WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Override	Primary Crash [Document#	Agency 22-025	Crash Number 664	Investigating Officer/De			
Crash Date	Crash Time	Crash Time		rived	Time Arrive			
03/19/2022	07:58 AM		03/19/	03/19/2022		08:17 AM		
Date Notified	Time Notified		TotalU	nits	Total Injure	d	Total Killed	1
03/19/2022	07:58 AM		01		01		00	
Crash Date 03/19/2022 Date Notified 03/19/2022 On Emergency Government Property	Hit and Run	Lane Clos	ure	☐ Work Zone	Traile	r or 7	Towed	Reporting Threshold
Government Property	Active School Zone				Tags			
Reportable	Crash Type DT4000 (STA	NDARD CRASH	-		Amen	ded		Secondary Crash
Description	•				•			•
Diagram	OT OT	NOT TO SCA	т т			Phi A I	otos By BREUNIG	
i, a sworn law enforce						UNIT	1 was nego	DTIATING A CURVE TO
THE LEFT. UNIT 1 LOST CON AND CAME TO REST.								

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Crash Time 07:58 AM

	Location —									
	ON CTHHH SB				Latitude			Longit	 ude	
	1312 FT N OF DNR RD					43.630732541		-89.940721887		
						X Coordinate		Y Coordinate		
	IN THE TOWN OF DELLONA IN SAUK COUNTY				262767.75			4835063		
	IN OAGIC COOK!				Structure Type					
	Crash Scene									
	First Harmful Event					nful Event Lo	cation			
	DITCH				ON ROADWAY					
	Manner of Collision	/EHICLE IN TRANSPORT			Light Condition DAYLIGHT					
		ENICLE IN TRANSPORT								
	Road Surface Condition(s) SLUSH				Roadway	racton(s)				
	Environment Factor(s)				-					
	NONE				NONE					
	Weather Condition(s)				1					
	SNOW									
	Animal Type				Relation To Trafficway					
						CWAY - OI				
	Crash Classification - Location PUBLIC PROPERTY					Crash Classification - Jurisdiction NO SPECIAL JURISDICTION				
	Tribal Land					Access Control Special Study NO CONTROL				
	Within Interchange Area	Junction Location		Intersection						
	NO	NON-JUNCTION		1	NINTERSECTION					
	Unit Summary =	•								
	Unit Status		Vehicle Op	erating As C	Classification Unit Type					
	IN TRANSIT D CLASS				AUTOMOBILE					
01	Vehicle Type				Operating As Endorsements					
_	PASSENGER CAR	T	1		<u> </u>		I Tatalilian Mat Turan		NA-+ T	
	Total Occs	Train/Bus#Recorded	0	, otali, otaliono localda		l I		Total HazMat Types 0		
	Insurance?	Direction Of Travel	Pre	Pre CrashTire		Speed Lim		TotalLa	Lanes	
╘	YES	SOUTHBOUND		Mark				2		
LIND	Most Harmful Event: Collisio DITCH		Special Function NO SPECIAL FUNCTION		NOT APPL		Motor Vehicle Use LICABLE			
	Traffic Way		Traffic Con	trol			Traffic Control Inoperative/Missing		rative/Missing	
	TWO-WAY, NOT DIVIDE	D	NO CONT	NO CONTROL			NO			
	Surface Type BLACKTOP (BITUMINOUS)			Road Curvature CURVE LEFT			Road Grade LEVEL			
	Truck Bus or HazMat		001(42.2	CORVE LEFT						
	NO									
	Vehicle									
	License Plate Number		Body Style SD - SEDAN		LE WI UNITED S		Country of Issuance			
	602HZD						ATES	ATES		
0	Vehicle Identification N 5 1FADP3F29GL3009	l l			Year 2016	Model FOCUS				
	Color				Bus Use					
	BLU - BLUE									
	Initial Contact Point			Vehicle Damage				T	7 8 9 10 11	
UNIT	11 - LEFT FRONT CORNER		10 - LEF	- 10 - LEFT SIDE FRONT 12 - FRONT		ONT, 11 - LEFT FRONT CORN		£R,	6 12	
⋾	11 - LEFT FRONT (Extent Of Damage DISABLING DAMAGE)							5 4 3 2 1		
	2.5ASERTO SARIAGE						e de company			

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		Towed Due To Damage		Vehicle Removed By				
		TOWED DUE TO DISABLI	NG DAMAGE	STEVES AUTO SERVICE				
		What Driver Was Doing		Vehicle Factors				
		NEGOTIATING CURVE		TIRES				
		Driver Prior Action Other		HRES				
	ш	Driver Actions SPEED TOO FAST/COND,	FAILURE TO CONTROL					
≒								
N	I							
		OwnerName	ı	Owner Address	NT.			
5	5	BA!LEY RAE ELLSWORTH (608) 548-3674	1	603 1/2 E STATE 9 MAUSTON, WI 53				
_								
		Sequence Of Events						
	5	Event LEFT TURN						
	8	Event RUN OFF ROADWAY LEF	т					
		Event	-					
	8	DITCH Event						
	3	Lyent						
⊨								
N N		Insurance Company PROGRESSIVE-UNIVERS	AL-INSURANCE-COMP	Individual BAILEY ELLSWOR	тн			
		Individual						
		Driver		Citations ssued Sex				
		BA!LEY RAE ELLSWORTH (608) 548-3674	1	0 FEMALE				
<u>_</u>	NDIVIDUAL	(000) 040 0014		Date of Birth	Race WHITE			
ENS	2	Address		Driver License Number				
_	603 1/2 E STATE ST MAUSTON, WI 53948 , US STATE: WISCONSIN COUNTRY: UNITED STATES							
	Sai	On Duty Fety Equipment	Crash	Safety Equipment				
		Row Seat Position		SHOULDER & LAP BELT				
		01 - FRONT ROW	07 - LEFT					
		Helmet Use		Helmet Compliance				
		Eye Protection		Tint Compliance				
_	5	Injury Se	verity	Airbag				
2	5		SPECTED MINOR INJURY DEPLOYED-FRONT Trapped/Extricated					
	Ejected Ejection Path NOT EJECTED NOT EJECTED/NOT APP			PLICABLE		NOT TRAPPED		
	Medical Transport NOT TRANSPORTED			EMS Agency identifier		EMS Run#		
		Hospital		Date of Death Time of Death				
		8,-4	d.B.: Carres					
		Distracted By NOT AF	d By Source PPLICABLE (NOT DISTRA	ACTED)				
		Distracted By Action NOT DISTRACTED						

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	Striking Uni	t# Location				
	Non Motorist	t# Location				
	Prior Action					
UNIT	Action					
	Action Other					To/From School
	Drug & Alcohol NO	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 Typ		Drug Test Results		S	
00 4	Drug Type					
	Individual Condition					
	APPEARED NORMAL					