

6TL0CBQ6RQ

23-05028

# 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 <b>23-05028</b>	Investigating Officer/Deputy <b>DEPUTY A. JAHNKE</b>	
Crash Date <b>05/20/2023</b>		Crash Time <b>01:33 AM</b>	Date Arrived <b>05/20/2023</b>	Time Arrived <b>03:53 AM</b>	
Date Notified <b>05/20/2023</b>		Time Notified <b>03:40 AM</b>	Total Units <b>01</b>	Total Injured <b>00</b>	Total Killed <b>00</b>
<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 <b>NO</b>		Tags	
<input type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

## Description

Diagram		Reconstruction By
		DEPUTY A. JAHNKE
Photos By DEPUTY A. JAHNKE		Additional Information PHOTOS
<input checked="" type="checkbox"/> I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.		
UNIT 1 TRAVELED EASTBOUND TO TURN RIGHT INTO DRIVEWAY. UNIT 1 CUT THE TURN TOO SHORT AND DROVE OFF DRIVEWAY INTO THE FRONT YARD DITCH-LINE. UNOCCUPIED AT TIME OF CALL. MINOR TO NO DAMAGE SUSTAINED.		

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Location

Table with 3 columns: Address (PRIVATE PROPERTY S6220 STH154 EB), Latitude (43.415731153), Longitude (-90.119190442), X Coordinate (247473.640625), Y Coordinate (4811709.5), Structure Type (HOUSE/BUILDING).

Crash Scene

Table with 2 main columns: Event Details (DITCH, Manner of Collision: NO COLLISION, Road Surface: DRY, Environment: NONE, Weather: CLEAR) and Location/Classification (OFF ROADWAY, DARK/UNLIT, PRIVATE PROPERTY).

Unit Summary

Table with 3 columns: Unit Status (IN TRANSIT), Vehicle Operating As Classification (D CLASS), Unit Type (AUTOMOBILE). Includes details on citations, insurance, and crash event.

Table with 4 columns: License Plate Number (231YCR), Plate Type (AUT - AUTOMOBILE), St (WI), Country of Issuance (UNITED STATES). Includes vehicle identification, color, and damage extent (MINOR DAMAGE).



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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OWNER</b>	
	What Driver Was Doing <b>RIGHT TURN</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>UNKNOWN</b>			
01	Owner Name <b>CAYLA HILL (608) 408-7860</b>		Owner Address <b>S6220 STATE ROAD 154 HILLPOINT, WI 53937 , US</b>	
	<b>Sequence Of Events</b>			
01 02 03 04	Event <b>RIGHT TURN</b>			
	Event <b>DITCH</b>			
	Event			
	Event			
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>PROGRESSIVE-CLASSIC-INS-CO</b>		Individual <b>CAYLA HILL</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>CAYLA HILL (608) 408-7860</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>
	Address <b>S6220 STATE ROAD 154 HILLPOINT, WI 53937 , US</b>		Date of Birth	Race <b>WHITE</b>
	Driver License Number		<b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01 001	<b>Safety Equipment</b>		On Duty Crash	
	Row <b>01 - FRONT ROW</b>		Seat Position <b>07 - LEFT</b>	Safety Equipment <b>SHOULDER &amp; LAP BELT</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>INDIVIDUAL</b>	<b>Non Motorist</b>		Striking Unit #	Location	
		Prior Action				
	Action					
	Action Other				To/From School	
	<b>01</b>	<b>001</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>NOT OBSERVED</b>			