

6TL09XQZ52
22-13004

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 22-13004		Investigating Officer/Deputy DEPUTY I. GALVAN	
Crash Date 12/30/2022		Crash Time 10:05 AM		Date Arrived 12/30/2022		Time Arrived 10:15 AM	
Date Notified 12/30/2022		Time Notified 10:06 AM		Total Units 01		Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone		<input type="checkbox"/> Trailer or Towed	<input type="checkbox"/> Reporting Threshold	
<input checked="" type="checkbox"/> Government Property		<input type="checkbox"/> Active School Zone		School Bus Related NO		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

Description

Diagram		Reconstruction By
		Photos By I GALVAN
		Additional Information PHOTOS
		<input checked="" type="checkbox"/> I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.
UNIT 1 TRAVELING EASTBOUND ON STH 136 NEAR HWY 12 IN ROUNDABOUT. UNIT 1 CHANGED LANES AND SLID INTO CURB AND STRUCK TRAFFIC SIGN. NO INJURIES REPORTED. UNIT Q WAS REMOVED BY OPERATOR AND PASSENGER.		

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Location

ON RAMP USH12 EB 20 FT S OF STH33 EB IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY	Latitude 43.474616252	Longitude -89.774066924
	X Coordinate 275633.6875	Y Coordinate 4817261
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event TRAFFIC SIGN POST	First Harmful Event Location ROADSIDE	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY, ICE	Roadway Factor(s) ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)	
Environment Factor(s) NONE		
Weather Condition(s) CLOUDY		
Animal Type	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location INTERSECTION-RELATED	Intersection Type ROUNDBOUT

Unit Summary

UNIT 01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE		
	Vehicle Type PASSENGER CAR	Operating As Endorsements			
	Total Occs 2	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit N/A	Total Lanes 2
	Most Harmful Event: Collision With TRAFFIC SIGN POST	Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE		
	Traffic Way ONE-WAY TRAFFIC	Traffic Control YIELD SIGN	Traffic Control Inoperative/Missing NO		
	Surface Type BLACKTOP (BITUMINOUS)	Road Curvature CURVE RIGHT	Road Grade LEVEL		
	Truck Bus or HazMat NO				

Vehicle

UNIT 01 VEHICLE 01	License Plate Number ABV9651	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 3GNAL2EK8CS646005	Make CHEVROLET	Year 2012	Model EQUINOX
	Color BLK - BLACK	Body Style 4D - 4DR	Bus Use	
	Initial Contact Point 01 - RIGHT FRONT CORNER	Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 12 - FRONT		
Extent Of Damage FUNCTIONAL DAMAGE				

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UNIT VEHICLE	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR	
	What Driver Was Doing CHANGING LANES	Vehicle Factors	
	Driver Prior Action Other	NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION		
01 01	Owner Name MELINDA A ARRIES (608) 495-7197	Owner Address 300 E BROADWAY ROCK SPRINGS, WI 53961 , US	
	Sequence Of Events		
01 02 03 04	Event CURB		
	Event TRAFFIC SIGN POST		
	Event		
	Event		
UNIT	Policy Holder		
	Insurance Company PROGRESSIVE-CLASSIC-INS-CO	Individual BELLA ERICKSEN	
UNIT INDIVIDUAL	Individual		
	Driver BELLA PAIGE ERICKSEN (608) 495-7197	Citations Issued 0	Sex FEMALE
		Date of Birth [REDACTED]	Race WHITE
	Address 300 E BROADWAY ROCK SPRINGS, WI 53961 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
01 001	Safety Equipment		On Duty Crash
			Safety Equipment SHOULDER & LAP BELT
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #
Hospital		Date of Death	Time of Death
Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)	
Distracted By Action NOT DISTRACTED			

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UNIT	INDIVIDUAL	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					
UNIT	INDIVIDUAL	Individual					
		Passenger JASON MICHAEL ERICKSEN (608) 495-7197		Citations Issued 0	Sex MALE		
				Date of Birth [REDACTED]	Race WHITE		
		Address 300 E BROADWAY ROCK SPRINGS, WI 53961 , US		Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES			
		Safety Equipment		On Duty Crash	Safety Equipment		
		Row 01 - FRONT ROW	Seat Position 09 - RIGHT	SHOULDER & LAP BELT			
		Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
		UNIT	INDIVIDUAL	Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
				Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED
Medical Transport NOT TRANSPORTED				EMS Agency Identifier		EMS Run #	
Hospital				Date of Death		Time of Death	
Distracted By							
Distracted By Source							
Distracted By Action							
Non Motorist				Striking Unit #	Location		

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		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				

Property Owner	
PROP OWNER 01	Government SAUK COUNTY HWY DEPT (608) 356-3855
	Address 620 STH 136 PO BOX 26 BARABOO, WI 53913 , US

Fixed Objects Struck				
01	Striking Unit 01	Struck Object TRAFFIC SIGN POST	Structure Number	Damage Tag Number 337651