6TL0BNZM43 22-08825

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 Crash Number 22-08825		Investigating Officer/Deputy DEPUTY K. RENZ			
143	Crash Date 09/03/2022	Crash Time 08:50 PM		Date Arrived 09/03/2022		Time Arrived 09:09 PM			
NZM4	Date Notified 09/03/2022	Time Notified 08:51 PM		Total Units 01		Total Injured 01	tal Injured Total Killed 00		
<u>.0B</u>	On Emergency Hit and Run		Lane Closure		☐ Work Zone	Trailer or	Towed	Reporting Threshold	
6T L	Government Active School Zone		School Bus Related NO		Tags				
_	✓ Reportable Crash Type DT4000 (STANDARD CRASE)			H)		Amended		Secondary Crash	у

Description Diagram Reconstruction By Photos By RENZ 9148 154 Additional Information **PHOTOS** Resting Place Unit 1

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

Not Drawn to Scale

ON 9/3/2022, UNIT 1 WAS TRAVELING EASTBOUND ON HWY 154 NEAR ELI VALLEY ROAD WHEN A VEHICLE TRAVELING WEST BOUND CROSSED THE CENTER UNE. THE VEHICLE CROSSING THE CENTER LINE CAUSED UNIT 1 TO SWERVE TO AVOID HITTING THE VEHICLE. UNIT 1 STRUCK THE GUARDRAIL ON THE SOUTH SIDE OF THE ROAD. UNIT 1 HIT THE GUARD RAIL AND CAME TO A REST IN THE DITCH ON THE SOUTH SIDE OF HWY 154. THE COLLISION WITH THE GUARD RAIL CAUSED DAMAGE TO THE RIGHT SIDE OF THE VEHICLE AS WELL AS A FLAT TIRE ON THE PASSENGER FRONT SIDE. UNIT 1 DRIVER WAS TRANSPORTED TO RICHLAND HOSPITAL AND THE VEHICLE WAS REMOVED BY UNIT 1 DRIVER'S SON.

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Location ===									
ON WALNUT ST/ STH15	4 EB	Latitude			Longitude				
200 FT W					43.434030534 -90.07131			1313666	
OF ELI VALLEY RD IN THE TOWN OF WESTFIELD					X Coordinate			dinate	
IN SAUK COUNTY					251424.859375 4813598				
	Structure Type NO STRUCTURE								
Crash Scene				,					
First Harmful Event				FirstHarm	nful Event Lo	ocation			
GUARDRAIL FACE				SHOULD	ER RIGH	Ţ			
Manner of Collision				Light Condition					
00 - NO COLLISION W/VI	EHICLE IN TRANSPORT			DARK/UNLIT					
Road Surface Condition(s)				Roadway	Factor(s)				
DRY									
Environment Factor(s)				†					
NONE				NONE					
Weather Condition(s)				1					
CLOUDY						ON ROAD			
Animal Type				Relation T	o Trafficwa				
					CWAY - OI				
PUBLIC PROPERTY	n			Crash Classification - Jurisdiction NO SPECIAL JURISDICTION					
Tribal Land			Access Contr			Special Study			
Within Interchange Area	Intersection	••							
NO	NON-JUNCTION		NOT AN	N INTERSECTION					
Unit Summary									
Unit Status		1	_	Classification Unit Type					
	IN TRANSIT D CLASS				AUTOMOBILE				
(SPORT) UTILITY VEHIC	Vehicle Type (SPORT) LITELY VEHICLE					Operating As Endorsements			
Total Occs	Train/Bus#Recorded	Total#Cita	Total#Citations Issued		Total Trail		Total Haz	zMat Types	
1	Transbas i Nossiaca	0	00115 155060	•	0		0		
Insurance?	Direction Of Travel	Pre CrashTir		. Speed Lin		imit Total La		nes	
YES	EASTBOUND		Mark	•	55		2		
Most Harmful Event: Collision	With	SpecialFur		Emergency Motor Vehicle Use					
GUARDRAIL FACE	GUARDRAIL FACE			TION			OT APPLICABLE		
			Traffic Control			Traffic Control Inop		ative/Missing	
TWO-WAY, NOT DIVIDED		NO CONTROL			NO				
			Road Curvature STRAIGHT			Road Grade			
Truck Bus or HazMat						LEVEL			
NO									
Vehicle				********	****	SSSSSSSSSS			
License Plate Number	1	Plate Type		St Country of Issuance					
AFM6898		AUT - AUTOMOBILE		WI	UNITED STATES				
Vehicle Identification No. 5GALRAED3AJ2401	Make	Make BUICK		Year 2010	Model ENCLAVE CX				
		15555			ZU10	ENCLAVE	CA		
Color						Pue Hee			
Color RED - RED		Body Style				Bus Use			
RED - RED		Body Style	RYALL			Bus Use			
RED - RED		Body Style LL - CAR Vehicle Da	RYALL	r corner	R, 02 - RIG			7 8 9 10 11	
RED - RED Initial Contact Point	CORNER	Body Style LL - CAR Vehicle Da 01 - RIG	RYALL amage HT FRON				DE	7 8 9 10 11 6 12 5 4 3 2 1	

