6TL0C884JL 22-11609

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override Primary Crash Document#		Document#	Agency Crash Number 22-11609		Investigating Officer/Deputy DEPUTY T. SUTHERLAND				
ļ	Crash Date 11/19/2022	Crash Time 05:50 AM		Date Arrived 11/19/2022		Time Arrived 07:24 AM				
	Date Notified 11/19/2022	Time Notified 06:53 AM		Total Units				Total Killed		
)	On Emergency Hit	and Run	Lane Clos	ure	☐ Work Zone	Trailer	r or To	owed	Reporting Threshold	
֡֡֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֟֜֓֓֓֓֓֓֡֓֡֓֓֓֓֓֡֓֜֓֡֓֡֓֡֡֡֓֡֓֡֓֡֡֡֡֡֡֡	Government Active School Zone				School Bus Related Tags NO			<u>'</u>		
	Crash Type DT4000 (STANDARD CRAS					Amend	Amended Secondary Crash			
Description ————————————————————————————————————										
N Dutch Hollow Rd Additional Information NONE Strawbridge Road Not To Scale								mation		
	I, a sworn law enforceme						CLE SI	LIDE INTO	WEST DITCH LINE	
	ROLLING OVER STRIKING TREES								WEGT DITOR CINE	

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Location

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Crash Time 05:50 AM

•	ON STRAWBRIDGE RD 427 FT N				Latitude 43 644430454			Longitude		
	OF DEGNER RD				43.614430151			-90.211279805		
	IN THE TOWN OF WOODLAND IN SAUK COUNTY				X Coordinate 240870.3125		Y Coordinate 4834062			
				Structure Type NO STRUCTURE						
ı	Crash Scene									_
•	First Harmful Event				FirstHarm	nful Event Lo	cation			
	TREE				SHOULE	ER LEFT				
	Manner of Collision				Light Con-					
	00 - NO COLLISION W/VEHICLE IN TRANSPORT				DAYLIGHT					
	Road Surface Condition(s)				Roadway	Factor(s)				
	snow									
	Environment Factor(s)									
	NONE				ROAD S	URFACE	MOITION	(WET, IC	Y, SNOW, SLUSH,	
	Weather Condition(s)				,					
	SNOW									
										_
	AnimalType					o Trafficway CWAY - NO	T ON ROA	D		
	Crash Classification - Location					ssification -				
	PUBLIC PROPERTY					CIAL JURI	SDICTION		To 110: 1	_
	Tribal Land				Access Control NO CONTROL				Special Study	
	•	Junction Location		Intersection Type						Т
		NON-JUNCTION		NOT AN	INTERSE	CTION				
	Unit Summary 👅									_
				Vehicle Operating As Classification		UnitType AUTOMOBILE				
				D CLASS			Operating As Endorsements			
7	Vehicle Type (SPORT) UTILITY VEHICLI	Ē			Operating As Endorsements			11101112		
	Total Occs	Train/Bus#Recorded	Total#Citati	Total#Citations Issued		Total Traile		ilers Total HazMat Types		_
	1		0			0		0	**	
	Insurance?	Direction Of Travel	Pre C	CrashTire		Speed Lim	it	TotalLan	es	_
	YES	NORTHBOUND		Mark		55		2		
	Most Harmful Event: Collision With TREE			Special Function NO SPECIAL FUNCTION		Emergency NOT APPL		Motor Vehicle Use L ICABLE		
				Traffic Control				rol Inopera	Inoperative/Missing	
	,			NO CONTROL				NO		
	Surface Type		Road Curvature			Road Grade				
	BLACKTOP (BITUMINOUS) Truck Bus or HazMat			STRAIGHT			DOWNHILL			
	NO									
	Vehicle									
	License Plate Number Plate Type					St	Country of Is	suance		
	AFL3758	1	AUT - AUTOMOBILE WI Make Year JEEP 2018 Body Style Year		LE WI		UNITED STATES Model			
_	Vehicle Identification Num									
5	る 1C4HJWFG5JL91577	JEEP			2018	WRANGLE	R			
	Color	1 .				Bus Use				
	BLK - BLACK	4D - 4DR								
—	Initial Contact Point 12 - FRONT	Venicle Dar	Vehicle Damage					7 8 9 10 11		
	12 - FRONT Extent Of Damage			15 - ALL AREAS			6		6 12	
⊐	DISABLING DAMAGE								5 4 3 2 1	
			I							
Visco	onsin Motor Vehicle Crash	Th	is report does not i	nclude any	CJIS data.			Crash Date	11/19/2022	

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		Towed Due To Damage		Vehicle Removed By								
		TOWED DUE TO DISABLI	NG DAMAGE	SHIELDS TOWING								
		What Driver Was Doing		Vehicle Factors								
		NEGOTIATING CURVE Driver Prior Action Other		Tomora determ								
				NOT APPLICABLE								
		Bill til i i i i i i i i i i i i i i i i										
LINI	VEHICLE	Driver Actions SPEED TOO FAST/COND, FAILURE TO CONTROL, RAN OFF ROADWAY, FAILED TO KEEP IN DESIGNATED LANE										
9	5	Owner Name CHRISTINE M RASMUSSE (715) 892-5773	EN	Owner Address W4231 VISTA CIR MAUSTON, WI 53948 , US								
			uence Of Events									
		Sequence Of Events										
	5	TREE										
	N	Event										
	8	Fuent										
	8	Event										
	3	Event										
_		Policy Holder										
IN		Insurance Company		Individual								
\neg		ILLINOIS-INSURANCE-CO		CHRISTINE RASMUSSEN								
		Individual										
	_	Driver		Citations Issued Sex								
		JASON J RASMUSSEN (608) 253-4600		0								
_	NDIVIDUAL	(655, 255 1555		Date of Birth	Race WHITE							
LNS	Ξ	Address		Driver License Number								
_	2	E2370 ALPINE LANE LAVALLE, WI 53941 , US		STATE: WISCONSIN COUNTRY: UNITED STATES								
		EAVACEE, WI 35541 , US										
		On Duty	Crach	Safety Equipment								
	Sai	fety Equipment	Clasii	Safety Equipment								
		Row Seat Position		SHOULDER & LAP BELT								
		01 - FRONT ROW	07 - LEFT									
		HelmetUse		Heimet Compliance								
		Eye Protection		TintCompliance								
		Injury Sc	verity	Airbag								
2	100	Injury Severity NO APPARENT INJURY		DEPLOYED-COMBINATION								
		Ejected Ejection Path NOT EJECTED NOT EJECTED/NOT APPL		LICABLE		Trapped/Extricated NOT TRAPPED						
		Medical Transport		EMS Agency Identifier		EMS Run#						
		NOT TRANSPORTED										
		I I a a wita i		Date of Death		Time of Death						
		Hospital		Date of Death								
		Distracte	ed By Source									
		·	ed By Source PPLICABLE (NOT DISTR									

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	Non Motorist	Location				
	Prior Action					
UNIT	Action					
	Action Other					To/From School
	Drug & Alcohol NO	cohol Use	Suspected Drug Use NO			
	Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	9		Alcohol Test Results	
	Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results		
2 2	Drug Type	·				
	Individual Condition APPEARED NORMAL					