6TL0B7D6P7 18-00470B

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

6TL0B7D6P7	Document Number Override Crash Date 01/12/2018 Date Notified 01/12/2018 On Emergency Government Property Reportable	Crash Time 09:50 PM Time Notified 09:50 PM Hit and Run Crash Type	09:50 PM 01/12/2018 Time Notified Total Units 09:50 PM 01 and Run ✓ Lane Closure Work Zone Active School Zone School Bus Related NO NO		70B ived 018 UB Work Zone	Investigating Officer/Deputy DEPUTY A. SUKOWATEY Time Arrived 10:05 PM Total Injured Total Killed 02 01 Trailer or Towed Reporting Threshold Tags Amended Secondary Crash			
	Diagram		BUICE BUICE BUICE BUICE BUICE BUICE BUICE BUICE BUICE BUICE BUICE BUICE BUICE				Photos By DEPUTY K Additional In FATAL CR MEASURE	ASH SUPPLEMENT, EMENTS, PHOTOS, RUCTION, OTHER	

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

THE OPERATOR OF UNIT ONE WAS TRAVELING SOUTHBOUND ON US HWY 12 WHEN THE OPERATOR FAILED TO NEGOTIATE A CURVE STRIKING A RAISED CURB AT THE INTERSECTION OF US HWY 12 AND OLD BLUFF TRAIL. THE VEHICLE CONTINUED THROUGH THE DITCH BEFORE STRIKING MULTIPLE TREES WHERE IT CAME TO REST.

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L	DCa	ation 🛛 🗖										
С	N I	USH12 EB					Latitude			Longitud	le	
		FT E					43.35136	69873		-89.766	757495	
-	-	LD BLUFF TRL					X Coordina	ate		Y Coord	inate	
		HE TOWN OF SUMPT	ER				275770.2	28125		480355	3	
Ir	N 94	AUK COUNTY					Structure Type					
							Chaolaro	.)po				
C	ras	sh Scene					•					
F	irst H	Harmful Event					First Harm	ful Event Lo	ocation			
С	UR	В					ROADSI	DE				
Ν	lann	er of Collision					Light Cond	dition				
Ν		COLLISION W/VEHIC	LE IN TRANSPORT				DARK/U					
R	oad	Surface Condition(s)					Roadway	Factor(s)				
D	RY											
E	nviro	onment Factor(s)										
N	ION	E					NONE					
W	/eatł	ner Condition(s)										
C	LO	UDY										
A	nima	al Type					Relation To Trafficway					
	Crash Classification - Location PUBLIC PROPERTY						TRAFFICWAY - NOT ON ROAD Crash Classification - Jurisdiction NO SPECIAL JURISDICTION					
Т	Tribal Land						Access Control Special Study			Special Study		
							NO CONTROL					
	/ithir I O	n Interchange Area	Junction Location NON-JUNCTION		Intersection		ion Type N INTERSECTION					
	-	re Type			Reaso	ons for Closu	_					
		ECLOSURE						CEMENT, TOW TRUCK, FIRE/EMS				
D	ate I	Initial Lane/Rd Closed	Time Initial Lane/Rd Clo	osed								
		2/2018	10:03 PM									
		All Lanes Open 3 /2018	Time All Lanes Open 01:45 AM			Scene Clear 3 /2018	ed		e Scene Clear	red		
			01.45 AW		01/13	5/2018		01.				
		Summary		Vohi	do Onc	erating As C	lassification		Linit Turne			
_		RANSIT					lassincation		Unit Type			
		le Type			D CLASS				AUTOMOBILE Operating As Endorsements		mente	
		SENGER CAR							Operating As Endorsements		nents	
Т	otal	Occs	Train/Bus # Injured	Tota	Total # Citations Issued			Total Traile	ilers Total Haz		Mat Types	
3				1				0		0		
		ance?	Direction Of Travel		Pre	CrashTire		Speed Lim			es	
		Harmful Event: Collision	SOUTHBOUND		cial Fun	Mark		55	4		icle I Ise	
	RE		vviui				TION		Emergency Motor Vehicle Use NOT APPLICABLE			
Т	raffic	: Way		Traff	ic Cont	rol			Traffic Contro	ol Inoperat	tive/Missing	
	IVIDED HWY W/O TRAFFIC BARRIER				CONT				NO Road Grade			
	Surface Type											
		CKTOP (BITUMINOU Bus or HazMat	5)	CUI	RVE LI	EFI			LEVEL			
	V	/ehicle										
		License Plate Number			te Type		_	St	Country of Iss			
		814ZEC				ITOMOBIL	.E	WI	UNITED ST	ATES		
2	Vehicle Identification Number 1HGCP2F64CA149852				Make HONDA			Year 2012	Model ACCORD			

