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18-02447

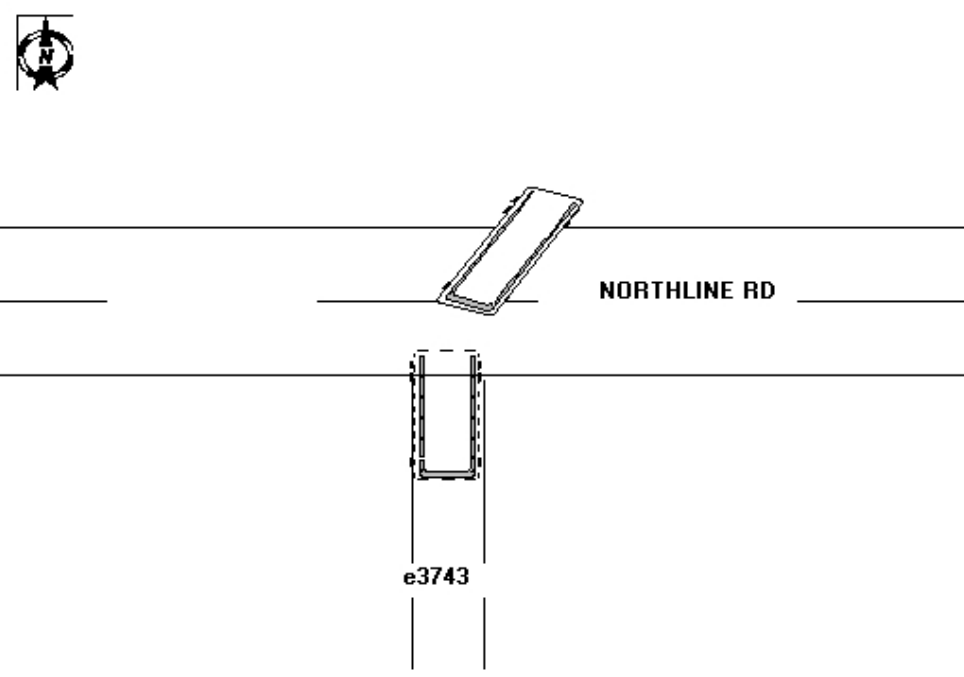
# WISCONSIN MOTOR VEHICLE CRASH REPORT

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<br><b>18-02445</b> | Investigating Officer/Deputy<br><b>DEPUTY B. MEARS</b> |  |
| Crash Date<br><b>03/08/2018</b>              |                                      | Crash Time<br><b>06:58 AM</b>                | Date Arrived<br><b>03/08/2018</b>      | Time Arrived<br><b>07:58 AM</b>                        |  |
| Date Notified<br><b>03/08/2018</b>           |                                      | Time Notified<br><b>07:43 AM</b>             | Total Units<br><b>01</b>               | Total Injured<br><b>00</b>                             | Total Killed<br><b>00</b>                    |
| <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<br><b>NO</b>        | Tags   |  |
| <input type="checkbox"/> Reportable          |                                      | Crash Type<br><b>DT4000 (STANDARD CRASH)</b> |  | <input type="checkbox"/> Amended                       | <input type="checkbox"/> Secondary Crash     |

## Description

|  |                                       |
|--|---------------------------------------|
| Diagram<br><br> <p style="text-align: center;"><b>NON REPORTABLE NO DAMAGE/INJURY</b></p> | Reconstruction By                     |
|  | Photos By                             |
|  | Additional Information<br><b>NONE</b> |

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

OPERATOR WAS BACKING THE UNIT OUT OF A DRIVEWAY AT E3743 NORTHLINE RD WHEN SHE GOT TOO FAR BACK AND DROPPED THE REAR TIRES JUST OFF THE ROADWAY. DUE TO THE SNOW SHE COULD NOT MOVE IT FORWARD AND WAS STUCK. STEVES AUTO WAS CONTACTED AND PULLED IT BACK ONTO THE ROADWAY. OPERATOR DROVE IT AWAY. THERE WERE NO INJURIES OR DAMAGE.

