# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 03/13/2023

Crash Time 05:16 AM

	Document Number Override	Primary Crash Document#		Agency Crash Number 23-02477		Investigating Officer/Deputy DEPUTY B. STODDARD				
ַוַ	Crash Date 03/13/2023	Crash Time 05:16 AM		Date Arrived 03/13/2023		Time Arrived 05:19 AM				
֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	Date Notified 03/13/2023	Time Notified 05:16 AM		Total Units 01				Total Killed	led	
֓֞֝֝֞֜֝֓֞֜֝֓֓֓֓֓֓֓֜֟֜֟֓֓֓֓֓֓֓֓֓֓֜֟֜֓֓֓֓֓֡֓֜֡֓֡֓֡֓֜֡֓֜֡֓֡֡֡֡֡֓֜֡֓֡֡֡֡֡֡֓֜֡֡֡֡֡֡	On Emergency Hit	t and Run Lane Clos				Trailer or Towe		Towed	red Reporting Threshold	
5	Government Property	Active Sc	hool Zone	School NO	Bus Related	Tags				
	Reportable	Crash Type DT4000 (STA	NDARD CRASH	ł)		Amen	ded		Secondary Crash	
	Diagram							construction		
	South Shore Rd  01  Ski Hi Rd						Adı	otos By ditional Infor	rmation	
		t to Scale								
	, a sworn law enforceme									
	UNIT 1 WAS SOUTHBOUND ON SO AT THE SOUTHWEST CORNER OF			WING TO	MAKE A RIGHT TURN (	NTO SKI HIRD.	UNIT	1 SLID INTO	THE STOP SIGN POST	

Location ON SKIHI RD

33 FT W

## **WISCONSIN MOTOR VEHICLE CRASH REPORT**

Latitude

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

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Longitude

	33 FT W			43.4200659	993		-89.748	738051	
	OF S SHORE RD IN THE TOWN OF BARABOO		X Coordinate		Y Coordinate				
	IN SAUK COUNTY		277482.34375 4811134.5			4.5			
			Structure Type						
L									
(	Crash Scene								
Ī	First Harmful Event			FirstHarmfu		cation			
ļ	TRAFFIC SIGN POST			SHOULDE					
	Manner of Collision  00 - NO COLLISION W/VEHICLE IN TRANSPO		Light Condition DARK/UNLIT						
ŀ	Road Surface Condition(s)		Roadway Factor(s)						
	snow			nodaway racions)					
ľ	Environment Factor(s)			i					
	NONE			ROAD SUR	RFACE C	ONDITION	(WET, IC)	Y, SNOW, SLUSH,	
Ī	Weather Condition(s)								
	SNOW								
}	Animal Type			Relation To	-				
ŀ	Crash Classification - Location			TRAFFICWAY - ON ROAD  Crash Classification - Jurisdiction					
	PUBLIC PROPERTY			NO SPECIA					
ŀ	Tribal Land			Access Conf	trol			Special Study	
				PARTIAL (	CONTRO	)L			
	Within Interchange Area NO INTERSECTION		Intersection	ction Type ERSECTION					
i	Unit Summary								
$\vec{\exists}$	Unit Status	Vehicle Ope	rating As C	lassification		UnitType			
	IN TRANSIT	D CLASS			AUTOMOBILE				
f	Vehicle Type		1			Operating As Endorsements			
	PASSENGER CAR								
	Total Occs Train/Bus#Recorded	d Total#Citati	ions Issued	† T	otal Traile )	ers	Total Hazñ	Mat Types	
ŀ	Insurance? Direction Of Travel	Pre (	CrashTire	S	peed Lim	it	TotalLane	es	
	YES SOUTHBOUND		Mark		35		2		
	Most Harmful Event: Collision With TRAFFIC SIGN POST		Special Function NO SPECIAL FUNCTION			Emergency Moto NOT APPLICA			
ŀ	Traffic Way	Traffic Contr	rol			Traffic Cont	rol Inoperat	tive/Missing	$\dashv$
	TWO-WAY, NOT DIVIDED	NO CONTI	NO CONTROL			NO			
ſ	Surface Type		Road Curvature			Road Grade			
ļ	BLACKTOP (BITUMINOUS)	STRAIGHT	ı			LEVEL			
	Truck Bus or HazMat NO								
_	Vehicle							ENGINEERIN ENGIN ENGINEERIN ENGIN ENGIN ENGIN ENGINEERIN ENGINEERIN ENGINEERIN ENGINEERIN ENGINEERIN ENGINEERIN ENGINEERI	
20000000	License Plate Number	Plate Type	Plate Type AUT - AUTOMOBILE		t [	Country of Issuance			
SERVINGE SECTION AND ADDRESS OF THE PERSON A	AJR3125	1			٧ŧ	UNITED STATES			
Well Strategies	Vehicle Identification Number	Make		Year		Model			
	S 3MYDLBYV0JY330556	ТОУОТА			018	YARIS IA			
(delication)	Color GRAY	' '	Body Style			Bus Use			
West State			SD - SEDAN  Vehicle Damage				1		
4000000	10 - LEFT SIDE FRONT					7 8 9 10 11			
	Initial Contact Point 10 - LEFT SIDE FRONT Extent Of Damage MINOR DAMAGE		T SIDE RE DE FRONT	AR, 09 - LEFT SIDE					
	MINOR DAMAGE	LL: 1 SIL						5 4 3 2 1	
180	**************************************	•							

