

6TL0D6N047

23-01887

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Location

ON USH12 WB 539 FT N OF STH33 EB IN THE TOWN OF BARABOO IN SAUK COUNTY	Latitude 43.48328385	Longitude -89.775172341
	X Coordinate 275576.40625	Y Coordinate 4818226.5
	Structure Type NO STRUCTURE	

Crash Scene

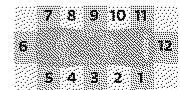
First Harmful Event DITCH	First Harmful Event Location SHOULDER RIGHT	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAYLIGHT	
Road Surface Condition(s) SLUSH	Roadway Factor(s) ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)	
Environment Factor(s) NONE		
Weather Condition(s) CLOUDY, SNOW		
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 NON-JUNCTION	Intersection Type NOT AN INTERSECTION

Unit Summary

UNIT	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR	Operating As Endorsements			
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel NORTHBOUND	<input checked="" type="checkbox"/> Pre Crash Tire Mark	Speed Limit 65	Total Lanes 4
	Most Harmful Event: Collision With DITCH	Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER	Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type CONCRETE	Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO				

Vehicle

UNIT	VEHICLE	License Plate Number ARV1037	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
		Vehicle Identification Number 1HGCM56826A178315	Make HONDA	Year 2006	Model ACCORD	
		Color GRY - GRAY	Body Style SD - SEDAN		Bus Use	
		Initial Contact Point 06 - REAR	Vehicle Damage			
		Extent Of Damage NO DAMAGE	00 - NO DAMAGE			



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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By CRAIGS TOWING	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions SPEED TOO FAST/COND			
01	Owner Name KAVON FOSTER		Owner Address	
	Sequence Of Events			
01 02 03 04	Event DITCH			
	Event			
	Event			
	Event			
UNIT	Policy Holder			
	Insurance Company UNKNOWN		Name	
UNIT INDIVIDUAL	Individual			
	Driver STEPHEN ANTHONY WALLACE		Citations Issued 0	Sex MALE
	Address 200 W HIAWATHA UNIT 1119 WISCONSIN DELLS, WI 53965 , US		Date of Birth [REDACTED]	Race BLACK/AFRICAN AMERICAN
			Driver License Number	
01 001	Safety Equipment		On Duty Crash	
			Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
	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		
Distracted By Action UNKNOWN				

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UNIT INDIVIDUAL 01 001	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					