

WISCONSIN MOTOR VEHICLE
CRASH REPORT

Location

ON STH60 WB 251 FT W OF BADGER RD IN THE TOWN OF TROY IN SAUK COUNTY	Latitude 43.200825229	Longitude -89.933150687
	X Coordinate 261697.125	Y Coordinate 4787294
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event BRIDGE RAIL	First Harmful Event Location SHOULDER LEFT	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
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

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 2	Train/Bus # Injured	Total # Citations Issued 1	Total Trailers 0	Total HazMat Types 0
	Insurance? NO	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With BRIDGE RAIL		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				

UNIT 01	Vehicle			
	License Plate Number GGE044	Plate Type AUT - AUTOMOBILE	St IA	Country of Issuance UNITED STATES
	Vehicle Identification Number 1G2ZG58N374250212	Make PONTIAC	Year 2007	Model GRAND PRIX
	Color WHI - WHITE	Body Style 4D - 4DR		Bus Use NOT A BUS
	Initial Contact Point 11--LEFT FRONT CORNER	Vehicle Damage 8--LEFT SIDE REAR, 9--LEFT SIDE MIDDLE, 11--LEFT FRONT CORNER, 12--FRONT		
Extent Of Damage FUNCTIONAL DAMAGE				

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UNIT	VEHICLE	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 OTHER CONTRIBUTING ACTION					
		Driver Distractions UNKNOWN IF DISTRACTED					
01	01	Owner Name MIRANDA JEAN MUCHOW		Owner Address 950 DAVIS ST DUBUQUE, IA 52001 , US			
		Sequence Of Events					
01	01	Event CROSS CENTERLINE					
		Event BRIDGE RAIL					
		Event					
		Event					
UNIT	INDIVIDUAL	Individual					
		Driver JUSTIN OWEN HOOK (608) 219-3072		Citations Issued 1	Sex MALE		
				Date of Birth [REDACTED]	Race WHITE		
		Address 3143 MAPLE VALLEY DR #115 MADISON, WI 53719 , US		Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES			
		Equipment		On Duty Crash			
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		Safety Equipment SHOULDER & LAP BELT			
		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
Medical Transport NOT TRANSPORTED				EMS Agency Identifier	EMS Run #		

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UNIT	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				
Passenger MIRANDA JEAN MUCHOW			Citations Issued 0		Sex FEMALE	
			Date of Birth [REDACTED]	Race WHITE		
Address 950 DAVIS ST DUBUQUE, IA 52001 , US			Driver License Number [REDACTED] STATE: IOWA COUNTRY: UNITED STATES			
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	

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UNIT	INDIVIDUAL	Action				
		Action Other				
	01	002	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			
	01	Violations				
		UTC Number J3628391	Issue To? 001	Statute Number 343.44(1)(a)	Seq Num 001	Description OPERATING AFTER SUSPENSION

Property Owner

PROP OWNER	01	Government COUNTY OF SAUK	Address 505 BROADWAY BARABOO, WI 53913 , US
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Fixed Objects Struck

01	Striking Unit 01	Struck Object BRIDGE RAIL	Structure Number	Damage Tag Number 0000000
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