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## Location

|   |                                     |                                   |
|---|-------------------------------------|-----------------------------------|
| ON TOWN LINE RD<br>0.28 MI E<br>OF NORTH LINE RD<br>IN THE TOWN OF WASHINGTON<br>IN SAUK COUNTY | Latitude<br><b>43.467589443</b>     | Longitude<br><b>-90.131846473</b> |
|   | X Coordinate<br><b>246665.65625</b> | Y Coordinate<br><b>4817507.5</b>  |
|   | Structure Type                      |                                   |

## Crash Scene

|   |   |   |
|---|---|---|
| First Harmful Event<br><b>DITCH</b>                               | First Harmful Event Location<br><b>SHOULDER RIGHT</b>                 |   |
| Manner of Collision<br><b>NO COLLISION W/VEHICLE IN TRANSPORT</b> | Light Condition<br><b>DAWN</b>  |   |
| Road Surface Condition(s)<br><b>DRY</b>                           | Roadway Factor(s)<br><br><b>NONE</b>                                  |   |
| Environment Factor(s)<br><b>NONE</b>                              |   |   |
| Weather Condition(s)<br><b>CLEAR</b>                              |   |   |
| Animal Type   | Relation To Trafficway<br><b>TRAFFICWAY - ON ROAD</b>                 |   |
| Crash Classification - Location<br><b>PUBLIC PROPERTY</b>         | Crash Classification - Jurisdiction<br><b>NO SPECIAL JURISDICTION</b> |   |
| Tribal Land   | Access Control<br><b>NO CONTROL</b>                                   | Special Study                                   |
| Within Interchange Area<br><b>NO</b>                              | Junction Location<br><b>NON-JUNCTION</b>                              | Intersection Type<br><b>NOT AN INTERSECTION</b> |

## Unit Summary

|             |   |   |   |                            |   |  |
|-------------|---|---|---|----------------------------|---|--|
| <b>UNIT</b> | <b>01</b>   | Unit Status<br><b>IN TRANSIT</b>        | Vehicle Operating As Classification<br><b>D CLASS</b> |                            | Unit Type<br><b>BUS</b>                               |  |
|             |   | Vehicle Type                            |   |                            | Operating As Endorsements<br><b>P - PASSENGER BUS</b> |  |
|             | Total Occs<br><b>02</b>   | Train/Bus # Injured<br><b>0</b>         | Total # Citations Issued<br><b>0</b>                  | Total Trailers<br><b>0</b> | Total HazMat Types                                    |  |
|             | Insurance?<br><b>YES</b>  | Direction Of Travel<br><b>EASTBOUND</b> | <input type="checkbox"/> Pre Crash Tire Mark          | Speed Limit<br><b>45</b>   | Total Lanes<br><b>2</b>                               |  |
|             | Most Harmful Event: Collision With<br><b>DITCH</b>                                      |   | Special Function<br><b>VEHICLE USED AS OTHER BUS</b>  |                            | Emergency Motor Vehicle Use<br><b>NOT APPLICABLE</b>  |  |
|             | Traffic Way<br><b>TWO-WAY, NOT DIVIDED</b>  |   | Traffic Control<br><b>NO CONTROL</b>                  |                            | Traffic Control Inoperative/Missing<br><b>NO</b>      |  |
|             | Surface Type<br><b>BLACKTOP (BITUMINOUS)</b>  |   | Road Curvature<br><b>STRAIGHT</b>                     |                            | Road Grade<br><b>DOWNHILL</b>                         |  |
|             | Truck Bus or HazMat<br><b>VEHICLE DESIGNED TO CARRY 9 OR MORE PPL, INCLUDING DRIVER</b> |   |   |                            |   |  |

|             |                |  |  |                     |   |
|-------------|----------------|--|--|---------------------|---|
| <b>UNIT</b> | <b>VEHICLE</b> | <b>Vehicle</b>   |  |                     |   |
|             |                | License Plate Number<br><b>136ZYH</b>                      | Plate Type<br><b>HSV - HUMAN SERVICE V</b> | St<br><b>WI</b>     | Country of Issuance<br><b>UNITED STATES</b> |
|             |                | Vehicle Identification Number<br><b>1FD FE4FL3BDB12349</b> | Make<br><b>FORD</b>                        | Year<br><b>2011</b> | Model<br><b>FOREST RIV</b>                  |
|             |                | Color<br><b>WHI - WHITE</b>                                | Body Style<br><b>BU - BUS</b>              |                     | Bus Use<br><b>OTHER</b>                     |
|             |                | Initial Contact Point<br><b>NON-COLLISION</b>              | Vehicle Damage                             |                     |   |
|             |                | Extent Of Damage<br><b>NO DAMAGE</b>                       | <b>NO DAMAGE</b>                           |                     |   |

