## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Override	Primary Crash I	Primary Crash Document # Agence 23-02		Crash Number	Investigating Officer/Deputy DEPUTY A. JAHNKE		
Crash Date         Crash Time           03/02/2023         08:23 PM           Date Notified         Time Notified           03/02/2023         08:25 PM           On Emergency         Hit and Run			Date Arrived 03/02/2023		Time Arrived		
					08:33 PM		
		01		nits	Total Injured Total Killed 00		ed
				Work Zone		Trailer or Towed Repo	
Government Property	Active Sc	hool Zone	NO School	Bus Related	Tags		
Reportable	Crash Type DT4000 (STA	NDARD CRASH	1)		Amend	ed	Secondary Crash
<b>Description</b>							_
Diagram				Not to	Scale	Photos By <b>DEPUTY A.</b>	,
40TS						Additional Info	rmation
US I	HY 14	01	J	0,			
	(or )						
10			Rainhow Rd	STOP			
, a sworn law enforce	ment officer, agre	ee that I have no	ot added	I any CJIS data in this	report.		
UNIT 1 TRAVELING WESTBOUI THE LEFT TURN AND ENTEREI		RAINBOW RD WHE	N ATTEM	PTING TO COMPLETE A LE	EFT TURN ONT	O RAINBOW RE	D. UNIT 1 DID NOT MAKE

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Crash Date 03/02/2023

Crash Time 08:23 PM

	_oc										
- 1	ON	USH14 WB			L	.atitude			Longitud	de	
	28 FT N						43.179577551			-90.055840171	
	OF RAINBOW RD					X Coordinate Y			Y Coord	Y Coordinate	
	IN THE VILLAGE OF SPRING GREEN IN SAUK COUNTY					251642.4375		478529			
	IN S	SAUK COUNTY				Structure Type					
						NO STRUCTURE					
(	Cras	sh Scene									
1		Harmful Event			l e	irst Harmfu	ıl Event I.o	cation			
	DIT					ON ROAD		Cation			
ŀ		ner of Collision									
	00 - NO COLLISION W/VEHICLE IN TRANSPORT					Light Condition  DARK/LIGHTED					
	Road Surface Condition(s)										
	Roac	a Surface Condition(s)			"	Roadway Fa	actor(s)				
	DRY	<b>(</b>									
Ì	Envir	ronment Factor(s)									
	NON	NE			N	IONE					
ŀ	Wea	ther Condition(s)									
	CLC	DUDY									
ŀ	Anim	nal Type			R	Relation To Trafficway					
	74mmar type					TRAFFICWAY - ON ROAD					
l	Cras	h Classification - Location	1		С	rash Class	ification -	Jurisdiction			
	PUBLIC PROPERTY					NO SPECIAL JURISDICTION					
l	Tribal Land					Access Control Special Study					
						O CONT	ROL				
				Intersection 7	ction Type -WAY INTERSECTION						
L			INTERSECTION		FOOK-WA	INTERS	SECTION.				
l		t Summary 💻									
	Unit Status Vehicle Operating As C										
				venicie Op	erating As Clas	sification					
		RANSIT		D CLASS		ssification		AUTOMOE	BILE		
_		<b>RANSIT</b>				ssification				ments	
5	Vehic	_				ssification		AUTOMOE		ments	
01	Vehice PAS	cle Type	Train/Bus # Recorded	D CLASS			Total Traile	AUTOMOE Operating A	s Endorser	ments Mat Types	
01	Vehice PAS	cle Type SSENGER CAR	Train/Bus # Recorded	D CLASS			Total Traile	AUTOMOE Operating A	s Endorser		
01	PAS Total	cle Type SSENGER CAR	Train/Bus # Recorded  Direction Of Travel	Total # Cital 1				AUTOMOE Operating A	s Endorser Total Haz	Mat Types	
0	PAS Total	cle Type SSENGER CAR I Occs rance?		Total # Cital 1	itions Issued		0	AUTOMOE Operating A	s Endorser Total Haz <b>0</b>	Mat Types	