UNIT

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

		<u> </u>									
			Body Style	Bus Use NOT A BUS							
		BLK - BLACK	SD - SEDAN	NOT A BUS							
	Щ	Initial Contact Point	Vehicle Damage								
E	5	12FRONT									
UNIT	Ĭ		ALL AREAS								
	VEHICLE										
	>	DISABLING DAMAGE									
			Vehicle Removed By								
		TOWED DUE TO DISABLING DAMAGE	EVERETTS TOWING								
		What Driver Was Doing	Vehicle Factors								
		NEGOTIATING CURVE									
		Driver Prior Action Other	NOT APPLICABLE								
		Driver Actions									
	щ	EXCEED SPEED LIMIT, SPEED TOO FAST/COND									
E	C										
UNIT	Ŧ										
	VEHICL										
		Driven Distantions									
		Driver Distractions UNKNOWN IF DISTRACTED									
_	-										
0	01										
		-									
		Owner Name	Owner Address								
		PUNEET KUMAR SHARMA	1209 VELVET LEAF DR								
		(608) 695-9401	MADISON, WI 53719, US								
	ç	Sequence Of Events									
		Event									
	01	CURB									
		Event									
	02	DITCH									
	03	Event TREE									
	0										
	04	Event									
	0										
		ndividual									
		Driver	Citations Issued	Sex							
				MALE							
	١L		1								
	U Z		Date of Birth	Race							
E	D			ASIAN							
UNIT	Ν	Address	Driver License Number								
		1209 VELVET LEAF DR									
	4	MADISON, WI 53719 , US	STATE: WISCONSIN COUNTRY: UNITED STATES								
		On Duty Crash	Safety Equipment								
		Equipment	Salety Equipment								
		Seat Position	SHOULDER & LAP BELT								
		1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY									
		Helmet Use	Helmet Compliance								
		Eye Protection	Tint Compliance								

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-	Ξ		Injury Severity		Airbag					
0	001	Injury	POSSIBLE INJURY	ſ	DEPLOYED-FR	ОNT				
		Ejected			Ejection Path Trapped/Extricated					
		NOT EJECTED			NOT EJECTED/NOT APPLICABL		NOT APPLICABLE			
		Medical Transport			EMS Agency Identifier		EMS Run #			
		NOT TRANSPORTED								
		Hospital			Date of Death		Time of Death			
		Non Motorist	Striking Unit #	Prior Action	-	Location		To/From School		
		NON MOTORIST								
		Action								
	AL									
E	Ы									
UNIT	INDIVIDUAL									
	Ę									
	4									
		Action Other								
	Г	Drug & Alcohol	Suspected Alcohol Us	е	Suspected Drug Us	se .				
	-		TES		-		· · · · - · - ·			
		Alcohol Test Given TEST GIVEN			Alcohol Test Type		Alcohol Test Results			
					BLOOD Drug Test Type		PENDING			
		Drug Test Given TEST GIVEN			BLOOD		Drug Test Results PENDING			
_	Ξ	Drug Type								
0	001	0 7.								
		Individual Condition								
		PHYSICALLY IMPAIRED, UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL								
		Individual Passenger			Citations Issued		Sex			
		BETHANY Y BUD	ZINSKI		0		FEMALE			
	DIVIDUAL				Date of Birth					
F	В									
UNIT	Σ	Address			Driver License Number					
		5310 MATHEWS	RD APT 7							
	Z	MIDDLETON, WI	53562,05		STATE: WISCONSIN COUNTRY: UNITED STATES					
		Equipment	On Duty Crash		Safety Equipment					
		Seat Position			SHOULDER & LAP BELT					
		3FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER			Helmet Compliance					
		Helmet Use Eye Protection			Helmet Compliance Tint Compliance					
6	002	Inium	Injury Severity		Airbag					
0	õ	Injury	FATAL INJURY		DEPLOYED-FR	ONT				
		Ejected			Ejection Path		Trapped/Extricated			
		NOT EJECTED			NOT EJECTED/NOT APPLICABL		NOT APPLICABLE			
		Medical Transport			EMS Agency Identi	tier	EMS Run #			
1		EMS AIR			6001285					

