							
SNOW				,,,,,,	, 4010.(0)						
Environment Factor(s)				1							
WEATHER CONDITION	s			ROAD S	URFACE (CONDITION	(WET, I	CY, SNOW, SLUSH,			
Weather Condition(s)				1							
SNOW											
Animal Type				1	o Trafficwa		_				
	,					OT ON ROA	D				
PUBLIC PROPERTY	Crash Classification - Location PUBLIC PROPERTY						Crash Classification - Jurisdiction NO SPECIAL JURISDICTION				
Tribal Land	「ribal Land					Access Control Special Study NO CONTROL					
Within Interchange Area	Junction Location NON-JUNCTION		Intersection	ion Type I INTERSECTION							
	NON-DONO HON		III AII	111721102	011011						
Unit Summary ■		IV-bi-l- 0-	ti A C	N:66		I					
Unit Status		D CLASS	erating As C	Classification UnitType AUTOMOBILE							
IN TRANSIT Vehicle Type		D CLASS		Operating As Endorsements			a conso into				
PASSENGER CAR						Operating As Endorsements					
Total Occs	Train/Bus#Recorded	Total#Cita	tions Issued	1	Total Trail	ers	Total H	azMat Types			
3		0			0		0				
Insurance?	Direction Of Travel	Pre	CrashTire		Speed Lin	imit Total L		nes			
YES	EASTBOUND		Mark		55	2					
Most Harmful Event: Collision	on With	SpecialFur				Emergency					
DITCH		NO SPEC		TION		NOT APPLICABLE					
Traffic Way			Traffic Control				Traffic Control Inoperative/Missing				
TWO-WAY, NOT DIVIDE	ED		NO CONTROL			NO					
Surface Type		Road Curva				Road Grade					
BLACKTOP (BITUMING)US)	STRAIGH	T			DOWNHIL	L				
Truck Bus or HazMat NO											
Vehicle				*******							
License Plate Number	•	Plate Type			St	Country of Is	suance				
ACE9885	AUT - AL	JTOMOBIL	LE	WI	UNITED STATES						
Vehicle Identification I	Number	Make			Year	Model					
at1BE 32K55U071	4T1BE32K55U071491				2005	CAMRY					
Color SiL - SiLVER (ALU				'		Bus Use					
	· · · · · · · · · · · · · · · · · · ·	4D - 4DR Vehicle Da					I				
្យី 12 - FRONT			-					7 8 9 10 11			
Initial Contact Point 12 - FRONT Extent Of Damage NO DAMAGE		00 - NO	00 - NO DAMAGE					6 12			
NO DAMAGE						5 4 3 2 1					

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		Towed Due To Damage NOT TOWED		Vehicle Removed By STEVES AUTO SERVICE						
		What Driver Was Doing GOING STRAIGHT		Vehicle Factors						
				NOT APPLICABLE						
		Driver Prior Action Other		NOT ALL ELONGE						
LINI	VEHICLE	Driver Actions SPEED TOO FAST/COND, RAN OFF ROADWAY, FAILED TO KEEP IN DESIGNATED LANE								
	5	Owner Name JANET MARIE HANOLD (608) 286-8825		Owner Address E7218 SCHMIDT ROCK SPRINGS,						
		Sequence Of Events		l .						
	5	Event DITCH								
	8	Event								
	8	Event								
	3	Event								
_		Policy Holder								
IN		Insurance Company AMERICAN-FAMILY-INS-C	co	Individual JANET HANOLD						
		Individual								
		Driver JANET MARIE HANOLD		Citations issued Sex 0 FEMALE						
-	NDIVIDUA	(608) 286-8825		Date of Birth	Race WHITE					
ENO.	8	Address E7218 SCHMIDT RD		Driver License Number						
	Z	ROCK SPRINGS, WI 5396	1 , US	STATE: WISCONSIN COUNTRY: UNITED STATES						
	_	On Duty	Crash	Safety Equipment						
	Sai	fety Equipment		SHOULDER & LAP BELT						
		Row 01 - FRONT ROW	Seat Position 07 - LEFT							
		HelmetUse		Heimet Compliance						
		Eye Protection		Tint Compliance						
5	8	injury no api	Injury Severity Airbag NO APPARENT INJURY NON DEPLOYED							
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APF	PLICABLE		Trapped/Extricated NOT TRAPPED				
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier	•	EMS Run#				
		Hospital		Date of Death		Time of Death				
		Distracte	ed By Source							
		Distracted By NOT A	PPLICABLE (NOT DISTRA	ACTED)						
		Distracted By Action NOT DISTRACTED								