0	Vehice PAS Total 1 Insur YES	cle Type SSENGER CAR I Occs rance?	Direction Of Travel WESTBOUND	Total # Cital 1 Pre Special Fur	CrashTire Mark	(	<b>0</b> Speed Lim	AUTOMOE Operating A  ers  it  Emergency	Total Haz  0 Total Land 2 Motor Vehi	Mat Types es icle Use	
UNIT 01	Vehice PAS Total 1 Insur YES	cle Type SSENGER CAR I Occs rance? St Harmful Event: Collision	Direction Of Travel WESTBOUND	Total # Cital 1 Pre Special Fur	tions Issued  CrashTire  Mark	(	<b>0</b> Speed Lim	AUTOMOE Operating A	Total Haz  0 Total Land 2 Motor Vehi	Mat Types es icle Use	
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NNU 01	Vehic PAS Total 1 Insur YES Most DITC Traffi TWC Surfa BLA Truck	cle Type SSENGER CAR I Occs  rance? St Harmful Event: Collision CH fic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOU k Bus or HazMat  Vehicle License Plate Number AKS9691  Vehicle Identification Nu	Direction Of Travel WESTBOUND With S)	Total # Cita 1 Pre Special Fur NO SPEC Traffic Con NO CONT Road Curva STRAIGH	CrashTire Mark Inction BIAL FUNCTION TROL BATTERING TROL BATTERING	ON S	Speed Lim 55  St WI Year	AUTOMOE Operating A  ers  it  Emergency NOT APPL Traffic Contr NO Road Grade LEVEL  Country of Iss UNITED ST Model	Total Haz  0 Total Land 2 Motor Vehi LICABLE ol Inoperat	es icle Use	
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O1 UNIT 01	Vehick PAS Total 1 Insur YES Most DITC Traffi TWC Surfa BLA Trucl NO	cle Type SSENGER CAR I Occs  rance? St Harmful Event: Collision CH ic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOU k Bus or HazMat  Vehicle License Plate Number AKS9691  Vehicle Identification Nu 2HGFC2F65MH5003  Color SIL - SILVER (ALUM Initial Contact Point 12 - FRONT	Direction Of Travel WESTBOUND With  S)  mber 92	Total # Cita  1  Pre  Special Fur NO SPEC  Traffic Con NO CONT  Road Curva STRAIGH  Plate Type AUT - AU Make HONDA  Body Style SD - SEE Vehicle Da	CrashTire Mark Inction CIAL FUNCTION TROL STATE	ON S	Speed Lim 55  St WI Year 2021	AUTOMOE Operating A  Errs  it  Emergency NOT APPL Traffic Contr NO Road Grade LEVEL  Country of Iss UNITED ST Model CIVIC	Total Haz  0 Total Land 2 Motor Vehi LICABLE ol Inoperat	Mat Types es icle Use tive/Missing	
NNU 01	Vehice PAS Total 1 InsurryES Most DITC Trafff TWC Surfa BLA NO	cle Type SSENGER CAR I Occs  rance? St Harmful Event: Collision CH ic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOU k Bus or HazMat  Vehicle License Plate Number AKS9691  Vehicle Identification Nu 2HGFC2F65MH5003  Color SIL - SILVER (ALUM Initial Contact Point	Direction Of Travel WESTBOUND With  S)  mber 92 INUM)	Total # Cita  1  Pre  Special Fur NO SPEC  Traffic Con NO CONT  Road Curva STRAIGH  Plate Type AUT - AU Make HONDA  Body Style SD - SEE Vehicle Da	CrashTire Mark Detion CIAL FUNCTION TROL Dature T JTOMOBILE DAN	ON S	Speed Lim 55  St WI Year 2021	AUTOMOE Operating A  Errs  it  Emergency NOT APPL Traffic Contr NO Road Grade LEVEL  Country of Iss UNITED ST Model CIVIC	Total Haz  0 Total Land 2 Motor Vehi LICABLE ol Inoperat	es icle Use tive/Missing	

