WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash D	Document #	Agency 24-005	Crash Number		ating Officer/Deputy Y Z. DRILL			
ار	Crash Date	Crash Time		Date An		Time Arrived				
:	01/13/2024	07:35 PM		01/13/2	2024	07:35 PM				
	Date Notified	Time Notified		Total Ur	nits	Total Injured		Total Killed	I	
2	01/13/2024	07:35 PM	T	01					T	
	On Emergency Hi	t and Run	Lane Closu		Work Zone	Trailer	or To	owed	Reporting Threshold	
	Government Property	Active Sc	hool Zone	School I	Bus Related	Tags				
	Reportable	Crash Type DT4000 (STA	NDARD CRASH)		Amend	led		Secondary Crash	
İ	Description 	•							•	
	Diagram						Reco	onstruction	Ву	
							Phot	tos By		
							Addi NO I	tional Inforr NE	mation	
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.									
	DRIVER OF UNIT ONE NEGOTIATI									
	ROADWAY AND SLID INTO A FRESH SNOWBANK. DRIVER ADMITTED TO THIS BEING THE FIRST TIME HE HAS DRIVEN IN THE SNOW. ONLY DAMAGE TO VEHICLE WAS A POPPED RIVET ON THE PASSENGER SIDE CORNER OF THE BUMPER, LESS THAN REPORTABLE LIMIT. VEHICLE WAS PULLED FROM THE SNOWBANK BY MACHBIENER ALTO INCOMPANY FOR BUTTEN DESCRIPTION OF THE SNOWBANK BY MACHBIENER ALTO INCOMPANY FOR BUTTEN DESCRIPTION OF THE SNOWBANK BY MACHBIENER ALTO INCOMPANY FOR BUTTEN DESCRIPTION OF THE SNOWBANK BY MACHBIENER BUTTEN DESCRIPTION OF THE SNOWBANK BY MACHBIENER BUTTEN DESCRIPTION OF THE SNOWBANK BY MACHBIENER BUTTEN BY MACHBIENER BUTTEN BUTTEN BY MACHBIENER BY M									
	SNOWBANK BY NACHRIENER AUTO, INFORMATION EXCHANGED BETWEEN REGISTERED OWNER AND TOW COMPANY FOR FUTURE PAYMENT. DRIVER									

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Crash Date 01/13/2024

Crash Time 07:35 PM

Loc	ation										
ON CTHB SB						Latitude		Longitude			
52 FT W						43.255979933		-89.943880263			
	CTHC SB	X Coordinate		Y Coo	Y Coordinate						
	HE TOWN OF TROY SAUK COUNTY	261041.	109375		4793	450					
		Structure Type NO STRUCTURE									
					NOSIK	OCTORL					
	sh Scene										
	Harmful Event					nful Event	Location				
DIT					ON ROA						
	ner of Collision	EHICLE IN TRANSPORT			Light Con						
	d Surface Condition(s)	EHICLE IN TRANSPORT			DARK/UNLIT Roadway Factor(s)						
	DW, ICE				Roadway	r dotor(3)					
Fnvi	ronment Factor(s)				<u> </u>						
	ATHER CONDITIONS				NONE						
Wea	ther Condition(s)				-						
	DW, SEVERE WINDS,	BLOWING SNOW									
Anin	nal Type				Relation 1	o Trafficw	av				
	••						N ROAD				
Cras	h Classification - Location	1			Crash Cla	ssification	- Jurisdiction				
PUE	BLIC PROPERTY				NO SPECIAL JURISDICTION						
Triba	al Land				Access Control				Special Study		
					NO CON	TROL					
	in Interchange Area	Junction Location		Intersection							
NO		NON-JUNCTION		NOT AN	INTERSE	CHON					
	t Summary \blacksquare						_				
1	Status		1	erating As C	Classification	l	Unit Type	D E			
	RANSIT cle Type	D CLASS	D CLASS			AUTOMOBILE Operating As Endorsements					
	ORT) UTILITY VEHIC	LE					Operating F	S Eliuoi:	sements		
Tota	l Occs	Train/Bus # Recorded		ations Issued	t	Total Tra	ailers	Total F	łazMat Types		
1			0		0		0				
	rance?	Direction Of Travel	Pre CrashTire						anes		
YES		SOUTHBOUND	Mark			55		nergency Motor Vehicle Use			
DIT	t Harmful Event: Collision CH	With		Special Function NO SPECIAL FUNCTION			NOT APPLICABLE				
	îc Way		Traffic Cont	trol				Traffic Control Inoperative/Missing			
	D-WAY, NOT DIVIDED)	NO CONT				NO				
	асе Туре		Road Curva		Road Grade						
	ACKTOP (BITUMINOU k Bus or HazMat	JS)	CURVE L	EFT	LEVEL						
NO	K Bus or HazMat										
,	Vehicle										
	License Plate Number		Plate Type	-		St	Country of Is				
AFE5034 Vehicle Identification Number 1C4NJCEB8FD190789			AUT - AUTOMOBIL				UNITED STATES				
			Make			Year		Model COMPASS			
				JEEP		2015		3			
	Color		Body Style	• •							
				UT - SPORT UTILITY VEHICLE Vehicle Damage							
Ä	Initial Contact Point 00 - NON-COLLISIO	veriicie Da	7 8 9 10 11					7 8 9 10 11			
EHICL	Extent Of Damage	01 - RIG	01 - RIGHT FRONT CORNER					6 2 12			
MINOR DAMAGE				oom comen					5 4 3 2 1		