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		Towed Due To Damage NOT TOWED		Vehicle Removed By					
		What Driver Was Doing RIGHT TURN Driver Prior Action Other  Driver Actions SPEED TOO FAST/COND		Vehicle Factors					
				NOT APPLICABLE					
				NOT AT ELOADEE					
UNIT	<u> </u>								
5	VEHICL	Course North		L O com and delivere					
٤	5	Owner Name CORBACH SINEAD TOOLIS (608) 432-2964		Owner Address 1540 W PINE ST APT 406 BARABOO, WI 53913 , US					
		Sequence Of Events							
	5	Event TRAFFIC SIGN POST							
	8	Event							
	8	Event							
	3	Event							
l <u>⊢</u>		Policy Hölder							
IN I		Insurance Company PROGRESSIVE-CASUAL		Individual CORBACH TOOLIS					
		Individual							
		Driver	ionenonenonenonenonenonenon	Citations Issued   Sex					
	4	CORBACH SINEAD TOOR (608) 432-2964	LIS	0 FEMALE					
  -	INDIVIDUAL	(000) 402 2004		Date of Birth	Race				
E S	፷	Address		Drivert icense Number	Driver i cense Number				
	불	1540 W PINE ST APT 406 BARABOO, WI 53913 , US		STATE: WISCONSIN COUNTRY: UNITED STATES					
	Sai	On Dut fety Equipment	y Crash	Safety Equipment	Safety Equipment				
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP	SHOULDER & LAP BELT				
		HelmetUse		Helmet Compliance					
		Eye Protection		Tint Compliance					
۶	100	Injury S	everity	Airbag					
	•	Injury NO APPARENT INJURY  Ejected Ejection Path		NON DEPLOYED		Trannod/Extricator			
		NOT EJECTED	NOT EJECTED/NOT AF	PPLICABLE		Trapped/Extricated NOT TRAPPED			
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Agency Identifier				
		Hospital		Date of Death	Date of Death Time of Death				
		   Distracted By	ted By Source	I		<u> </u>			
		Distracted By Action UNKNOWN							
	95938355								

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

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		Striking Non Motorist	Unit#	Location					
		Prior Action Prior Action							
		Action							
	AL								
LIND	INDIVIDUAL								
_									
		Action Other						To/From School	
		I Drug & Alcohol NO	ted Alcohol U	jse	Suspected Drug Use				
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results		
		TEST NOT GIVEN Drug Test Given		Drug Test Type		Drug Test Results			
		TEST NOT GIVEN Drug Type							
2	8	Drug Type							
		Individual Condition							
		APPEARED NORMAL							
		ndividual ,							
	_	Passenger AMBER LYNN SCHANKE (608) 434-4594		Oitations issued Sex FEMALE					
⊨	INDINIDUA	(00), 404 4004			Date of Birth	Race WHITE			
₽ L		Address 910 LAKE ST APT 303 BARABOO, WI 53913, US			Driver License Number	!			
	1				STATE: WISCONSIN COUNTRY: UNITED STATES				
	Sai	On Duty Crash  Ifety Equipment			Safety Equipment				
		Row Seat Position		SHOULDER & LAP BELT					
		01 - FRONT ROW 09 - RIGHT HelmetUse		Helmet Compliance					
		Eye Protection			Tint Compliance				
۶	005	Injury Severity			Airbag				
•	5	Injury NO APPARENT INJURY  Ejected Ejection Path		NON DEPLOYED		Trapped/Extricated			
		NOT EJECTED NOT EJECTED/NOT APPli Medical Transport		LICABLE  EMS Agency Identifier		NOT TRAPPED  EMS Run#			
		NOT TRANSPORTED							
		Hospital	·-		Date of Death		Time of Death		
		Distracted By	ed By Source	•					
		Distracted By Action							
		Non Motorist	Unit#	Location					

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		Prior Action							
TINO	DUAL	Action							
	INDIVIDUAL								
		Action Other						To/From School	
	L.	Drug & Alcol	Suspected Alcohol U	lse	Suspected Drug Use NO				
		Alcohol Test Given Alcohol Test Tyş TEST NOT GİVEN		Alcohol Test Type	9		Alcohol Test Results		
		Drug Test Given Drug Test Type TEST NOT GIVEN		Drug Test Type	Drug Test Resu				
01	005	Drug Type							
		Individual Condition							
		APPEARED NORMAL							
Property Owner									
PROP 01					Address 101 CEDAR ST BARABOO, WI 53913	, US			
	Fixe	ed Objects S	truck			erererererere	TO COUNTE COUNTE COUNTER COUNT		
	6	Striking Unit	Struck Object TRAFFIC SIGN POST	T				Damage Tag Number 337932	