

6TL0D94289
SC22-00606

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		Investigating Officer/Deputy DEPUTY M. PETERSON	
Crash Date 01/20/2022		Crash Time 99:99		Date Arrived 01/20/2022		Time Arrived 11:45 PM	
Date Notified 01/20/2022		Time Notified 11:18 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 type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

Description

<p>Diagram</p>	Reconstruction By NONE
	Photos By NONE
	Additional Information PHOTOS, RECONSTRUCTION

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

NON-REPORTABLE SLIDE OFF

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Location

ON STH154 EB 269 FT W OF DURST RD IN THE TOWN OF WASHINGTON IN SAUK COUNTY	Latitude 43.392893896	Longitude -90.186686797
	X Coordinate 241911.84375	Y Coordinate 4809380
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event DITCH	First Harmful Event Location ROADSIDE	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DARK/UNLIT	
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

Unit Summary

UNIT	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 EASTBOUND	<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 CURVE RIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO				

Vehicle

UNIT	VEHICLE	License Plate Number 705VJE	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
		Vehicle Identification Number 5TDBK3EH1BS053390	Make TOYOTA	Year 2011	Model HIGHLANDER	
		Color BLK - BLACK	Body Style UT - SPORT UTILITY VEHICLE		Bus Use	
		Initial Contact Point 00 - NON-COLLISION	Vehicle Damage			
		Extent Of Damage NO DAMAGE	00 - NO DAMAGE			



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UNIT VEHICLE	Towed Due To Damage TOWED BUT NOT DUE TO DISABLING DAMAG		Vehicle Removed By	
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions UNKNOWN			
01	Owner Name JONES J JENNIFER		Owner Address 401 FURNACE ST LA VALLE, WI 53941 , US	
	Sequence Of Events			
01	Event RUN OFF ROADWAY RIGHT			
	Event			
	Event			
	Event			
02	Event			
	Event			
	Event			
	Event			
03	Event			
	Event			
	Event			
	Event			
04	Event			
	Event			
	Event			
	Event			
UNIT INDIVIDUAL	Unknown		Citations Issued 0	Sex
			Date of Birth	Race
	Address		Driver License Number	
01	Safety Equipment		On Duty Crash	
			Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	RESTRAINT USE UNKNOWN	
	Helmet Use		Helmet Compliance	
Eye Protection		Tint Compliance		
001	Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
	Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
	Medical Transport UNKNOWN		EMS Agency Identifier	EMS Run #
	Hospital		Date of Death	Time of Death
01	Distracted By		Distracted By Source	
	Distracted By Action			
Non Motorist	Striking Unit #		Location	

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UNIT	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 NOT OBSERVED			
	01	001		