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|                           |            |  |   |  |  |
|---------------------------|------------|--|---|--|--|
| UNIT                      | VEHICLE    | Towed Due To Damage<br><b>NOT TOWED</b>                                | Vehicle Removed By<br><b>OPERATOR</b>                                   |  |  |
|                           |            | What Driver Was Doing<br><b>BACKING</b>                                | Vehicle Factors   |  |  |
|                           |            | Driver Prior Action Other  | <b>NOT APPLICABLE</b>   |  |  |
|                           |            | Driver Actions<br><b>UNSAFE BACKING</b>                                |   |  |  |
| 01                        | 01         | Driver Distractions<br><b>NOT DISTRACTED</b>                           |   |  |  |
|                           |            | Owner Name<br><b>VARC<br/>(608) 393-8926</b>                           | Owner Address<br><b>1133 NELSON PARKWAY<br/>VIROQUA, WI 54665 , US</b>  |  |  |
| <b>Sequence Of Events</b> |            |  |   |  |  |
| UNIT                      | INDIVIDUAL | 01   | Event<br><b>DITCH</b>   |  |  |
|                           |            | 02   | Event   |  |  |
|                           |            | 03   | Event   |  |  |
|                           |            | 04   | Event   |  |  |
| <b>Policy Holder</b>      |            |  |   |  |  |
| UNIT                      | INDIVIDUAL | Insurance Company<br><b>HANOVER-INS-CO,-THE</b>                        | Organization/Company<br><b>VARC</b>                                     |  |  |
|                           |            | Driver<br><b>HAZEL HESS<br/>(608) 604-6188</b>                         | Citations Issued<br><b>0</b>  | Sex<br><b>FEMALE</b>                               |  |
| UNIT                      | INDIVIDUAL | Date of Birth  | Race<br><b>WHITE</b>  |  |  |
|                           |            | Address<br><b>711 S PRESTON AVE # 208<br/>REEDSBURG, WI 53959 , US</b> | Driver License Number<br><b>STATE: WISCONSIN COUNTRY: UNITED STATES</b> |  |  |
| 01                        | 001        | <b>Equipment</b>   | On Duty Crash   | Safety Equipment<br><b>SHOULDER &amp; LAP BELT</b> |  |
|                           |            | Seat Position<br><b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>        |   |  |  |
|                           |            | Helmet Use   |   | Helmet Compliance                                  |  |
|                           |            | Eye Protection   |   | Tint Compliance                                    |  |
|                           |            | <b>Injury</b>  | Injury Severity<br><b>NO APPARENT INJURY</b>                            | Airbag<br><b>NON DEPLOYED</b>                      |  |
|                           |            | Ejected<br><b>NOT EJECTED</b>  |   | Ejection Path<br><b>NOT EJECTED/NOT APPLICABL</b>  | Trapped/Extricated<br><b>NOT TRAPPED</b> |

