6TL0CR2KTZ 24-04649

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	e Primary Crash I	24-04			24-04649 DE			DEPUTY Z. DRILL		
7	Crash Date 05/08/2024	Crash Time 04:30 PM	04:30 PM Time Notified		Date Arrived 05/08/2024 Total Units 01			Time Arrived 04:53 PM			
7	Date Notified 05/08/2024	Time Notified 04:32 PM						Total Injured Total Killed 00 00			
PILUCRAR	On Emergency	Hit and Run	Lane Clos	ure	Work Zon	е	Trailer	or Towed	Reporting Threshold		
	Government Property	Active Sc	hool Zone	School NO	Bus Related		Tags				
	✓ Reportable	Crash Type DT4000 (STA	NDARD CRASH	l)			Amend	ed	Secondary Crash		
	Description =	•							•		
	Diagram				NOT TO SCALE			Reconstruction			
	FULLER RD					DE V V	>) ⊳M	Photos By DEPUTY DR	RILL		
		COL	INTY RD K					Additional Info	rmation		
	I, a sworn law enformation while traveling south	ON COUNTY RD K, DRI\	ER OF UNIT ONE	HAD A PC	SSIBLE TIRE BLO	W OUT C	AUSING HER	TO LOSE CONT	ROL. VEHICLE BEGAN TO		
	SLID AND SPIN, ENTERING TIRES ARE KNOCKED OFF	THE DITCH ON THE WE	ST SIDE OF THE R	ROADWAY	NEAR FULLER RI	D. UNKNO	OWN DAMAGE	TO UNDERCAF	RRIAGE OF VEHICLE, ALL		

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Location

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Crash Date 05/08/2024

Crash Time 04:30 PM

	588	CTHK SB FT N FULLER RD			Latitude 43.596241743				9096873	
	IN T	THE TOWN OF WINFIEL	LD			X Coordinate 258727.125		Y Coord 483137		
					Structure Type NO STRUCTURE					
	Cra	sh Scene								
	First	: Harmful Event				First Harmful Event	Location			
	DIT		ROADSIDE							
		ner of Collision				Light Condition				
		NO COLLISION W/VE	HICLE IN TRANSPORT			DAYLIGHT				
		d Surface Condition(s)				Roadway Factor(s)				
	DR۱	Y								
	Envi	ronment Factor(s)								
	NON	NE				NONE				
	Wea	ather Condition(s)								
		EAR								
	Anim	nal Type				Relation To Trafficway				
	Cros	sh Classification - Location				TRAFFICWAY - ON ROAD				
		BLIC PROPERTY				Crash Classification - Jurisdiction NO SPECIAL JURISDICTION				
	_	al Land				Access Control			Special Study	
						NO CONTROL			'	
	With	in Interchange Area	Junction Location		Intersection Type		De L		I	
	NO		NON-JUNCTION		NOT AN	AN INTERSECTION				
	llni	t Summary 💳								
		Status		Vehicle Ope	erating As Cl	assification	Unit Type			
	Unit IN T	Status FRANSIT		Vehicle Ope	erating As Cl	assification	AUTOMO			
	Unit IN T Vehi	Status FRANSIT icle Type			erating As Cl	assification			ments	
L0	Unit IN T Vehi PAS	Status RANSIT icle Type SSENGER CAR	I Train/Pun # Pagardad	D CLASS			AUTOMO Operating A	As Endorse		
	Unit IN T Vehi PAS Tota	Status FRANSIT icle Type	Train/Bus # Recorded	D CLASS Total # Citat		Total Tr	AUTOMO Operating A	As Endorse	ments :Mat Types	
5	Unit IN T Vehi PAS Tota 1	Status FRANSIT icle Type SSENGER CAR II Occs	Train/Bus # Recorded Direction Of Travel	Total # Citat	tions Issued	Total Tr.	AUTOMO Operating A	As Endorse	Mat Types	
	Unit IN T Vehi PAS Tota 1	Status TRANSIT icle Type SSENGER CAR Il Occs rance?		Total # Citat 0 Pre		Total Tr.	AUTOMO Operating A	As Endorse Total Haz	Mat Types	
10	Unit IN T Vehi PAS Tota 1 Insur YES	Status TRANSIT icle Type SSENGER CAR Il Occs rance?	Direction Of Travel SOUTHBOUND	Total # Citat 0 Pre	tions Issued CrashTire Mark iction	Total Tr. 0 Speed L 55	AUTOMO Operating A ailers Limit Emergency	Total Haz 0 Total Lan 2 Motor Veh	Mat Types es icle Use	
	Unit IN T Vehi PAS Tota 1 Insur YES Most	Status FRANSIT icle Type SSENGER CAR il Occs rance? S t Harmful Event: Collision W	Direction Of Travel SOUTHBOUND	Total # Citat 0 Pre	tions Issued CrashTire Mark iction	Total Tr. 0 Speed L 55	AUTOMO Operating A ailers Limit Emergency NOT APP	Total Haz 0 Total Lan 2 Motor Veh	es icle Use	
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Crash Date 05/08/2024

