

6TL0D5DZ11  
23-13204

# 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>23-13204</b>	Investigating Officer/Deputy <b>DEPUTY J. HUNTER</b>	
Crash Date <b>12/09/2023</b>		Crash Time <b>10:00 PM</b>	Date Arrived <b>12/09/2023</b>	Time Arrived <b>10:22 PM</b>	
Date Notified <b>12/09/2023</b>		Time Notified <b>10:00 PM</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>PRIVATE PROPERTY/PARKING LOT</b>			<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

## Description

Diagram	Reconstruction By
	Photos By
	Additional Information <b>NONE</b>

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

OPERATOR OF UNIT 1 REALIZED SHE MISSED A TURN AND ATTEMPTED TO TURN AROUND BY PULLING INTO A NARROW FIELD DRIVE. THE FRONT DRIVER'S SIDE TIRE OF UNIT 1 SLIPPED OFF THE DRIVE AND DANGLED OVER THE CULVERT. VEHICLE WAS PULLED OUT BY A TOW TRUCK AND CONTINUED ON ITS WAY.

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## Location

ON CTHWD EB 302 FT N OF D AND W RD IN THE TOWN OF WINFIELD IN SAUK COUNTY	Latitude <b>43.591912074</b>	Longitude <b>-89.968094426</b>
	X Coordinate <b>260405.28125</b>	Y Coordinate <b>4830830</b>
	Structure Type <b>NO STRUCTURE</b>	

## Crash Scene

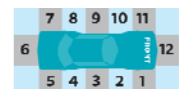
First Harmful Event <b>DITCH</b>	First Harmful Event Location <b>SHOULDER LEFT</b>	
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DARK/UNLIT</b>	
Road Surface Condition(s) <b>DRY</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>WEATHER CONDITIONS</b>		
Weather Condition(s) <b>SNOW</b>		
Animal Type	Relation To Trafficway <b>TRAFFICWAY - NOT ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>	Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land	Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>

## Unit Summary

<b>UNIT</b>	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>	
	Vehicle Type <b>PASSENGER CAR</b>	Operating As Endorsements			
	Total Occs <b>2</b>	Train/Bus # Recorded	Total # Citations Issued <b>1</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>YES</b>	Direction Of Travel <b>EASTBOUND</b>	<input type="checkbox"/> <b>Pre CrashTire Mark</b>	Speed Limit <b>45</b>	Total Lanes <b>2</b>
	Most Harmful Event: Collision With <b>DITCH</b>	Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>	Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>	Road Curvature <b>CURVE LEFT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>				

## Vehicle

<b>UNIT</b>	<b>01</b>	<b>Vehicle</b>			
		License Plate Number <b>DL29988</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>IL</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>KMHCT5AE6CU058120</b>	Make <b>HYUNDAI</b>	Year <b>2012</b>	Model
		Color	Body Style		Bus Use
		Initial Contact Point <b>12 - FRONT</b>	Vehicle Damage <b>12 - FRONT</b>		
		Extent Of Damage <b>MINOR DAMAGE</b>			



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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>	
	What Driver Was Doing <b>OTHER</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>IMPROPER TURN, FAILURE TO CONTROL</b>			
01	Owner Name <b>DANIELLE GATES</b>		Owner Address <b>3042 LATHAM ST ROCKFORD, IL 61103 , US</b>	
	<b>Sequence Of Events</b>			
01 02 03 04	Event <b>DITCH</b>			
	Event			
	Event			
	Event			
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>PROGRESSIVE-ADVANCED-INSURANCE-CO</b>		Individual <b>DANIELLE GATES</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>DANIELLE GATES</b>		Citations Issued <b>1</b>	Sex <b>FEMALE</b>
	Address <b>3042 LATHAM ST ROCKFORD, IL 61103 , US</b>		Date of Birth	
	Driver License Number <b>STATE: ILLINOIS COUNTRY: UNITED STATES</b>		Race	
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 Compliance	
	Helmet Use		Tint Compliance	
	Eye Protection		Airbag <b>NON DEPLOYED</b>	
	<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</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>UNKNOWN</b>		Distracted By Action <b>UNKNOWN</b>		

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

<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>APPEARED NORMAL</b>					
		<b>Individual</b>					
		Passenger <b>CORY BORK</b>			Citations Issued <b>0</b>	Sex <b>MALE</b>	
					Date of Birth	Race	
		Address <b>5048 DIANE CT ROCKFORD, IL 61108 , US</b>			Driver License Number <b>STATE: ILLINOIS COUNTRY: UNITED STATES</b>		
		<b>01</b>	<b>002</b>	<b>Safety Equipment</b>		On Duty Crash	
				Safety Equipment <b>SHOULDER &amp; LAP BELT</b>			
Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</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>01</b>	<b>002</b>	<b>Distracted By</b>					
		Distracted By Source					
		Distracted By Action					
<b>UNIT</b>	<b>INDIVIDUAL</b>	<b>Non Motorist</b>		Striking Unit #	Location		

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<b>UNIT</b>	Individual				
	Prior Action  Action  Action Other _____ To/From School _____				
<b>01</b>	<b>002</b>	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
		Alcohol Test Given	Alcohol Test Type	Alcohol Test Results	
		<b>TEST NOT GIVEN</b>			
		Drug Test Given	Drug Test Type	Drug Test Results	
		<b>TEST NOT GIVEN</b>			
	Drug Type				
	Individual Condition				
	<b>APPEARED NORMAL</b>				
	<b>Violations</b>				
<b>01</b>	UTC Number	Issue To?	Statute Number	Description	
	<b>BG110222-0</b>	<b>001</b>	<b>341.04(1)</b>	<b>NON-REGISTRATION OF AUTO, ETC</b>	