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|---|-----------------|--|--|---|--|----------------|
| UNIT  | INDIVIDUAL      | Medical Transport<br><b>NOT TRANSPORTED</b>                    |  | EMS Agency Identifier                             | EMS Run #                                |                |
|   |                 | Hospital   |  | Date of Death                                     | Time of Death                            |                |
|   |                 | <b>Non Motorist</b>  | Striking Unit #                              | Prior Action                                      | Location                                 | To/From School |
|   |                 | Action   |  |   |  |                |
|   |                 | Action Other   |  |   |  |                |
|   |                 | <b>Drug &amp; Alcohol</b>                                      | Suspected Alcohol Use<br><b>NO</b>           |   | Suspected Drug Use<br><b>NO</b>          |                |
|   |                 | Alcohol Test Given<br><b>TEST NOT GIVEN</b>                    |  | Alcohol Test Type                                 | Alcohol Test Results                     |                |
|   |                 | Drug Test Given<br><b>TEST NOT GIVEN</b>                       |  | Drug Test Type                                    | Drug Test Results                        |                |
|   |                 | Drug Type  |  |   |  |                |
|   |                 | Individual Condition<br><b>APPEARED NORMAL</b>                 |  |   |  |                |
| UNIT  | INDIVIDUAL      | <b>Individual</b>  |  |   |  |                |
|   |                 | Passenger<br><b>JORDAN SMITH<br/>(608) 403-6424</b>            |  | Citations Issued<br><b>00</b>                     | Sex<br><b>MALE</b>                       |                |
|   |                 |  |  | Date of Birth                                     | Race<br><b>WHITE</b>                     |                |
|   |                 | Address<br><b>E3743 NORTHLINE RD<br/>LOGANVILLE, WI , US</b>   |  | Driver License Number                             |  |                |
|   |                 | <b>Equipment</b>   | On Duty Crash                                | Safety Equipment                                  |  |                |
|   |                 | Seat Position<br><b>OTHER ROW (BUS, 15 PASSENGER VAN, ETC)</b> |  | <b>RESTRAINT USE UNKNOWN</b>                      |  |                |
|   |                 | Helmet Use   |  | Helmet Compliance                                 |  |                |
|   |                 | Eye Protection   |  | Tint Compliance                                   |  |                |
|   |                 | <b>Injury</b>  | Injury Severity<br><b>NO APPARENT INJURY</b> |   | Airbag<br><b>NOT APPLICABLE</b>          |                |
|   |                 | Ejected<br><b>NOT EJECTED</b>                                  |  | Ejection Path<br><b>NOT EJECTED/NOT APPLICABL</b> | Trapped/Extricated<br><b>NOT TRAPPED</b> |                |
| Medical Transport<br><b>NOT TRANSPORTED</b> |                 | EMS Agency Identifier  | EMS Run #                                    |   |  |                |
| Hospital                                    |                 | Date of Death  | Time of Death                                |   |  |                |
| <b>Non Motorist</b>                         | Striking Unit # | Prior Action   | Location                                     | To/From School                                    |  |                |

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|-------------------------------------|------------------|---|--|---|--|---|--|
| UNIT                                | INDIVIDUAL       | Action  |  |   |  |   |  |
|                                     |                  | Action Other  |  |   |  |   |  |
|                                     | 01               | 002   | <b>Drug &amp; Alcohol</b>                                  |   | Suspected Alcohol Use<br><b>NO</b>   | Suspected Drug Use<br><b>NO</b>                               |  |
|                                     |                  |   | Alcohol Test Given<br><b>TEST NOT GIVEN</b>                |   | Alcohol Test Type  | Alcohol Test Results  |  |
|                                     |                  |   | Drug Test Given<br><b>TEST NOT GIVEN</b>                   |   | Drug Test Type   | Drug Test Results   |  |
|                                     |                  |   | Drug Type  |   |  |   |  |
|                                     |                  |   | Individual Condition<br><b>APPEARED NORMAL</b>             |   |  |   |  |
|                                     | UNIT             | TRUCK   | BUS  | 01  | <b>Carrier</b>   |   |  |
|                                     |                  |   |  |   | <input checked="" type="checkbox"/> Use Vehicle Owner Same as Carrier      |   | Source<br><b>VEHICLE-SIDE</b>                                    |
|                                     |                  |   |  |   | Name<br><b>VARC<br/>USDOT# 924957</b>                                      |   | Address<br><b>1133 NELSON PARKWAY<br/>VIROQUA, WI 54665 , US</b> |
| GVWR<br><b>10,001-26,000 LBS</b>    |                  |   |  |   | Vehicle Configuration<br><b>BUS(SEATS FOR MORE THAN 15 OCCUPANTS, INCL</b> | Cargo Body Type<br><b>BUS (SEATS FOR MORE THAN 15 OCCUPAN</b> |  |
| US DOT #<br><b>924957</b>           |                  |   |  |   | Carrier Type<br><b>NOT IN COMMERCE/OTHER TRUCK</b>                         | Permitted Load<br><b>NOT APPLICABLE</b>                       |  |
| <input type="checkbox"/> OS/OW Load | WI Permit Number | <input type="checkbox"/> Permitted Vehicle On Permitted Route | <input type="checkbox"/> Escort Vehicle Required By Permit | <input type="checkbox"/> Escort Vehicle Present |  |   |  |
| Measured Height                     | Measured Length  | Measured Width  | Measured Weight  |   |  |   |  |