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		Hospital			Date of Death		Time of Death			
		UW HOSPITALS			01/14/2018	I	05:35			
		Non Motorist	Striking Unit #	Prior Action		Location		To/From School		
		Action								
		Action								
	Ļ									
	INDIVIDUAL									
UNIT	ē									
Ξ	N									
	Ĭ									
	_									
		Action Other								
			Cuspected Alashal		Cuspected Drug II					
	D	orug & Alcohol	Suspected Alcohol	Use	Suspected Drug U NO	se				
		Alcohol Test Given			Alcohol Test Type		Alcohol Test Results			
		TEST GIVEN			BLOOD		12			
		Drug Test Given			Drug Test Type		Drug Test Results			
		TEST NOT GIVEN	1				Brug root rootato			
_	2	Drug Type								
2	002									
		Individual Condition								
		NOT OBSERVED								
	- 1	ndividual								
	-									
	Ī	Passenger			Citations Issued		Sex			
					0		FEMALE			
		Passenger		_						
۲I		Passenger ASHLEY M COX			0 Date of Birth	nhar	FEMALE			
UNIT		Passenger ASHLEY M COX	R ROAD #5		0	nber	FEMALE			
UNIT	INDIVIDUAL	Passenger ASHLEY M COX			0 Date of Birth	nber	FEMALE			
UNIT		Passenger ASHLEY M COX Address 6813 SCHROEDE			0 Date of Birth	nber	FEMALE			
UNIT		Passenger ASHLEY M COX Address 6813 SCHROEDE MADISON, WI 537	711,US		0 Date of Birth Driver License Nur	nber	FEMALE			
UNIT		Passenger ASHLEY M COX Address 6813 SCHROEDE			0 Date of Birth	nber	FEMALE			
UNIT		Passenger ASHLEY M COX Address 6813 SCHROEDE MADISON, WI 537	711,US		0 Date of Birth Driver License Nur		FEMALE			
UNIT		Passenger ASHLEY M COX Address 6813 SCHROEDE MADISON, WI 537 Equipment	711 , US		0 Date of Birth Driver License Nur Safety Equipment		FEMALE			
UNIT		Passenger ASHLEY M COX Address 6813 SCHROEDE MADISON, WI 537 Equipment Seat Position	711 , US		0 Date of Birth Driver License Nur Safety Equipment	AP BELT	FEMALE			
UNIT		Passenger ASHLEY M COX Address 6813 SCHROEDE MADISON, WI 533 Equipment Seat Position 6SECOND SEA1 Helmet Use	711 , US		0 Date of Birth Driver License Nur Safety Equipment SHOULDER & I Helmet Compliance	AP BELT	FEMALE			
UNIT		Passenger ASHLEY M COX Address 6813 SCHROEDE MADISON, WI 537 Equipment Seat Position 6SECOND SEAT	711 , US		0 Date of Birth Driver License Nur Safety Equipment SHOULDER & I	AP BELT	FEMALE			
UNIT	INDIVIDUAL	Passenger ASHLEY M COX Address 6813 SCHROEDE MADISON, WI 533 Equipment Seat Position 6SECOND SEA1 Helmet Use	711 , US On Duty Crash F-RIGHT SIDE		0 Date of Birth Driver License Nur Safety Equipment SHOULDER & I Helmet Compliance	AP BELT	FEMALE			
01 UNIT	INDIVIDUAL	Passenger ASHLEY M COX Address 6813 SCHROEDE MADISON, WI 533 Equipment Seat Position 6SECOND SEA1 Helmet Use	711 , US On Duty Crash T-RIGHT SIDE		0 Date of Birth Driver License Nur Safety Equipment SHOULDER & I Helmet Compliance Tint Compliance	- AP BELT e	FEMALE			
		Passenger ASHLEY M COX Address 6813 SCHROEDE MADISON, WI 537 Equipment Seat Position 6SECOND SEAT Helmet Use Eye Protection Injury	711 , US On Duty Crash F-RIGHT SIDE	NOR INJURY	0 Date of Birth Driver License Nur Safety Equipment SHOULDER & I Helmet Compliance Tint Compliance Airbag DEPLOYED-SIL	- AP BELT e	FEMALE Race			
	INDIVIDUAL	Passenger ASHLEY M COX Address 6813 SCHROEDE MADISON, WI 537 Equipment Seat Position 6SECOND SEAT Helmet Use Eye Protection	711 , US On Duty Crash T-RIGHT SIDE	NOR INJURY	0 Date of Birth Driver License Nur Safety Equipment SHOULDER & I Helmet Compliance Tint Compliance Airbag DEPLOYED-SIL Ejection Path	- AP BELT e	FEMALE			
