

6TL0C22Z09
24-00876

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

6TL0C22Z09

Document Number Override		Primary Crash Document #		Agency Crash Number 24-00876		Investigating Officer/Deputy DEPUTY A. WILCOX	
Crash Date 01/24/2024		Crash Time 07:17 AM		Date Arrived 01/24/2024		Time Arrived 07:31 AM	
Date Notified 01/24/2024		Time Notified 07:26 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 type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram		Reconstruction By	
		Photos By A. WILCOX	
		Additional Information PHOTOS	

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

ON 01/24/2024, I WAS DISPATCHED TO CTH B AND CASSEL ROAD IN THE TOWN OF TROY FOR A TRAFFIC ACCIDENT. UPON MY ARRIVAL, I NOTICED THE ROADWAY TO BE WET AND SLIGHTLY ICY. I OBSERVED UNIT 1 IN THE DITCH. UNIT 1 OPERATOR STATED SHE WAS ON HER WAY TO SCHOOL TRAVELING E/B ON THE B WHEN SHE WAS MAKING A SLIGHT RIGHT-HAND CURVE. UNIT 1 OPERATOR STATED UNIT 1 STARTED TO LOSE CONTROL, AND SHE HIT THE SNOW BANK, WHICH MADE UNIT 1 ROLLED OVER MULTIPLE TIMES BEFORE IT CAME TO A STOP ON ALL FOUR WHEELS IN THE CORNFIELD. UNIT 1 OPERATOR STATED SHE HAD NO INJURIES. EVERETT'S TOWING TOWED UNIT 1.

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Location

ON CTHB EB 246 FT W OF CASSELL RD IN THE TOWN OF TROY IN SAUK COUNTY	Latitude 43.249556177	Longitude -89.858780805
	X Coordinate 267924.71875	Y Coordinate 4792497
	Structure Type NO STRUCTURE	

Crash Scene

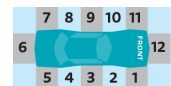
First Harmful Event OVERTURN/ROLLOVER	First Harmful Event Location ON ROADWAY	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAWN	
Road Surface Condition(s) ICE	Roadway Factor(s) ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)	
Environment Factor(s) NONE		
Weather Condition(s) FOG		
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 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 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 EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With OVERTURN/ROLLOVER		Special Function NO SPECIAL FUNCTION	Emergency Motor Vehicle Use NOT APPLICABLE		
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL	Traffic Control Inoperative/Missing NO		
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature CURVE RIGHT	Road Grade LEVEL		
	Truck Bus or HazMat NO					

Vehicle

UNIT	VEHICLE	License Plate Number AMN1515	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
		Vehicle Identification Number JTDBT923171087150	Make TOYOTA	Year 2007	Model YARIS	
		Color RED - RED	Body Style 4D - 4DR		Bus Use	
		Initial Contact Point 09 - LEFT SIDE MIDDLE	Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 04 - RIGHT SIDE REAR, 05 - RIGHT REAR CORNER, 06 - REAR, 07 - LEFT REAR CORNER, 08 - LEFT SIDE REAR, 09 - LE			
		Extent Of Damage DISABLING DAMAGE				



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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By EVERETTS TOWING	
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
01 01	Owner Name JERRY HULNE (608) 495-8087		Owner Address 1240 OAK ST PLAIN, WI 53577 , US	
	Sequence Of Events			
01 02 03 04	Event OVERTURN/ROLLOVER			
	Event DITCH			
	Event			
	Event			
UNIT	Policy Holder			
	Insurance Company HARFORD-MUTUAL-INS-CO		Individual ELIZABETH STORKE	
UNIT INDIVIDUAL	Individual			
	Driver ELIZABETH STORKE (608) 495-8087		Citations Issued 0	Sex FEMALE
	Address 1240 OAK ST PLAIN, WI 53577 , US		Date of Birth	Race WHITE
			Driver License Number	
01 001	Safety Equipment		On Duty Crash	
			Safety Equipment SHOULDER & LAP BELT	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT		
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
01 001	Injury		Injury Severity POSSIBLE 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				