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		Towed Due To Damage		Vehicle Removed By					
		TOWED DUE TO DISABLING DAMAGE		OWNER					
		What Driver Was Doing GOING STRAIGHT Driver Prior Action Other		Vehicle Factors					
				NOT APPLICABLE					
		Siret Figuration Cards							
		Driver Actions							
_		NO CONTRIBUTING ACTION							
N	¥								
\neg	VEHICLE								
		OwnerName JAMES ALLEN OLSON		Owner Address 231 N WEBB AVE					
2	5	(608) 766-0178		REEDSBURG, W					
		Sequence Of Events							
	5	Event GUARDRAIL FACE	<u>*************************************</u>						
	8	Event DITCH							
	63	Event							
		Event							
	3								
⊨		Policy Holder							
INN		Insurance Company PROGRESSIVE-CLASSIC-INS-CO		Individual JEANNETTE OLSON					
		Individual	m3-00						
		Driver JEANNETTE M OLSON		Citations ssued Sex					
				0 FEMALE					
	NDIVIDUAL	(608) 766-0178		Date of Birth	Race				
LNN	9			WHITE					
ź	ã	Address 231 N WEBB AVE		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
	=	REEDSBURG, WI 53959 ,	US						
	Sai	On Duty Crash Tety Equipment		Safety Equipment					
		Row Seat Position		SHOULDER & LAP BELT					
		01 - FRONT ROW	07 - LEFT						
		HeimetUse		Helmet Compliance					
		Eye Protection		Tint Compliance					
2	8	Injury Severity SUSPECTED MINOR INJURY Ejected Ejection Path		Airbag NON DEPLOYED					
				11011 521 20125		Trapped/Extricated			
		NOT EJECTED NOT EJECTED/NOT APP				NOT TRAPPED			
		Medical Transport EMS GROUND		EMS Agency Identifier 6001024		EMS Run# 221695			
		Hospital	Date of Death Time of Death						
		RICHLAND MEMORIAL HO							
Distracted By Source Distracted By NOT APPLICABLE (NOT DISTRACTED)									
		Distracted By Action							
		NOT DISTRACTED							

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Striking	Jnit# Location				
Non Motorist					
Prior Action					
Action					
Action Other					To/From School
Drug & Alcohol NO	ed Alcohol Use	Suspected Drug Use NO			
Alcohol Test Given	Alcohol Test Ty	уре		Alcohol Test Results	
Drug Test Given TEST NOT GIVEN	Drug Test Type	•	Drug Test Results	5	
Drug Type	•		•		
Individual Condition					
CONFUSED OR DISORIEN	ITED (NON LUCID)				
	Prior Action Action Other Drug & Alcohol 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 Type Drug Type	Prior 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 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 Action Other Drug & Alcohol NO Alcohol Test Given TEST NOT GIVEN Drug Test Given Test NOT GIVEN Drug Test Type Individual Condition