

6TL0D6N052
24-00410

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 24-00410		Investigating Officer/Deputy DEPUTY B. STODDARD	
Crash Date 01/12/2024		Crash Time 08:13 AM		Date Arrived 01/12/2024		Time Arrived 08:17 AM	
Date Notified 01/12/2024		Time Notified 08:13 AM		Total Units 01		Total Injured 00	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 type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

Description

Diagram <div style="border: 1px solid black; width: 100px; height: 100px; margin: 20px auto; text-align: center; padding: 5px;"> Non-Reportable </div>	Reconstruction By
	Photos By
	Additional Information NONE

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

UNIT 1 SLID THROUGH THE STOP SIGN OF NEWMAN RD. AND CTY W. THE ROAD SURFACE CONDITIONS WERE SNOW COVERED WITH ICE. UNIT 1 ENTERED THE EAST DITCH OF CTY. W. NO DAMAGE WAS OBSERVED ON UNIT 1. CRAIGS. TOWING WAS CALLED PRIOR TO ARRIVAL AND REMOVED THE VEHICLE.

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Location

ON CTHW NB 37 FT W OF NEUMAN RD IN THE TOWN OF GREENFIELD IN SAUK COUNTY	Latitude 43.452564011	Longitude -89.70511344
	X Coordinate 281131.28125	Y Coordinate 4814628
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event OTHER OBJECT - NOT FIXED	First Harmful Event Location ON ROADWAY	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAYLIGHT	
Road Surface Condition(s) SNOW, SLUSH	Roadway Factor(s) ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)	
Environment Factor(s) NONE		
Weather Condition(s) SNOW		
Animal Type	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location INTERSECTION	Intersection Type T-INTERSECTION

Unit Summary

UNIT 01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE		
	Vehicle Type PASSENGER CAR			Operating As Endorsements		
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 45	Total Lanes 2	
	Most Harmful Event: Collision With OTHER FIXED OBJECT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control STOP SIGN		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade DOWNHILL	
	Truck Bus or HazMat NO					

Vehicle

VEHICLE 01	License Plate Number BK74787	Plate Type AUT - AUTOMOBILE	St IL	Country of Issuance UNITED STATES	
	Vehicle Identification Number 4S4BSENC1H3404790	Make SUBARU	Year 2017	Model	
	Color	Body Style		Bus Use	
	Initial Contact Point 12 - FRONT	Vehicle Damage 00 - NO DAMAGE			
	Extent Of Damage NO DAMAGE				



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UNIT VEHICLE	Towed Due To Damage TOWED BUT NOT DUE TO DISABLING DAMAG		Vehicle Removed By CRAIGS TOWING	
	What Driver Was Doing SLOW/STOPPING		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
01	Owner Name JAMES MAY (212) 779-8010		Owner Address 3490 TIMBERLINE DR QUINCY, IL 62305 , US	
	Sequence Of Events			
01 02 03 04	Event MOTOR VEH IN TRANSPORT			
	Event OTHER OBJECT - NOT FIXED			
	Event			
	Event			
UNIT	Policy Holder			
	Insurance Company STATE-FARM-MUTUAL-AUTOMOBILE-INS-CO		Individual LINDSAY MAY	
UNIT INDIVIDUAL	Individual			
	Driver LINDSAY MAY (212) 779-8010		Citations Issued 0	Sex FEMALE
	Address 3490 TIMBERLINE DR QUINCY, IL 62305 , US		Date of Birth	Race WHITE
	Driver License Number			
01 001	Safety Equipment		On Duty Crash	
			Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	RESTRAINT USE UNKNOWN	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED
Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #
Hospital		Date of Death		Time of Death
Distracted By		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				

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UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location	
		Prior Action				
		Action				
	Action Other					To/From School
	Drug & Alcohol		Suspected Alcohol Use NO		Suspected Drug Use NO	
	Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type		Alcohol Test Results	
	Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	
	Drug Type					
	Individual Condition APPEARED NORMAL					
	01	001				