

6TL09KMLX4
18-01551

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

6TL09KMLX4

| | | | | | |
|---|--------------------------------------|--|--|---|--|
| Document Number Override | | Primary Crash Document # | Agency Crash Number 18-01551 | Investigating Officer/Deputy DEPUTY S. FINNEGAN | |
| Crash Date 02/12/2018 | | Crash Time 07:03 AM | Date Arrived 02/12/2018 | Time Arrived 07:15 AM | |
| Date Notified 02/12/2018 | | Time Notified 07:04 AM | Total Units 01 | Total Injured 01 | Total Killed 00 |
| <input type="checkbox"/> On Emergency | <input type="checkbox"/> Hit and Run | <input checked="" 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 description: A schematic diagram of the crash scene. On the left, a road labeled 'STH 33' runs vertically. A road labeled 'CTH X' runs horizontally across the middle. A red octagonal sign with 'ST' is located near the intersection. A vehicle labeled 'UNIT 1' is shown in three positions: 1) approaching the intersection from the top right, 2) striking a sign post and guide wires, and 3) having crossed CTH X and entered a ditch on the left side. The text 'UNIT 1 STRIKING SIGN' and 'UNIT 1 STRIKING GUIDE WIRES' are placed near the respective impact points. A north arrow is in the top left. The text 'not drawn to scale' is at the bottom.</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.

UNIT 1 WAS E/B ON STH 33 WHEN DRIVER STATED SHE WAS BLINDED BY THE SUN AND WENT INTO THE DITCH. WHEN UNIT 1 ENTERED THE DITCH SHE HIT A ROAD SIGN POST, WENT DOWN A SMALL EMBANKMENT AND THEN JUMPED OVER CTH X AND INTO THE OPPOSITE DITCH WHERE SHE HIT SOME GUIDE WIRES FOR THE POWER POLE AND THEN CAME TO REST IN THE FIELD.

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Location

| | | |
|--|---------------------------------------|-----------------------------------|
| ON STH33 EB 100 FT S OF CTHX EB IN THE TOWN OF GREENFIELD IN SAUK COUNTY | Latitude 43.48121846 | Longitude -89.641611031 |
| | X Coordinate 286370.40625 | Y Coordinate 4817645.5 |
| | Structure Type NO STRUCTURE | |

Crash Scene

| | | | |
|---|---|---|---------------------------------------|
| First Harmful Event TRAFFIC SIGN POST | First Harmful Event Location SHOULDER RIGHT | | |
| Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT | Light Condition DAYLIGHT | | |
| Road Surface Condition(s) DRY | Roadway Factor(s) NONE | | |
| Environment Factor(s) GLARE | | | |
| Weather Condition(s) CLEAR | | | |
| 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 | |
| Closure Type FULL CLOSURE | Reasons for Closure | | |
| Date Initial Lane/Rd Closed 02/12/2018 | Time Initial Lane/Rd Closed 07:40 AM | TOW TRUCK | |
| Date All Lanes Open 02/12/2018 | Time All Lanes Open 08:12 AM | Date Scene Cleared 02/12/2018 | Time Scene Cleared 08:13 AM |

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 1 | Train/Bus # Injured | Total # Citations Issued 2 | Total Trailers 0 | Total HazMat Types 0 | |
| | Insurance? YES | Direction Of Travel EASTBOUND | <input type="checkbox"/> Pre CrashTire Mark | Speed Limit 55 | Total Lanes 2 | |
| | Most Harmful Event: Collision With TRAFFIC SIGN POST | | 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 CURVE LEFT | | Road Grade LEVEL | |
| | Truck Bus or HazMat NO | | | | | |
| | Vehicle | | | | | |
| | | License Plate Number AAR3775 | Plate Type AUT - AUTOMOBILE | St WI | Country of Issuance UNITED STATES | |
| | Vehicle Identification Number 1HGCM72254A015684 | Make HONDA | Year 2004 | Model ACCORD LX | | |

