

6TL0DDT5NC
24-00432

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 24-00432	Investigating Officer/Deputy DEPUTY H. VOLZ		
Crash Date 01/12/2024	Crash Time 04:45 PM	Date Arrived 01/12/2024	Time Arrived 04:45 PM		
Date Notified 01/12/2024	Time Notified 04:45 PM	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 checked="" 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	Reconstruction By
	Photos By
	Additional Information NONE

Non-Reportable
No Damage Slide Off
Pull Out Only

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

UNIT 1 WAS TRAVELING NB ON USH 12 WHEN THEY SLID IN THE SNOW, SLUSH AND ICE COVERED ROAD WAY AND SLID INTO THE DITCH, NO DAMAGE TO VEHICLE. PULL OUT BY TOW ONLY. PASSENGER INFO NOT GIVEN/UNKNOWN.

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Location

ON USH12 WB 0.32 MI S OF USH12 WB IN THE TOWN OF SUMPTER IN SAUK COUNTY	Latitude 43.368079866	Longitude -89.768512049
	X Coordinate 275689.6875	Y Coordinate 4805413.5
	Structure Type	

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 DARK/UNLIT	
Road Surface Condition(s) SNOW, SLUSH, ICE		Roadway Factor(s) NONE	
Environment Factor(s) WEATHER CONDITIONS			
Weather Condition(s) CLOUDY, SNOW, SEVERE WINDS, FREEZING RAIN OR FREEZING DRIZZLE, BLOWING 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 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 2	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 55	Total Lanes 4	
	Most Harmful Event: Collision With DITCH		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

Vehicle

UNIT	01	Vehicle			
		License Plate Number AUJ9286	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1N4AA5AP3AC842699	Make NISSAN	Year 2010	Model MAXIMA
		Color BLU - BLUE	Body Style 4D - 4DR		Bus Use
		Initial Contact Point 11 - LEFT FRONT CORNER	Vehicle Damage 00 - NO DAMAGE		



UNIT	Towed Due To Damage TOWED BUT NOT DUE TO DISABLING DAMAG		Vehicle Removed By BILLS TOWING		
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions SPEED TOO FAST/COND				
01	01	Owner Name GEORGIA-MARIE LIAN (337) 323-9831		Owner Address 431 WATER ST #202 PRAIRIE DU SAC, WI 53578 , US	
		Sequence Of Events			
UNIT	01	Event OTHER OBJECT - NOT FIXED			
		Event DITCH			
		Event			
		Event			
UNIT	01	Policy Holder			
		Insurance Company BRISTOL-WEST-INS-CO	Individual GEORGIA-MARIE LIAN		
UNIT	01	Individual			
		Driver GEORGIA-MARIE LIAN (337) 323-9831		Citations Issued 0	Sex FEMALE
		Address 431 WATER ST #202 PRAIRIE DU SAC, WI 53578 , US		Date of Birth	Race WHITE
		Driver License Number			
UNIT	01	Safety Equipment			
		On Duty Crash		Safety Equipment	
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
		Helmet Use		Helmet Compliance	
		Eye Protection		Tint Compliance	
		Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
UNIT	001	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	

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					
UNIT	INDIVIDUAL	Individual					
		Passenger UNKNOWN UNKNOWN		Citations Issued 0	Sex		
				Date of Birth	Race		
		Address UNKNOWN		Driver License Number			
		Safety Equipment		On Duty Crash	Safety Equipment		
		Row 01 - FRONT ROW		Seat Position 09 - RIGHT	RESTRAINT USE UNKNOWN		
		Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
		UNIT	INDIVIDUAL	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			
Distracted By Action							
Non Motorist				Striking Unit #	Location		

UNIT	INDIVIDUAL	Prior Action				
		Action				
		Action Other		To/From School		
	01	002	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			

Property Owner

PROP OWNER	01	Government SAUK COUNTY HWY DEPT (608) 356-3855	Address 620 STH 136 PO BOX 26 BARABOO, WI 53913 , US
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Fixed Objects Struck

01	Striking Unit 01	Struck Object DITCH	Structure Number	Damage Tag Number 000000
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