Crash Time 04:30 PM

		Towed Due To Damage		Vel	hicle Removed By				
		TOWED DUE TO DISABL	LING DAMAGE	SH	IIELDS TOWING				
		What Driver Was Doing		Vel	hicle Factors				
		GOING STRAIGHT							
		Driver Prior Action Other		TIF	RES				
		Driver Actions	FION						
	쁘	NO CONTRIBUTING ACT	IION						
UNIT	\overline{c}								
5	VEHICLE								
	>								
		O			I O A dida				
		Owner Name TINA TAYLOR			Owner Address W4721 GARRIGAN	I RD			
01	2	(608) 844-3920			MAUSTON, WI 539				
	,	L Sequence Of Events							
		Event							
	5	MOTOR VEH IN TRANSF	PORT						
	05	Event DITCH							
	03	Event							
		Event							
	04								
⊨	l	Policy Holder							
UNIT		Insurance Company			Individual				
_		LIBERTY-MUTUAL-INS-CO			TINA TAYLOR				
	Į.	ndividual							
		Driver			Citations Issued Sex				
	7	TINA TAYLOR (608) 844-3920 Address W4721 GARRIGAN RD MAUSTON, WI 53948, US			0	FEMALE Race			
_	NDIVIDUAL				Date of Birth	WHITE			
UNIT	ቜ				Driver License Number				
–	፬				STATE: WISCONSIN COUNTRY: UNITED STATES				
	=								
	Sat	On Duty Crash fety Equipment			Safety Equipment				
		Row	Seat Position	 ,	SHOULDER & LAP	BFI T			
		01 - FRONT ROW	07 - LEFT						
		Helmet Use	O == : :		Helmet Compliance				
		Eye Protection			Tint Compliance				
_	_	Injury Severity			Airbag				
2	9	In it was	PPARENT INJURY		NON DEPLOYED				
		Ejected Ejection Path					Trapped/Extricated		
		NOT EJECTED	NOT EJECTED/NOT	APPLIC	PLICABLE		NOT TRAPPED		
		Medical Transport		1	EMS Agency Identifier		EMS Run #		
		NOT TRANSPORTED					T: (D #		
		Hospital			Date of Death		Time of Death		
		Distracted By NOT A	ted By Source	STDACT	TED)		L		
		Distracted By Action	AFFLICABLE (NOT DIS	JIKAUI					
		NOT DISTRACTED							

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		Non Motorist	Striking Unit #	Location				
		Prior Action						
TIND	INDIVIDUAL	Action						
		Action Other						To/From School
	1	Drug & Alcohol	Suspected Alcohol U NO	Jse	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		
2	001	Drug Type						
		Individual Condition APPEARED NORM	AL					