

6TL0DBC3D8

22-01584

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Location

ON CTHH SB 588 FT E OF GLEN VALLEY DR IN THE TOWN OF WINFIELD IN SAUK COUNTY	Latitude	Longitude
	43.574986491	-89.964198654
	X Coordinate	Y Coordinate
	260652.671875	4828939
Structure Type		

Crash Scene

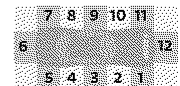
First Harmful Event DITCH	First Harmful Event Location ROADSIDE	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DARK/UNLIT	
Road Surface Condition(s) SNOW	Roadway Factor(s) NONE	
Environment Factor(s) WEATHER CONDITIONS		
Weather Condition(s) SNOW, SEVERE WINDS		
Animal Type	Relation To Trafficway TRAFFICWAY - NOT 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 SOUTHBOUND	<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 UPHILL	
	Truck Bus or HazMat NO				

Vehicle

UNIT VEHICLE 01 01	License Plate Number B21C25	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1G4HR54K25U185150	Make BUICK	Year 2005	Model LESABRE LI
	Color RED - RED	Body Style 4D - 4DR		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 STEVES AUTO SERVICE	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions SPEED TOO FAST/COND			
01 01	Owner Name DARLENE ANN GRIEVES (608) 415-1679		Owner Address S1508B BEAVER CREEK RD WISCONSIN DELLS, WI 53965 , US	
	Sequence Of Events			
01 01	01	Event DITCH		
	02	Event		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company AMERICAN-FAMILY-INS-CO		Individual DARLENE GRIEVES	
UNIT INDIVIDUAL	Individual			
	Driver ANGELENE REINITA JOY GRIEVES (608) 415-1679		Citations Issued 0	Sex FEMALE
	Address S1508B BEAVER CREEK RD WISCONSIN DELLS, WI 53965 , US		Date of Birth [REDACTED]	Race ASIAN OR NATIVE HAWAIIAN OR OTHER PACIFIC ISLAN
	Driver License Number STATE: WISCONSIN 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 NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				

WISCONSIN MOTOR VEHICLE CRASH REPORT

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 SELENE FRIEDA ANN GRIEVES (608) 415-0977			Citations Issued 0	Sex FEMALE	
		Address S1508B BEAVER CREEK RD WISCONSIN DELLS, WI 53965 , US			Date of Birth [REDACTED]	Race ASIAN OR NATIVE HAWAIIAN OR OTHER PACIFIC ISLAN	
		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			Safety Equipment		
		Safety Equipment		On Duty Crash	SHOULDER & LAP BELT		
Row 01 - FRONT ROW	Seat Position 09 - RIGHT	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	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		