

6TL0CCZ7VL

23-03939

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 6TL0DQPGFC		Primary Crash Document#	Agency Crash Number 23-03939	Investigating Officer/Deputy DEPUTY B. SONN	
Crash Date 04/22/2023		Crash Time 01:14 AM	Date Arrived 04/22/2023	Time Arrived 01:22 AM	
Date Notified 04/22/2023		Time Notified 01:14 AM	Total Units 01	Total Injured 01	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 checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input checked="" type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram 	Reconstruction By SAUK COUNTY SHERIFF
	Photos By 9104
	Additional Information PHOTOS

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

REPORT OF A ROLLOVER CRASH ON HWY 12 NEAR FERN DELL RD. EXIT, EASTBOUND HWY 12 ARRIVED ON SCENE SHORTLY AFTER AND MADE CONTACT WITH DRIVER 1 AT VEHICLE 1, VERBALLY IDENTIFIED DRIVER 1. DRIVER 1 IS ONE OF TWO REGISTERED OWNERS OF VEHICLE 1. DRIVER 1 APPEARED CONFUSED AND DISORIENTED. DRIVER 1 HAD A LARGE AREA OF SWELLING ON RIGHT EYEBROW AND FOREHEAD AREA. DRIVER 1 WISHED TO BE SEEN BY EMS. DRIVER 1 HAD STRONG ODOR OF INTOXICANTS COMING FROM HER PERSON. DRIVER 1 ADMITTED TO ALCOHOL CONSUMPTION AS LITTLE AS 20-30 MINUTES PRIOR TO OPERATING THE MOTOR VEHICLE. DRIVER 1 HAD GLOSSY AND WATERY EYES. CRASH INVESTIGATION INDICATED SKID MARKS COMING FROM HWY 12 THAT CONTINUED INTO THE GRASS AND DITCH AREA BETWEEN HWY 12 AND MOON RD. VEHICLE 1 HAD DAMAGE ON ALL AREAS AND FULL AIRBAG DEPLOYMENT. CRASH INVESTIGATION REVEALED DRIVER 1 DID NOT HAVE SHOULDER/LAP BELT FASTENED OR ON DURING THE CRASH (LOCKED VERTICAL NEAR B PILLAR). OWI INVESTIGATION CONDUCTED. DRIVER 1 ARRESTED FOR OWI 1ST, AND CITED FOR DEVIATION FROM DESIGNATED LANE.

CORRECTING A COUPLE OF SELECTED BOXES THAT ARE INCORRECT.

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[Empty box for additional information]

Location

ON RAMP USH12 EB 363 FT S OF MOON RD IN THE TOWN OF DELTON IN SAUK COUNTY	Latitude 43.560397288	Longitude -89.779372351
	X Coordinate 275523.0625	Y Coordinate 4826802.5
	Structure Type	

Crash Scene

First Harmful Event OVERTURN/ROLLOVER	First Harmful Event Location ON ROADWAY	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DARK/UNLIT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLEAR		
Animal Type	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control FULL 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 (SPORT) UTILITY VEHICLE	Operating As Endorsements			
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 2	Total Trailers 0	Total HazMat Types 0
	Insurance? UNKNOWN	Direction Of Travel EASTBOUND	<input checked="" type="checkbox"/> Pre Crash Tire Mark	Speed Limit 65	Total Lanes 4
	Most Harmful Event: Collision With OVERTURN/ROLLOVER	Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE		
	Traffic Way DIVIDED HWY W/TRAFFIC BARRIER	Traffic Control NO CONTROL	Traffic Control Inoperative/Missing NO		
	Surface Type CONCRETE	Road Curvature CURVE RIGHT	Road Grade LEVEL		
	Truck Bus or HazMat NO				

Vehicle

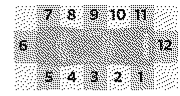
01	License Plate Number 579VAR	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1V2HR2CA2JC529067	Make VOLKSWAGEN	Year 2018	Model ATLAS
	Color RED - RED	Body Style UT - SPORT UTILITY VEHICLE	Bus Use	

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UNIT VEHICLE	Initial Contact Point 12 - FRONT		Vehicle Damage 15 - ALL AREAS		
	Extent Of Damage DISABLING DAMAGE				
	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By CRAIGS TOWING		
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors NOT APPLICABLE		
UNIT VEHICLE	Driver Prior Action Other				
	Driver Actions FAILURE TO CONTROL, FAILED TO KEEP IN DESIGNATED LANE, OVER-CORRECTING/OVER-STEERING				
	Owner Name TATIANA A LAVROVA (608) 370-3946		Owner Address 1115 SILVER DR APT 107 BARABOO, WI 53913 , US		
01 01	Sequence Of Events				
	01	Event OVERTURN/ROLLOVER			
	02	Event			
	03	Event			
04	Event				
	Individual				
	Driver TATIANA A LAVROVA (608) 370-3946		Citations Issued 2	Sex FEMALE	
	Address 1115 SILVER DR APT 107 BARABOO, WI 53913 , US		Date of Birth 10/29/1994	Race WHITE	
UNIT INDIVIDUAL	Driver License Number L1618019488909		STATE: WISCONSIN COUNTRY: UNITED STATES		
	Safety Equipment		On Duty Crash		
	Row 01 - FRONT ROW		Seat Position 07 - LEFT	Safety Equipment NONE USED - VEHICLE OCCUPANT	
	Helmet Use		Helmet Compliance		
01 001	Eye Protection		Tint Compliance		
	Injury		Injury Severity SUSPECTED MINOR INJURY	Airbag DEPLOYED-COMBINATION	
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED	
	Medical Transport EMS GROUND		EMS Agency Identifier 6000123	EMS Run #	
Hospital ST CLARE'S HOSPITAL		Date of Death	Time of Death		
Distracted By		Distracted By Source UNKNOWN			

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UNIT	Distracted By Action UNKNOWN				
	INDIVIDUAL	Non Motorist	Striking Unit #	Location	
		Prior Action			
	Action				
	Action Other		To/From School		
	01	001	Drug & Alcohol	Suspected Alcohol Use YES	Suspected Drug Use NO
			Alcohol Test Given TEST GIVEN	Alcohol Test Type BLOOD	Alcohol Test Results PENDING
			Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results
			Drug Type		
	Individual Condition UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL, CONFUSED OR DISORIENTED (NON LUCID)				
02	01	Violations			
		UTC Number BJ678802	Issue To? 001	Statute Number 346.63(1)(a)	Description OPERATING WHILE UNDER THE INFLUENCE
		UTC Number BJ678803	Issue To? 001	Statute Number 346.13(3)	Description DEVIATION FROM DESIGNATED LANE