#### **WISCONSIN MOTOR VEHICLE CRASH REPORT**

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

Crash Date 03/02/2023

Crash Time 08:23 PM

		Towed Due To Damage	Ve	ehicle Removed By						
		TOWED BUT NOT DUE TO DISABLE		chiole Removed by						
		What Driver Was Doing	Ve	ehicle Factors						
		LEFT TURN								
		Driver Prior Action Other	N	OT APPLICABLE						
		Driver Actions	<u>'</u>							
	ш	IMPROPER TURN								
$\vdash$	VEHICLE									
LNO	¥									
$\supset$	竝									
	>									
				TO 411						
		Owner Name HONDA LEASE TRUST		Owner Address 3625 W. ROYAL LI	N #400					
5	2	HONDA LEASE TRUST		IRVING, TX 75063						
0	0									
	,	Sequence Of Events								
		Event								
	0	LEFT TURN								
		Event								
	02	DITCH								
		Event								
	03	Event								
	94	Event								
	0									
_		Policy Holder								
LIND		Insurance Company		Individual						
5				NANCY ASKEVOLD						
		Individual								
		Driver		Citations Issued	Sex					
		NANCY ASKEVOLD		1 FEMALE						
	₹	(608) 588-5378	-	Date of Birth	Race					
<b>—</b>	7			WHITE						
	INDIVIDUAL	Address		Driver License Number						
$\supset$	⊡	526 N BALTIMORE ST		STATE: WISCONSIN COUNTRY: UNITED STATES						
	=	SPRING GREEN, WI 53588 , US								
		On Duty Crash		Safety Equipment						
	Sat	fety Equipment		Salety Equipment						
				DESTRAINT LISE LINKNOWN						
				DECEDAINT LICE III	NIZNOVANI					
		Row Seat Po		RESTRAINT USE U	NKNOWN					
		01 - FRONT ROW 07 - LE			NKNOWN					
				RESTRAINT USE U	NKNOWN					
		O1 - FRONT ROW 07 - LE Helmet Use		Helmet Compliance	NKNOWN					
		01 - FRONT ROW 07 - LE			NKNOWN					
		O1 - FRONT ROW 07 - LE Helmet Use		Helmet Compliance	NKNOWN					
_	7	O1 - FRONT ROW  Helmet Use  Eye Protection  Injury Severity		Helmet Compliance	NKNOWN					
01	001	O1 - FRONT ROW O7 - LE Helmet Use  Eye Protection	EFT	Helmet Compliance Tint Compliance	NKNOWN					
01	001	O1 - FRONT ROW  Helmet Use  Eye Protection  Injury Severity	NJURY	Helmet Compliance Tint Compliance Airbag	NKNOWN	Trapped/Extricated				
70	100	O1 - FRONT ROW  Helmet Use  Eye Protection  Injury  Injury Severity  NO APPARENT II  Ejected  Ejection Pa	NJURY	Helmet Compliance Tint Compliance Airbag NON DEPLOYED	NKNOWN	Trapped/Extricated NOT TRAPPED				
70	001	O1 - FRONT ROW  Helmet Use  Eye Protection  Injury  Injury Severity  NO APPARENT II  Ejected  Ejection Pa	NJURY ath	Helmet Compliance Tint Compliance Airbag NON DEPLOYED	NKNOWN					
10	100	O1 - FRONT ROW  Helmet Use  Eye Protection  Injury Severity NO APPARENT II  Ejected NOT EJECTED  Medical Transport  O7 - LE  Injury Severity NO APPARENT II  Ejection Pa NOT EJE	NJURY ath	Helmet Compliance Tint Compliance Airbag NON DEPLOYED CABLE	NKNOWN	NOT TRAPPED				
10	001	O1 - FRONT ROW  Helmet Use  Eye Protection  Injury Severity NO APPARENT II  Ejected NOT EJECTED  Medical Transport NOT TRANSPORTED	NJURY ath	Helmet Compliance Tint Compliance Airbag NON DEPLOYED CABLE	NKNOWN	NOT TRAPPED				
10	001	O1 - FRONT ROW  Helmet Use  Eye Protection  Injury Severity NO APPARENT II  Ejected NOT EJECTED  Medical Transport  O7 - LE  Injury Severity NO APPARENT II  Ejection Pa NOT EJE	NJURY ath	Helmet Compliance Tint Compliance Airbag NON DEPLOYED  CABLE EMS Agency Identifier	NKNOWN	NOT TRAPPED EMS Run #				
10	001	Helmet Use  Eye Protection  Injury Injury Severity NO APPARENT II Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital  Distracted By Source	NJURY ath CCTED/NOT APPLI	Helmet Compliance  Tint Compliance  Airbag  NON DEPLOYED  CABLE  EMS Agency Identifier  Date of Death	NKNOWN	NOT TRAPPED EMS Run #				
10	001	Helmet Use  Eye Protection  Injury Injury Severity NO APPARENT II Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital  Distracted By Source	NJURY ath CCTED/NOT APPLI	Helmet Compliance  Tint Compliance  Airbag  NON DEPLOYED  CABLE  EMS Agency Identifier  Date of Death	NKNOWN	NOT TRAPPED EMS Run #				
01	001	O1 - FRONT ROW Helmet Use  Eye Protection  Injury Injury NO APPARENT II Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital  Distracted By NOT APPLICABL	NJURY ath CCTED/NOT APPLI	Helmet Compliance  Tint Compliance  Airbag  NON DEPLOYED  CABLE  EMS Agency Identifier  Date of Death	NKNOWN	NOT TRAPPED EMS Run #				
10	001	Helmet Use  Eye Protection  Injury Injury Severity NO APPARENT II Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital  Distracted By Source	NJURY ath CCTED/NOT APPLI	Helmet Compliance  Tint Compliance  Airbag  NON DEPLOYED  CABLE  EMS Agency Identifier  Date of Death	NKNOWN	NOT TRAPPED EMS Run #				

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

		Non Motorist	Striking Unit #	Location					
		Prior Action							
TINO	INDIVIDUAL	Action							
		Action Other  Drug & Alcohol	Suspected Alco	hol Use	Suspected Drug Use			To/From School	
•		Alcohol Test Given TEST REFUSED		Alcohol Test Type			Alcohol Test Results		
•		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results			
٤	001	Drug Type							
		Individual Condition  UNDER THE INFLI	UENCE OF MI	EDICATIONS/DRUGS	/ ALCOHOL				
	,	Violations							
		UTC Number	Issue To?	Statute Number	Description				
	6	BG944565	001	346.63(1)(a)	OPERATING WHILE	UNDER THE IN	FLUENCE		