

6TL0BSNQ6W
18-01259

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 18-01259	Investigating Officer/Deputy DEPUTY M. BURCH	
Crash Date 02/03/2018		Crash Time 05:36 PM	Date Arrived 02/03/2018	Time Arrived 05:36 PM	
Date Notified 02/03/2018		Time Notified 05:36 PM	Total Units 01	Total Injured 00	Total Killed
<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

<p>Diagram</p>	Reconstruction By
	Photos By
	Additional Information

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

UNIT # 1 WAS EASTBOUND ON STH 33 WHEN OPERATOR LOST CONTROL ON SNOW COVERED ROAD AND ENTERED THE DITCH ON THE NORTH SIDE OF THE ROADWAY. UNIT # 1 WAS PULLED OUT BY MIKES TOWING AND REMOVED BY OPERATOR.

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Location

ON STH33 EB 0.50 MI S OF CTHU EB IN THE TOWN OF GREENFIELD IN SAUK COUNTY	Latitude 43.495821155	Longitude -89.633889907
	X Coordinate 287046.1875	Y Coordinate 4819247.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event DITCH	First Harmful Event Location SHOULDER RIGHT	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DUSK	
Road Surface Condition(s) SNOW	Roadway Factor(s) ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)	
Environment Factor(s) WEATHER CONDITIONS		
Weather Condition(s) SNOW		
Animal Type	Relation To Trafficway TRAFFICWAY - NOT 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 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 # Injured	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 DITCH		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 STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

UNIT 01 VEHICLE 01	Vehicle					
	License Plate Number A1073KE		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number 4A3AC84L6YE044174		Make MITSUBISHI	Year 2000	Model ECLIPSE	
	Color RED - RED		Body Style HB - HATCHBACK		Bus Use NOT A BUS	
	Initial Contact Point 12--FRONT		Vehicle Damage			
	Extent Of Damage NO DAMAGE		NO DAMAGE			

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UNIT	VEHICLE	Towed Due To Damage NOT TOWED	Vehicle Removed By MIKES TOWING	
		What Driver Was Doing GOING STRAIGHT	Vehicle Factors	
		Driver Prior Action Other	NOT APPLICABLE	
		Driver Actions SPEED TOO FAST/COND		
01	01	Driver Distractions NOT DISTRACTED		
		Owner Name CHELSIE LUETKENS	Owner Address 327 MULBERRY ST BARABOO, WI 53913 , US	
Sequence Of Events				
UNIT	INDIVIDUAL	01	Event DITCH	
		02	Event	
		03	Event	
		04	Event	
Policy Holder				
UNIT	INDIVIDUAL	Insurance Company PROGRESSIVE-CASUALTY-INS-CO	Individual CHELSIE LUETKENS	
		Driver CHELSIE LUETKENS (608) 408-9613	Citations Issued 0	Sex FEMALE
		Date of Birth	Race WHITE	
		Address 327 MULBERRY ST BARABOO, WI 53913 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
		Equipment	On Duty Crash	Safety Equipment SHOULDER & LAP BELT
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		
		Helmet Use	Helmet Compliance	
		Eye Protection	Tint Compliance	
01	001	Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABL	Trapped/Extricated NOT TRAPPED

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UNIT INDIVIDUAL 01 001	Medical Transport NOT TRANSPORTED	EMS Agency Identifier		EMS Run #		
	Hospital	Date of Death		Time of Death		
	Non Motorist	Striking Unit #	Prior Action	Location		To/From School
	Action					
	Action Other					
	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					