

6TL0D5DXZ9

22-04683

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, Crash Date, Crash Time, Date Arrived, Time Arrived, Date Notified, Time Notified, Total Units, Total Injured, Total Killed, On Emergency, Hit and Run, Lane Closure, Work Zone, Trailer or Towed, Reporting Threshold, Government Property, Active School Zone, School Bus Related, Tags, Reportable, Crash Type, Amended, Secondary Crash

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

Location

ON STH33 WB
145 FT N
OF MAN MOUND RD
IN THE TOWN OF GREENFIELD
IN SAUK COUNTY
Latitude, Longitude, X Coordinate, Y Coordinate, Structure Type

Crash Scene

First Harmful Event, First Harmful Event Location, Manner of Collision, Light Condition, Road Surface Condition(s), Roadway Factor(s), Environment Factor(s), Weather Condition(s), Animal Type, Relation To Trafficway, Crash Classification - Location, Crash Classification - Jurisdiction, Tribal Land, Access Control, Special Study

Unit Summary

Unit Status, Vehicle Operating As Classification, Unit Type, Vehicle Type, Operating As Endorsements, Total Occs, Train/Bus # Recorded, Total # Citations Issued, Total Trailers, Total HazMat Types, Insurance?, Direction Of Travel, Pre Crash Tire Mark, Speed Limit, Total Lanes, Most Harmful Event: Collision With, Special Function, Emergency Motor Vehicle Use, Traffic Way, Traffic Control, Traffic Control Inoperative/Missing, Surface Type, Road Curvature, Road Grade

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Truck Bus or HazMat				
01 UNIT VEHICLE	Vehicle			
	License Plate Number ABA9703	Plate Type AUT - AUTOMOBILE	St WI	
	Country of Issuance UNITED STATES	Vehicle Identification Number 2HGFG128X7H511317	Make HONDA	
	Year 2007	Model CIVIC EX	Color GRY - GRAY	
	Body Style CP - COUPE	Bus Use	Initial Contact Point 10 - LEFT SIDE FRONT	
	Vehicle Damage 09 - LEFT SIDE MIDDLE, 10 - LEFT SIDE FRONT			
	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR		
	What Driver Was Doing	Vehicle Factors		
	Driver Prior Action Other			
	Driver Actions NO CONTRIBUTING ACTION			
Owner Name	Owner Address			
01 UNIT POLICY HOLDER	Policy Holder			
	Insurance Company AMERICAN-FAMILY-INS-CO	Individual OLIVIA SEEHAFFER		
	Individual			
01 UNIT INDIVIDUAL	Driver OLIVIA LOUISE SEEHAFFER (608) 432-4043	Citations Issued 0	Sex FEMALE	
	Date of Birth [REDACTED]	Race WHITE		
	Address 4610 LARSON BEACH RD MC FARLAND, WI 53558 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES		
	Safety Equipment			
On Duty Crash	Safety Equipment SHOULDER & LAP BELT			
Row	Seat Position	Helmet Compliance		
Helmet Use	Tint Compliance			
Eye Protection	Airbag			
01 UNIT INJURY	Injury NO APPARENT INJURY			
	Ejected	Ejection Path	Trapped/Extricated	
	Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #	
	Hospital	Date of Death	Time of Death	

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UNIT INDIVIDUAL	Distracted By		Distracted By Source		
	Distracted By Action				
	Non Motorist		Striking Unit #	Location	
	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					