

6TL0DJJ8WG

23-01846

### 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 23-01846	Investigating Officer/Deputy DEPUTY J. TROTH	
Crash Date 02/21/2023		Crash Time 09:25 PM	Date Arrived 02/21/2023	Time Arrived 09:52 PM	
Date Notified 02/21/2023		Time Notified 09:30 PM	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 type="checkbox"/> Government Property		<input type="checkbox"/> Active School Zone	School Bus Related NO	Tags	
<input type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)	<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

#### Description

Diagram          Slide Off	Reconstruction By
	Photos By
	Additional Information NONE

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

SLIDE OFF - SHAYLIN TOWNSEND WAS SOUTH BOUND ON CTH V NEAR WEGNER RD. SHAYLIN WAS GOING AROUND THE CURVE ON THE SNOW COVERED ROAD WHEN SHE SLID INTO THE RIGHT DITCH. THERE WAS NO DAMAGE TO THE VEHICLE.

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## Location

ON CTHV SB 257 FT W OF WEGNER RD IN THE TOWN OF LA VALLE IN SAUK COUNTY	Latitude	Longitude
	43.583710394	-90.083273117
	X Coordinate	Y Coordinate
	251073.390625	4830258
Structure Type		

## Crash Scene

First Harmful Event <b>DITCH</b>	First Harmful Event Location <b>SHOULDER RIGHT</b>	
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DARK/UNLIT</b>	
Road Surface Condition(s) <b>WET, SNOW, SLUSH, ICE</b>	Roadway Factor(s)  <b>ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)</b>	
Environment Factor(s) <b>WEATHER CONDITIONS</b>		
Weather Condition(s) <b>SNOW</b>		
Animal Type	Relation To Trafficway <b>TRAFFICWAY - NOT 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

UNIT 01	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>	Unit Type <b>AUTOMOBILE</b>		
	Vehicle Type <b>PASSENGER CAR</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>SOUTHBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>55</b>	Total Lanes <b>2</b>
	Most Harmful Event: Collision With <b>DITCH</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>CURVE LEFT</b>	Road Grade <b>LEVEL</b>		
	Truck Bus or HazMat <b>NO</b>				

## Vehicle

UNIT VEHICLE 01 01	License Plate Number <b>ANY9971</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>1G1ZB5E02CF107763</b>	Make <b>CHEVROLET</b>	Year <b>2012</b>	Model <b>MALIBU</b>
	Color <b>BRO - BROWN</b>	Body Style <b>SD - SEDAN</b>	Bus Use	
	Initial Contact Point <b>00 - NON-COLLISION</b>	Vehicle Damage		
	Extent Of Damage <b>NO DAMAGE</b>	<b>00 - NO DAMAGE</b>		



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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>STEVES AUTO SERVICE</b>	
	What Driver Was Doing <b>NEGOTIATING CURVE</b>	Vehicle Factors <b>NOT APPLICABLE</b>	
	Driver Prior Action Other		
	Driver Actions <b>NO CONTRIBUTING ACTION</b>		
01	01	Owner Name <b>SHAYLIN MARIE TOWNSEND (608) 606-4377</b>	Owner Address <b>415 N GOLD ST # 2 LA FARGE, WI 54639 , US</b>
<b>Sequence Of Events</b>			
01	01	Event <b>DITCH</b>	
02	02	Event	
03	03	Event	
04	04	Event	
UNIT	<b>Policy Holder</b>		
	Insurance Company <b>GEICO-CASUALTY-CO</b>	Individual <b>SHAYLIN TOWNSEND</b>	
UNIT INDIVIDUAL	<b>Individual</b>		
	Driver <b>SHAYLIN MARIE TOWNSEND (608) 606-4377</b>	Citations Issued <b>0</b>	Sex <b>FEMALE</b>
		Date of Birth [REDACTED]	Race <b>WHITE</b>
	Address <b>415 N GOLD ST # 2 LA FARGE, WI 54639 , US</b>	Driver License Number [REDACTED] <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01 001	<b>Safety Equipment</b>		On Duty Crash
			Safety Equipment <b>SHOULDER &amp; LAP BELT</b>
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</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>			

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<b>UNIT</b>	<b>Non Motorist</b>		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other				To/From School
<b>INDIVIDUAL</b>	<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>				