## 6TL09QKRCN 18-06067

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/10/2018

Crash Time 09:25 PM

|                         | Document Number Override   | Primary Crash Document #                        | ,                           | Agency Crash Number<br>18-06067 |   |                                     | Investigating Officer/Deputy DEPUTY S. STACEY |              |                     |  |
|-------------------------|--|---|-----------------------------|---------------------------------|---|-------------------------------------|---|--------------|---------------------|--|
| _                       | Caralla Data   | Con als Time                                    | Doto Ar                     | Date Arrived                    |   | Time Arrived                        |   |              |                     |  |
| X                       | Crash Date   | Crash Time                                      | Date Ai                     | iiveu                           |   | Tillie                              | Alliveu                                       |              |                     |  |
| $\overline{\mathbf{S}}$ | 06/10/2018 09:25 PM  |   |                             |                                 |   |                                     |   |              |                     |  |
| 5                       | Date Notified  | Time Notified                                   | Total U                     | nits                            |   |                                     | Injured                                       | Total Killed | d                   |  |
| X                       | 06/10/2018   | 09:28 PM  | 01                          | 01                              |   | 00                                  |   | 00           |                     |  |
| 6TL09QKR                | On Emergency Hi  | it and Run Lane                                 | Closure                     | osure Work Zo                   |   |                                     | Trailer or To                                 |              | Reporting Threshold |  |
| <b>.</b> ⊣∫             | Government   | Active School Zone                              |                             | School Bus Related              |   | d Tags                              |   |              |                     |  |
| 5                       | Property   | NO  |                             |                                 |   |                                     |   |              |                     |  |
|                         | <b>✓</b> Reportable  | ANIMAL W/ NO INJURY                             |                             |                                 | Amended   |                                     | Secondary Crash                               |              |                     |  |
|                         | , a sworn law enforcement officer, agree that I have not added any CJIS data in this report. |   |                             |                                 |   |                                     |   |              |                     |  |
| Ī                       | Location   |   |                             |                                 |   |                                     |   |              |                     |  |
| - {                     | ON WALNUT ST/ STH154 WB  |   |                             |                                 | Latitude  |                                     |   | Longitud     | de                  |  |
|                         | 0.62 MI E  |   |                             | 43.43799350                     |   | 93505                               | )5  |              | -90.05483228        |  |
|                         | OF CRESCENT DR (2)   |   |                             |                                 | X Coordinate  |                                     | Y Coordinate                                  |              | linate              |  |
|                         | IN THE TOWN OF WESTFIELD   | LD  |                             |                                 | 252775  |                                     |   |              | 4813989             |  |
|                         | IN SAUK COUNTY   |   |                             |                                 | Structure Type  |                                     |   |              |                     |  |
|                         |  |   |                             |                                 |   | UCTURE                              |   |              |                     |  |
| L                       | Orașile Coorași  |   |                             |                                 |   |                                     |   |              |                     |  |
| ,                       | Crash Scene  |   |                             |                                 | 1   |                                     |   |              |                     |  |
|                         | First Harmful Event  |   |                             |                                 |   | nful Event Lo                       | cation  |              |                     |  |
|                         | NON DOMESTICATED ANIM  | IAL (ALIVE)                                     |                             |                                 | ON ROADWAY  |                                     |   |              |                     |  |
|                         | Manner of Collision  |   |                             |                                 | Light Condition   |                                     |   |              |                     |  |
|                         | NO COLLISION W/VEHICLE   | IN TRANSPORT                                    |                             |                                 |   |                                     |   |              |                     |  |
|                         | Road Surface Condition(s)  |   |                             |                                 | Roadway   | Factor(s)                           |   |              |                     |  |
|                         |  |   |                             |                                 |   |                                     |   |              |                     |  |
| ŀ                       | Environment Factor(s)  |   |                             |                                 |   |                                     |   |              |                     |  |
