

6TL09B7D8G
18-01265

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 18-01265	Investigating Officer/Deputy DEPUTY K. SORENSON	
Crash Date 02/03/2018		Crash Time 09:25 PM	Date Arrived 02/03/2018	Time Arrived 09:48 PM	
Date Notified 02/03/2018		Time Notified 09:34 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 checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

<p>Diagram</p> <p>Diagram showing a vehicle (UNIT 1) involved in an accident on STH 33. The vehicle is shown off the road, having struck a guardrail. The text 'NOT TO SCALE' and 'UNIT MOVED PRIOR TO ARRIVAL' is present. A '121' sign is also shown.</p>	Reconstruction By
	Photos By
	Additional Information NONE

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

ON 2-3-18 AT APPROXIMATELY 9:34PM SAUK COUNTY DISPATCH ADVISED OF A ONE VEHICLE ACCIDENT ON STH 33 IN THE TOWNSHIP OF LAVALLE WITH NO INJURIES. UNIT 1 OPERATOR WAS IDENTIFIED VIA WISCONSIN DRIVER'S LICENSE. UNIT 1 ADVISED SHE WAS TRAVELING EASTBOUND ON STH 33, LOST CONTROL AND STUCK THE GUARD RAIL ON THE OPPOSITE SIDE OF THE ROAD. NO DAMAGE TO THE GUARDRAIL.

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Location

ON STH33 EB 0.25 MI W OF CTHV EB IN THE TOWN OF LA VALLE IN SAUK COUNTY	Latitude 43.577090194	Longitude -90.111197363
	X Coordinate 248791.28125	Y Coordinate 4829607
	Structure Type	

Crash Scene

First Harmful Event GUARDRAIL FACE	First Harmful Event Location SHOULDER LEFT	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DARK/UNLIT	
Road Surface Condition(s) SNOW	Roadway Factor(s) NONE	
Environment Factor(s) WEATHER CONDITIONS		
Weather Condition(s) 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

01 UNIT	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE		
	Vehicle Type (SPORT) UTILITY VEHICLE			Operating As Endorsements		
	Total Occs 3	Train/Bus # Injured	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel EASTBOUND	<input checked="" type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With GUARDRAIL FACE		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NON-EMERGENCY, NON-TRANSPORT	
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature CURVE LEFT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

01 UNIT	Vehicle				
	01	License Plate Number 207UAV	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1FMYU93197KB34595	Make FORD	Year 2007	Model ESCAPE XLT
	VEHICLE	Color RED - RED	Body Style UT - SPORT UTILITY VEHICLE		Bus Use NOT A BUS
		Initial Contact Point 1--RIGHT FRONT CORNER	Vehicle Damage		
Extent Of Damage MINOR DAMAGE		1--RIGHT FRONT CORNER, 12--FRONT			

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UNIT	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions SPEED TOO FAST/COND			
01	01	Driver Distractions NOT DISTRACTED		
		Owner Name KARI SCHYVINCK	Owner Address 107 S EAST ST PO BOX/42 LA VALLE, WI 53941 , US	
Sequence Of Events				
UNIT	01	Event RUN OFF ROADWAY LEFT		
	02	Event GUARDRAIL FACE		
	03	Event		
	04	Event		
Policy Holder				
UNIT	Insurance Company ALLSTATE-INS-CO		Individual KARI SCHYVINCK	
	Individual			
UNIT	INDIVIDUAL	Driver KARI SCHYVINCK	Citations Issued 0	Sex FEMALE
		Date of Birth		Race WHITE
01	001	Address 107 S EAST ST PO BOX/42 LA VALLE, WI 53941 , 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 Compliance
		Helmet Use		Tint Compliance
		Eye Protection		
		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	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					
UNIT	INDIVIDUAL	Individual					
		Passenger CONNOR LING		Citations Issued 0	Sex MALE		
		Date of Birth		Race WHITE			
		Address 107 S EAST ST PO BOX/42 LA VALLE, WI 53941 , US		Driver License Number			
		Equipment		On Duty Crash	Safety Equipment		
		Seat Position 3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER		SHOULDER & LAP BELT			
		Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
		Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED		
		Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABL	Trapped/Extricated NOT TRAPPED		
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		

WISCONSIN MOTOR VEHICLE
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UNIT 01	INDIVIDUAL	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				
		Individual				
		Passenger NIKKI SCHYVINCK	Citations Issued 0	Sex FEMALE		
			Date of Birth	Race WHITE		
UNIT 01	INDIVIDUAL	Address 107 S EAST ST LA VALLE, WI 53941 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
		Equipment	On Duty Crash	Safety Equipment SHOULDER & LAP BELT		
		Seat Position 6--SECOND SEAT-RIGHT SIDE				
		Helmet Use	Helmet Compliance			
		Eye Protection	Tint Compliance			
		Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED		
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABL	Trapped/Extricated NOT TRAPPED		
		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

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UNIT	INDIVIDUAL	Action			
		Action Other			
	01	003	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 TOWNSHIP OF LAVALLE (608) 985-7695	Address 218 COMMERCIAL ST PO BOX 30 LAVALLE, WI 53941 , US
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Fixed Objects Struck

01	Striking Unit 01	Struck Object GUARDRAIL FACE	Structure Number	Damage Tag Number 00000
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