6TL0BGSFH7 22-01600

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

						(606) 336-469	
Document Number Override	Primary Crash Document#	Agen 22-0	cy Crash Number 1600		tigating Officer/Deputy UTY D. KROLIKOWSKI		
Crash Date 02/19/2022	Crash Time 06:09 AM	I .	Arrived 9/2022	Time Arrived 06:39 AM			
Date Notified 02/19/2022	Time Notified 06:09 AM	Total 01	Units	Total Injured 00	Total Kill	ed	
On Emergency Hi	t and Run Lane	Closure	Work Zone	Trailer or Towed		Reporting Threshold	
Government Property	Active School Zone	Scho NO	ol Bus Related	Tags		•	
Reportable	Crash Type DT4000 (STANDARD CF	RASH)		Amended		Secondary Crash	
Description Diagram	1				construction		
	HWY33				otos By	ormation	
I, a sworn law enforcement vehicle was negotiating a Le conditions. The vehicle's 2 Li	EFT HAND CURVE ON HWY 33	WHEN IT LEF	T THE ROADWAY TO TH	IE RIGHT DUE TO DRI\	/ING TOO F	FAST FOR THE ROAD	

Form DT4000

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Lo	cation								
	N STH33 EB				Latitude			Longi	tude
0.39 MI N					43.492938033 -89.633893963			33893963	
OF MAN MOUND RD					X Coordinate Y Coordinate			rdinate	
IN THE TOWN OF GREENFIELD IN SAUK COUNTY					287035.75 4818927.5				
						Structure Type NO STRUCTURE			
Cr	ash Scene 💳								
	st Harmful Event				First Harm	nful Event Lo	ocation		
	TCH				ON ROADWAY				
Ma	anner of Collision				Light Condition				
00	- NO COLLISION W/VE	HICLE IN TRANSPORT			DAWN				
Ro	oad Surface Condition(s)				Roadway Factor(s)				
IC	E								
Er	vironment Factor(s)				1				
N	ONE				NONE				
W	eather Condition(s)				1				
CI	LEAR								
Ar	nimal Type				1	o Trafficwa	-		
-						CWAY - OI			
	ash Classification - Location JBLIC PROPERTY	•			Crash Classification - Jurisdiction NO SPECIAL JURISDICTION				
Tri	balLand				Access Control Special Study NO CONTROL				
Within Interchange Area Junction Location Intersection NO NON-JUNCTION NOT AN				on Type INTERSECTION					
		NON-OONC HON		INOT AIR	MILIOL	CHOR			
	nit Summary 💻 nit Status		I Vahiala On	aratina A a C	lassification		1 1 it T		
			D CLASS	_	Classification UnitType AUTOMOBILE				
	N TRANSIT D CLASS /ehicle Type				Operating As Endorsements				
	PORT) UTILITY VEHICI	LE					Operating As Endoisements		
	etal Occs	Train/Bus#Recorded	Total#Cita	tions Issued	1	Total Trail	ers	TotalH	azMat Types
1			3		0 Speed Lim		0 mit Total Lanes		
Ins	surance?	Direction Of Travel	Pre	CrashTire					anes
N	0	EASTBOUND			55		2		
М	ost Harmful Event: Collision	With	Special Fu		CTION		Emergency Motor Vehicle Use NOT APPLICABLE		
DI	TCH		NO SPEC	IAL FUNC					
	affic Way		1	Traffic Control NO CONTROL			Traffic Control Inoperative/Missing		
	VO-WAY, NOT DIVIDED		NO CONT				NO		
	иfасе Туре		Road Curv				Road Grade		
	LACKTOP (BITUMINOU	S)	CURVE L	CURVE LEFT			LEVEL		
Tri NO	uck Bus or HazMat O								
	Vehicle				cecececee				
	License Plate Number		Plate Type			St	Country of Is	suance	
	AHU2128			AUT - AUTOMOBILE		WI	UNITED STATES		
	Vehicle Identification Number			Make		Year	Model		
Ξ		JEEP	JEEP		2016	CHEROKEE			
	Color RED - RED	Body Style		TY VEHICLE		Bus Use			
111			UT - SPORT UTILITY VEHICLE Vehicle Damage						
Ä	00 - NON-COLLISION	•	A et tiple D	uniuge					7 8 9 10 11
Ĭ	Extent Of Damage			SIDE REAR, 10 - LEFT SIDE FRONT, 14 - 6 12					
	MINOR DAMAGE		UNDER	DERCARRIAGE 5 4 3 2 1					5 4 3 2 1

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		Towed Due To Damage TOWED DUE TO DISABI	LING DAMAG		/ehicle Removed By CRAIGS TOWING					
		What Driver Was Doing			'ehicle Factors					
		Driver Prior Action Other			NOT APPLICABLE					
	Driver Actions SPEED TOO FAST/COND									
INN	VEHICLE									
10	10	OwnerName GREG DANIEL GAVIN			Owner Address 407 1/2 5TH ST BARABOO, WI 53913 , US					
		l Sequence Of Events								
	5	Event DITCH								
	8	Event								
	80	Event								
	70	Event								
		Individual								
		Driver MARY CATHERINE O'LOUGHLIN			Citations Issued	Sex FEMALE				
9500555555	INDIVIDUAL				Date of Birth	Race WHITE				
N					Driver License Numbe	er				
_	2	427 MADISON ST MAUSTON, WI 53948 , US			STATE: WISCONSIN COUNTRY: UNITED STATES					
	Sai	On Duty Crash fety Equipment			Safety Equipment					
		Row 01 - FRONT ROW	Seat Posi		SHOULDER & LAP BELT					
	HelmetUse				Helmet Compliance					
		Eye Protection			TintCompliance					
5	100	Injury Severity NO APPARENT INJURY			Airbag NON DEPLOYED					
		Ejected Ejection Path NOT EJECTED NOT EJECTED/NOT APP			.ICABLE		Trapped/Extricated NOT TRAPPED			
		Medical Transport NOT TRANSPORTED			EMS Agency Identifier	r	EMS Run#			
		Hospital			Date of Death		Time of Death			
		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)								
		Distracted By Action NOT DISTRACTED								
		Non Motorist	g Unit#	Location						

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		Prior Action								
		Action								
		7.000,7								
	ושו									
TINN	ğ									
5										
	2									
\$		Action Other							To/From School	
	_ [Suspected Alco	ohol Use		spected Drug Use				
	£	Drug & Alcohol Alcohol Test Given	Al1-17-47-	NO			Alcohol Test Results			
		TEST NOT GIVEN		Alcohol rest ry	Alcohol Test Type			Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Type		Drug Test Results			
9	8	Drug Type		•						
	١									
		Individual Condition								
		APPEARED NORM	1AL							
	į		KRRRRRRRRRRRRRR					S K S K K K K K K K K K K K K K K K K K	<u> គេសភាសាសាសាសាសាសាសាសាសាសាសាសាសាសាសាសាសាសា</u>	
	5	UTC Number BE132325	issue To? 001	Statute Number 343.44(1)(a)	Des OPE	Description OPERATING WHILE SUSPENDED				
	02	UTC Number Issue To? Statute Number 341.04(1) Description NON-REGISTRATION OF AUTO, ETC								
	3	UTC Number BE132327	Issue To?	Statute Number 344.62(1)	Des OPE	cription ERATE MOTOR V	EHICLE W/O IN	SURANCE		

Form DT4000