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		Towed Due To Damage		Ve	hicle Removed By					
		NOT TOWED		'						
		What Driver Was Doing		Vehicle Factors						
		LEFT TURN Driver Prior Action Other			T APPLICABLE					
					71 APPLICABLE					
		Driver Actions								
	ш	NO CONTRIBUTING ACT	ION							
—	ï									
LNO	=									
\supset	VEHICLE									
	>									
		Owner Name			Ourser Address					
		CRYSTAL MCGEOUGH			Owner Address 28769 CLARY LN					
7	01	(920) 728-7666			RICHLAND CENTER, WI 53581 , US					
_		,								
		Sequence Of Events								
	01	MOTOR VEH IN TRANSP	ORT							
	02	Event DITCH								
		Event								
	03									
	04	Event								
		Policy Holder								
LINO		Insurance Company		т.	L P. L.					
5		WISCONSIN-MUTUAL-IN	s-co		Individual CRYSTAL MCGEOUGH					
					OKTOTAL MODEOUGH					
		Individual								
	INDIVIDUAL	Driver LEORA BARRETTE (920) 728-7666			Citations Issued	Sex				
					0 FEMALE					
					Date of Birth	Race WHITE				
LNO	<u>ا</u>									
5	2	Address 28769 CLARY LN RICHLAND CENTER, WI 53581, US			Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
	Z									
		,								
		On Duty Crash								
	Sat	fety Equipment			Safety Equipment					
	-				SHOULDER & LAP BELT					
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	'	SHOULDER & LAP	DELI				
		Helmet Use	U/ - LEFT		Helmet Compliance					
		neimet ose								
		Eye Protection			Tint Compliance					
		Lye i lotection			Till Compliance					
_	_	Injury Severity			Airbag					
2	90	Injury NO APPARENT INJURY Ejected Ejection Path NOT EJECTED NOT EJECTED/NOT APP			NON DEPLOYED					
					Trapped/Extricated					
					LICABLE		NOT TRAPPED			
		Medical Transport			EMS Agency Identifier		EMS Run #			
		NOT TRANSPORTED								
					Date of Death Time of Death					
		Distract	ted By Source							
		Distracted By NOT A	APPLICABLE (NOT DIST	RAC1	(ED)					
		Distracted By Action								
		NOT DISTRACTED								

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		Non Motorist Striking Unit #	Location							
		Prior Action								
LIND	INDIVIDUAL	Action								
		Action Other					To/From School			
	ı	Drug & Alcohol NO	ol Use	Suspected Drug Use NO						
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	е		Alcohol Test Results				
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results	3				
2	001	Drug Type								
		Individual Condition								
		APPEARED NORMAL								