	INDIVIDUAL	Passenger ASHLEY M COX Address 6813 SCHROEDE MADISON, WI 537 Equipment Seat Position 6SECOND SEAT Helmet Use Eye Protection Injury Ejected	711 , US On Duty Crash T-RIGHT SIDE	NOR INJURY	0 Date of Birth Driver License Nur Safety Equipment SHOULDER & I Helmet Compliance Tint Compliance Airbag DEPLOYED-SII Ejection Path NOT EJECTED	AP BELT e DE NOT APPLICABL	FEMALE Race Trapped/Extricated			
	INDIVIDUAL	Passenger ASHLEY M COX Address 6813 SCHROEDE MADISON, WI 537 Equipment Seat Position 6SECOND SEAT Helmet Use Eye Protection Injury Ejected NOT EJECTED	711 , US On Duty Crash T-RIGHT SIDE	NOR INJURY	0 Date of Birth Driver License Nur Safety Equipment SHOULDER & I Helmet Compliance Tint Compliance Airbag DEPLOYED-SIL Ejection Path	AP BELT e DE NOT APPLICABL	FEMALE Race Trapped/Extricated NOT APPLICABLE			
	INDIVIDUAL	Passenger ASHLEY M COX Address 6813 SCHROEDE MADISON, WI 537 Equipment Seat Position 6SECOND SEAT Helmet Use Eye Protection Injury Ejected NOT EJECTED Medical Transport	711 , US On Duty Crash T-RIGHT SIDE	NOR INJURY	0 Date of Birth Driver License Nur Safety Equipment SHOULDER & I Helmet Compliance Tint Compliance Airbag DEPLOYED-SIII Ejection Path NOT EJECTED EMS Agency Ident	AP BELT e DE NOT APPLICABL	FEMALE Race Trapped/Extricated NOT APPLICABLE			
	INDIVIDUAL	Passenger ASHLEY M COX Address 6813 SCHROEDE MADISON, WI 537 Equipment Seat Position 6SECOND SEAT Helmet Use Eye Protection Injury Ejected NOT EJECTED Medical Transport EMS GROUND	711 , US On Duty Crash T-RIGHT SIDE		0 Date of Birth Driver License Nur Safety Equipment SHOULDER & I Helmet Compliance Airbag DEPLOYED-SIE Ejection Path NOT EJECTED/ EMS Agency Ident 6000555	AP BELT e DE NOT APPLICABL	FEMALE Race Trapped/Extricated NOT APPLICABLE EMS Run #			
	003 INDIVIDUAL	Passenger ASHLEY M COX Address 6813 SCHROEDE MADISON, WI 537 Equipment Seat Position 6SECOND SEAT Helmet Use Eye Protection Injury Ejected NOT EJECTED Medical Transport EMS GROUND Hospital	711 , US On Duty Crash T-RIGHT SIDE		0 Date of Birth Driver License Nur Safety Equipment SHOULDER & I Helmet Compliance Airbag DEPLOYED-SIE Ejection Path NOT EJECTED/ EMS Agency Ident 6000555	AP BELT e DE NOT APPLICABL	FEMALE Race Trapped/Extricated NOT APPLICABLE EMS Run #	To/From School		

WISCONSIN MOTOR VEHICLE CRASH REPORT

UNIT	INDIVIDUAL	Action Action Other								
	Ľ	Drug & Alcoh Alcohol Test Give TEST NOT GIV	n n	Suspected Alco	hol Use	Suspected NO Alcohol Tes	-	Alcohol Test Results		
		Drug Test Given				Drug Test 1	Гуре	Drug Test Results		
01	003	Drug Type								
		Individual Condition NOT OBSERVED								
	1	Violations								
	01	UTC Number AE754407		Issue To? 001	Statute Number 346.63(2)(a)1	Seq Num 003	Description CAUSE INJURY/OPERA	FING WHILE INTOX.	W/PASS<16	
I	Pro	perty Owne	er							
PROP OWNER 01	(608	ernment CONSIN DEPT 3) 246-3800			ATION	Address 2101 WRIG MADISON,	HT ST WI 53705 2583, US			
	Fixe	ed Objects Struck								
	0	Striking Unit 01	Stru TR	uck Object EE				Structure Number	Damage Tag Number	
	02	Striking Unit 01		uck Object RB				Structure Number	Damage Tag Number	
	03	Striking Unit 01		uck Object F CH				Structure Number	Damage Tag Number	