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| | | | | |
|------|------------|---|---|-----------------------------|
| UNIT | VEHICLE | Color BLK - BLACK | Body Style CP - COUPE | Bus Use NOT A BUS |
| | | Initial Contact Point 12--FRONT | Vehicle Damage | |
| | | Extent Of Damage DISABLING DAMAGE | 11--LEFT FRONT CORNER, 12--FRONT, UNDERCARRIAGE | |
| | | Towed Due To Damage TOWED DUE TO DISABLING DAMAGE | Vehicle Removed By MIKES TOWING | |
| | | What Driver Was Doing NEGOTIATING CURVE | Vehicle Factors | |
| UNIT | VEHICLE | Driver Prior Action Other | NOT APPLICABLE | |
| | | Driver Actions SPEED TOO FAST/COND, FAILURE TO CONTROL, FAILED TO KEEP IN DESIGNATED LANE | | |
| | | Driver Distractions UNKNOWN IF DISTRACTED | | |
| | | Owner Name LINDA PRATER (608) 448-2802 | Owner Address 404 SOUTH PARKWAY BARABOO, WI 53913 , US | |
| | | Sequence Of Events | | |
| UNIT | VEHICLE | 01 Event TRAFFIC SIGN POST | | |
| | | 02 Event DITCH | | |
| | | 03 Event DITCH | | |
| | | 04 Event OTHER POST, POLE OR SUPPORT | | |
| UNIT | INDIVIDUAL | Policy Holder | | |
| | | Insurance Company FARMERS-INS-CO-INC | Individual LINDA PRATER | |
| | | Individual | | |
| UNIT | INDIVIDUAL | Driver WENDY PRATER (608) 448-2802 | Citations Issued 2 | Sex FEMALE |
| | | | Date of Birth | Race WHITE |
| | | Address 404 SOUTH PARKWAY BARABOO, WI 53913 , US | Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES | |
| | | Equipment | On Duty Crash | Safety Equipment |
| | | Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY | SHOULDER & LAP BELT | |
| | Helmet Use | Helmet Compliance | | |

WISCONSIN MOTOR VEHICLE CRASH REPORT

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|--|------|----------------|--|-------------------------|---|--|--|----------------|
| 01 | UNIT | INDIVIDUAL | Eye Protection | | Tint Compliance | | | |
| | | | Injury | | Injury Severity SUSPECTED MINOR INJURY | Airbag DEPLOYED-FRONT | | |
| | | | Ejected NOT EJECTED | | Ejection Path NOT EJECTED/NOT APPLICABL | Trapped/Extricated NOT TRAPPED | | |
| | | | Medical Transport EMS GROUND | | EMS Agency Identifier 6000368 | EMS Run # | | |
| | | | Hospital ST CLARE'S 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 | | | | |
| 01 | UNIT | INDIVIDUAL | Drug Type | | | | | |
| | | | Individual Condition APPEARED NORMAL | | | | | |
| | | | Violations | | | | | |
| 01 | UNIT | INDIVIDUAL | UTC Number AE137821 | Issue To? 001 | Statute Number 344.62(2) | Seq Num 001 | Description OPERATE MOTOR VEHICLE W/O PROOF OF INSURANCE | |
| | | | UTC Number AE137822 | Issue To? 001 | Statute Number 346.57(2) | Seq Num 007 | Description FAILURE TO KEEP VEHICLE UNDER CONTROL | |

Property Owner

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

Fixed Objects Struck

| | | | | | |
|----|------------|----------------------------|---|------------------|------------------------------------|
| 01 | PROP OWNER | Striking Unit 01 | Struck Object TRAFFIC SIGN POST | Structure Number | Damage Tag Number 337720 |
|----|------------|----------------------------|---|------------------|------------------------------------|

Property Owner

| | | | |
|----|------------|---|--|
| 02 | PROP OWNER | Organization/Company ALLIANT ENERGY | Address 4902 N BILTMORE MADISON, WI 53707 1077, US |
|----|------------|---|--|

Fixed Objects Struck

| | | | | | |
|----|------------|----------------------------|---|------------------|------------------------------------|
| 02 | PROP OWNER | Striking Unit 01 | Struck Object OTHER POST, POLE OR SUPPORT | Structure Number | Damage Tag Number 337720 |
|----|------------|----------------------------|---|------------------|------------------------------------|

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