

6TL0BGSFJB

Document Number Override		Primary Crash Document #		Agency Crash Number <b>23-00854</b>		Investigating Officer/Deputy <b>DEPUTY D. KROLIKOWSKI</b>	
Crash Date <b>01/26/2023</b>		Crash Time <b>05:23 PM</b>		Date Arrived <b>01/26/2023</b>		Time Arrived <b>05:23 PM</b>	
Date Notified <b>01/26/2023</b>		Time Notified <b>05:23 PM</b>		Total Units <b>01</b>		Total Injured <b>00</b>	Total Killed <b>00</b>
<input type="checkbox"/> On Emergency		<input type="checkbox"/> Hit and Run		<input type="checkbox"/> Lane Closure		<input type="checkbox"/> Work Zone	
<input type="checkbox"/> Government Property		<input type="checkbox"/> Active School Zone		School Bus Related <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	
<input type="checkbox"/> Trailer or Towed		<input type="checkbox"/> Reporting Threshold					

**Description**

Diagram		Reconstruction By	
		Photos By	
		Additional Information <b>NONE</b>	

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

VEHICLE WAS WEST BOUND ON HWY 14 JUST WEST OF BIG HOLLOW ROAD WHEN IT LOST CONTROL DUE TO SNOW ON THE ROAD. THE VEHICLE THEN CROSSED THE CENTERLINE AND ENTERED THE DITCH TO IT'S LEFT, ON THE SOUTH SIDE OF THE ROAD. AFTER ENTERING THE DITCH IT STRUCK A CABLE UTILITY BOX WITH THE FRONT OF THE VEHICLE AND A UTILITY POLE ON IT'S PASSENGER SIDE ON THE REAR OF THE CAB.

**Location**

ON USH14 WB 0.46 MI W OF BIG HOLLOW RD IN THE TOWN OF SPRING GREEN IN SAUK COUNTY	Latitude <b>43.189720335</b>	Longitude <b>-90.122681611</b>
	X Coordinate <b>246251.75</b>	Y Coordinate <b>4786618.5</b>
	Structure Type <b>NO STRUCTURE</b>	

**Crash Scene**

First Harmful Event <b>DITCH</b>	First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DAWN</b>	
Road Surface Condition(s) <b>SNOW</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>		
Weather Condition(s) <b>SNOW</b>		
Animal Type	Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>	Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land	Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>

**Unit Summary**

<b>UNIT</b>	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>TRUCK</b>		
	Vehicle Type <b>UTILITY TRUCK/PICKUP TRUCK</b>	Operating As Endorsements			
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>YES</b>	Direction Of Travel <b>WESTBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>55</b>	Total Lanes <b>3</b>
	Most Harmful Event: Collision With <b>UTILITY POLE</b>	Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>	Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>	Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>				

**Vehicle**

<b>UNIT</b>	<b>01</b>	<b>VEHICLE</b>	License Plate Number <b>ME8080</b>	Plate Type <b>LTK - LIGHT TRUCK</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
			Vehicle Identification Number <b>2GCEK19T5Y1361551</b>	Make <b>CHEVROLET</b>	Year <b>2000</b>	Model <b>SILVERADO</b>	
			Color <b>RED - RED</b>	Body Style <b>PK - PICKUP</b>		Bus Use	
			Initial Contact Point <b>04 - RIGHT SIDE REAR</b>	Vehicle Damage			
			Extent Of Damage <b>FUNCTIONAL DAMAGE</b>	<b>04 - RIGHT SIDE REAR, 12 - FRONT</b>			



UNIT	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By		
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors		
	Driver Prior Action Other		<b>NOT APPLICABLE</b>		
	Driver Actions <b>SPEED TOO FAST/COND</b>				
01	01	Owner Name <b>ARABELLE FORCE</b> (715) 821-8229		Owner Address <b>101 SHARON ST #7</b> <b>ARENA, WI 53503 , US</b>	
		<b>Sequence Of Events</b>			
UNIT	01	Event <b>DITCH</b>			
		Event <b>UTILITY POLE</b>			
		Event			
		Event			
UNIT	<b>Policy Holder</b>				
	Insurance Company <b>PROGRESSIVE-CASUALTY-INS-CO</b>		Individual <b>ARABELLE FORCE</b>		
UNIT	<b>Individual</b>				
	INDIVIDUAL	Driver <b>ARABELLE FORCE</b> (715) 821-8229		Citations Issued <b>0</b>	Sex <b>FEMALE</b>
		Address <b>101 SHARON ST #7</b> <b>ARENA, WI 53503 , US</b>		Date of Birth Race	
	Driver License Number		Driver License Number		
<b>Safety Equipment</b>					
01	001	On Duty Crash		Safety Equipment	
		Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>SHOULDER &amp; LAP BELT</b>	
		Helmet Use		Helmet Compliance	
		Eye Protection		Tint Compliance	
		<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
		Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</b>
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #		
Hospital		Date of Death	Time of Death		
<b>Distracted By</b>					
Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>		Distracted By Action <b>NOT DISTRACTED</b>			

<b>UNIT</b>	<b>INDIVIDUAL</b>	<b>Non Motorist</b>		Striking Unit #	Location		
		Prior Action					
		Action					
	<b>01</b>	<b>001</b>	Action Other				To/From School
			<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>	
			Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type		Alcohol Test Results
			Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type		Drug Test Results
			Drug Type				
			Individual Condition <b>APPEARED NORMAL</b>				
			<b>Property Owner</b>				
<b>PROP OWNER</b>	<b>01</b>	Organization/Company <b>SPECTRUM</b> (855) 707-7328			Address <b>400 ATLANTIC ST</b> <b>STAMFORD, CT 06901 , US</b>		
		<b>Fixed Objects Struck</b>					
<b>01</b>	<b>01</b>	Striking Unit	Struck Object		Structure Number	Damage Tag Number	
		<b>01</b>	<b>OTHER FIXED OBJECT</b>			<b>337875</b>	