6TL0CBQ6QF 22-02555

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document N	lumber Override	Primary Crash I	Document#		y Crash Number	Investigati			(000, 000
Crash Date		Crash Time		22-02 Date A	rrived	Time Arrive	DEPUTY B. ZIBELL Time Arrived		
3/18/2022		10:53 PM		03/18	/2022	11:06 PM	1		
0ate Notified 03/18/2022		Time Notified 10:55 PM		Total U	Inits	Total Injure 01	ed	Total Kille	ed
3	-	it and Run	Lane Close		Work Zone		er or T	owed	Reporting Threshold
	overnment Property	L	hool Zone	Schoo NO	l Bus Related	Tags			
Report	table	Crash Type DT4000 (STA	NDARD CRASH	1)		Amen	ded		Secondary Crash
escript Diagram	ion 📥						I poo	construction	n Pu
	3						,,,,,	50115ti GOBO	. .
							Pho ZIE	otos By BELL	
Nonemon	· · · · · · · · · · · · · · · · · · ·	лоповологовання					Ado	ditional Info	rmation
	SKINNER	RD					' ''	0.00	
						\$			
					NOT TO	SCALE			

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Crash Date 03/18/2022

Crash Time 10:53 PM

Location —									
ON SKINNER RD				Latitude			Longi	tude	
632 FT E								-89.99399761	
OF CTHK WB IN THE TOWN OF WINFIELD IN SAUK COUNTY								ordinate 081	
					Structure Type NO STRUCTURE				
0				140 0744					
Crash Scene									
First Harmful Event					ıful Event L				
TREE					ER RIGH	T			
Manner of Collision	VEHICLE IN TRANSPORT			Light Cond					
Road Surface Condition(s)	VEHICLE IN TRANSPORT			Roadway					
SNOW, SLUSH, ICE				3.Cadway	1 80101(3)				
Environment Factor(s)				1					
WEATHER CONDITION	S			NONE					
Weather Condition(s)				1					
SNOW, SLEET/HAIL									
Animal Type				1	o Trafficwa	•			
Crook Classification 1	ion				CWAY - OI				
Crash Classification - Location PUBLIC PROPERTY					Crash Classification - Jurisdiction NO SPECIAL JURISDICTION				
Tribal Land					Access Control Special Study NO CONTROL				
Within Interchange Area					on Type				
Unit Summary ■									
Unit Status		Vehicle Ope	erating As C	lassification		UnitType			
IN TRANSIT		D CLASS			AUTOMOBILE				
Vehicle Type	Гуре					Operating As Endorsements			
PASSENGER CAR									
Total Occs	Train/Bus#Recorded	Total#Cita	tions Issued	ons Issued Total Trail 0		ilers Total Ha.		aziMat Types	
Insurance?	Direction Of Travel	Pre	Pre CrashTire Mark		Speed Limit 45		TotalLa	anes .	
YES	WESTBOUND						2		
Most Harmful Event: Collisio	on With		pecial Function IO SPECIAL FUNCTION			Emergency Motor Vehicle Use NOT APPLICABLE			
Traffic Way		Traffic Con	trol	Traffic Control Inoperat			rative/Missing		
TWO-WAY, NOT DIVIDI	≣D	NO CONT			NO	NO			
Surface Type		Road Curva	d Curvature			Road Grade			
BLACKTOP (BITUMINOUS) CURVE LEFT			EFT	LEVEL					
Truck Bus or HazMat NO									
Vehicle		en		verere <u>eree</u>					
License Plate Numbe	T	Plate Type)		St	Country of Is	suance		
AKC5381	AKC5381		AUT - AUTOMOBILE		WI	UNITED STATES			
Vehicle Identification	Make			Year	Model				
FMCU9G65LUB8	6353	FORD			2020	ESCAPE			
Color BLK - BLACK		Body Style UT - SPC		Bus Use					
Initial Contact Point		Vehicle Da	amage			1		7 7 7 8	
12 - FRONT								7 8 9 10 11 6 12	
Initial Contact Point 12 - FRONT Extent Of Damage DISABLING DAMA	15 - ALL	ALL AREAS				5 4 3 2 1			
DISABLING DAMA	(GE								

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		Towed Due To Damage	UC DAMA OF	Vehicle Removed By	.noe					
		TOWED DUE TO DISABLII What Driver Was Doing	NG DAWAGE	Vehicle Factors	VICE					
		NEGOTIATING CURVE		Versione 1 actors						
		Driver Prior Action Other		NOT APPLICABLE						
LIND	VEHICLE	Driver Actions NO CONTRIBUTING ACTION	DN	I						
9	-64	Owner Name ROBERT JAMES VAN MEI	ETEREN	Owner Address S1795 OLD TOWN HALL RD REEDSBURG, WI 53959 , US						
		Sequence Of Events		I						
	5	Event MOTOR VEH IN TRANSPO								
	8	Event TREE								
	8	Event EMBANKMENT								
	3	Event								
_		Policy Holder								
IN N		Insurance Company WEST-BEND-MUTUAL-INS		Individual PEYTON VAN MEETEREN						
		Individual								
		Driver PEYTON RACHEL VAN ME	Citations Issued Sex O FEMALE							
⊨				Date of Birth	Race WHITE					
TINO.	INDIVIDUAL	Address \$1795 OLD TOWN HALL F REEDSBURG, WI 53959,		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES						
		On Duty	Crash	Safety Equipment						
	Sai	ety Equipment	1							
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT						
		Helmet Use		Helmet Compliance						
		Eye Protection		Tint Compliance						
2	8		verity CTED MINOR INJURY Ejection Path	Airbag DEPLOYED-COMBINATION						
		l '	PLICABLE		Trapped/Extricated TRAPPED/EXTRICATED					
		Medical Transport EMS GROUND		EMS Agency Identifier 6001024	r	EMS Run# 03062				
		Hospital REEDSBURG AREA MED	CTR	Date of Death		Time of Death				
			d By Source	ACTED)		1				
		Distracted By Action NOT DISTRACTED								

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10, 31, 11 V	ш 1, г				
Non Motorist	# Location				
Prior Action					
Action					
Action Other					To/From School
Drug & Alcohol NO	Alcohol Use	Suspected Drug Use NO			
Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	e		Alcohol Test Results	
Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results	3	
Drug Type					
Individual Condition APPEARED NORMAL					
	Prior Action Action Action Action Suspected A NO Alcohol Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Type Individual Condition	Action Other Action Other	Prior Action Action Action Other Suspected Alcohol Use NO Alcohol Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Type Individual Condition	Prior Action Action Action Other Suspected Alcohol Use NO Alcohol Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Test Given Test Type Individual Condition	Prior Action Action Other Drug & Alcohol NO Alcohol Test Given TEST NOT GIVEN Drug Test Given Drug Test Type Drug Test Results Drug Type Individual Condition