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

		Striking Non Motorist	Unit#	Location					
		Prior Action							
		Action							
	A								
TINO	INDIVIDUAL								
ר	Š								
		Action Other						To/From School	
	1	Drug & Alcohol NO	ted Alcohol L	Jse	Suspected Drug Use NO				
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	<u>}</u>		Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results			
01	60	Drug Type							
	9	Individual Condition							
		APPEARED NORMAL							
		 Individual							
		Passenger			Citations Issued	Sex			
	M	ELLIOT AB BECKER-BROOKS (608) 286-8825		Date of Birth	MALE Race				
LINO	ď								
5	INDIVIDUA	Address E7218 SCHMIDT RD ROCK SPRINGS, WI 53961 , US			Driver License Number				
	Sal	On Duty Cety Equipment EMT/F	Crash IRST-RESI	PONDER	Safety Equipment				
		Row Seat Position 01 - FRONT ROW 09 - RIGHT			SHOULDER & LAP BELT				
		HelmetUse		Helmet Compliance					
		Eye Protection			Tint Compliance				
01	700	Injury Severity NO APPARENT INJURY			Airbag NON DEPLOYED				
		Ejected NOT EJECTED	Ejection Pa				Trapped/Extricated		
		Medical Transport	HOT LUL	CILD/NOT ALL	EMS Agency Identifier		NOT TRAPPED EMS Run#		
		NOT TRANSPORTED Hospital			Date of Death		Time of Death		
		Distract	ed By Source)					
		Distracted By Distracted By Action	-						
			11-4	I a a a star					
		Non Motorist Striking	UNIT#	Location					

Crash Date 01/24/2022 Crash Time 06:25 AM

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Crash Date 01/24/2022

		Prior Action										
		Action										
	J											
TINO	3											
ź	NDIVIDUAL											
		Action Other						To/From School				
								TOAT TOAT SCHOOL				
	1	Drug & Alcohol NO	ed Alcohol C		Suspected Drug Use NO							
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	1		Alcohol Test Results					
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results						
٤	88	Drug Type		'		•						
		Individual Condition										
		APPEARED NORMAL										
		ndiwdusi										
		Passenger ELLIOT AB BECKER-BROOKS			Citations Issued	Sex						
	Z	(608) 286-8825			0 Date of Birth	MALE Race						
FNS	9	Adding			Driver License Number							
5	INDIVIDUAL				Dilyer License Multiper							
	Sai	On Duty lety Equipment	Crash		Safety Equipment							
		Row Seat Position 01 - FRONT ROW 07 - LEFT			SHOULDER & LAP BELT							
		Helmet Use		Helmet Compliance								
		Eye Protection			TintCompliance							
2	g	Injury Severity Injury NO APPARENT INJURY			Airbag							
	•	Ejected NO API	Ejection Pa		NON DEPLOYED Trapped/Extricated							
		NOT EJECTED	NOT EJE	CTED/NOT APPL			NOT TRAPPED					
		Medical Transport NOT TRANSPORTED			EMS Agency Identifier		EMS Run#					
		Hospital			Date of Death Time of Death							
		Distracted By Distracte	ed By Source	•	1							
		Distracted By Action										
		l Non Motorist	Unit#	Location								
		PriorAction										

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LIND	INDIVIDUAL	Action					
		Action Other					To/From School
	Ĺ	Drug & Alcohol NO	d Alcohol Use	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	3	
9	003	Drug Type	·				
		Individual Condition					
		APPEARED NORMAL					