|                         | 2  |   |                             |                                 |   |                                     |   |              |                     |  |
|                         |  |   |                             |                                 |   |                                     |   |              |                     |  |
| İ                       | Weather Condition(s)   |   |                             |                                 |   |                                     |   |              |                     |  |
|                         |  |   |                             |                                 |   |                                     |   |              |                     |  |
| ļ                       | A vive at Torre  |   |                             |                                 | D. C. T. T. W.  |                                     |   |              |                     |  |
|                         | Animal Type  |   |                             |                                 | Relation To Trafficway TRAFFICWAY - ON ROAD                 |                                     |   |              |                     |  |
| ļ                       | DEER   |   |                             |                                 |   |                                     |   |              |                     |  |
|                         | Crash Classification - Location  |   |                             |                                 | Crash Classification - Jurisdiction NO SPECIAL JURISDICTION |                                     |   |              |                     |  |
| ļ                       | PUBLIC PROPERTY  |   |                             |                                 |   |                                     |   |              | 10 : 10: 1          |  |
|                         | Tribal Land  |   |                             |                                 |   | Access Control                      |   |              | Special Study       |  |
| Į                       |  |   |                             |                                 |   |                                     |   |              |                     |  |
|                         | Unit Summary -   |   |                             |                                 |   |                                     |   |              |                     |  |
|                         | Unit Status Vehicle Operating As   |   |                             | ating As C                      | Classification  |                                     | Unit Type                                     |              |                     |  |
|                         | IN TRANSIT D CLASS   |   |                             | LASS                            |   |                                     | AUTOMOBILE                                    |              |                     |  |
| 10                      | Vehicle Type   |   |                             |                                 | Operating As Endorsements                                   |                                     |   |              |                     |  |
| 0                       | (SPORT) UTILITY VEHICLE  |   |                             |                                 |   |                                     |   |              |                     |  |
| ĺ                       | Total Occs Train/Bus # Injured 3   |   | Total # Citations Issued  0 |                                 | 0   |                                     | 0   |              | :Mat Types          |  |
|                         |  |   |                             |                                 |   |                                     |   |              |                     |  |
|                         |  | Direction Of Travel  WESTBOUND  Pre Crash  Mark |                             |                                 |   |                                     |   |              | es                  |  |
| ╘                       |  | L   | ■ Mark                      |                                 |   |                                     |   |              |                     |  |
| LINO                    | Most Harmful Event: Collision With   |   | Special Function            |                                 |   |                                     | Emergency Motor Vehicle Use                   |              |                     |  |
| _                       | NON DOMESTICATED ANIM  | NO SPECIA                                       | NO SPECIAL FUNCTION         |                                 |   |                                     |   |              |                     |  |
|                         | Traffic Way  | Traffic Contro                                  | Traffic Control             |                                 |   | Traffic Control Inoperative/Missing |   | tive/Missing |                     |  |
|                         |  |   |                             |                                 |   |                                     |   |              |                     |  |
|                         | Surface Type   | Road Curvatu                                    | Road Curvature              |                                 |   | Road Grade                          |   |              |                     |  |
|                         |  |   |                             |                                 |   |                                     |   |              |                     |  |

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|         | Truc<br><b>NO</b> | k Bus or HazMat  |  |   |   |  |  |  |  |
|---------|-------------------|--|--|---|---|--|--|--|--|
|         |                   | Vehicle  |  |   |   |  |  |  |  |
| UNIT 01 | 01                | License Plate Number ACZ8652 Vehicle Identification Number 1C4PJMCS2FW511781                   | Plate Type St AUT - AUTOMOBILE WI Make Year JEEP 2019          |   | Country of Issuance UNITED STATES  Model CHEROKEE L |  |  |  |  |
|         |                   | Color<br>BLK - BLACK   | Body Style UT - SPORT UTILITY VEI                              |   | Bus Use<br>NOT A BUS                                |  |  |  |  |
|         | VEHICLE           | Initial Contact Point 12FRONT Extent Of Damage FUNCTIONAL DAMAGE Towed Due To Damage NOT TOWED | Vehicle Damage  10LEFT SIDE FRONT, 1  Vehicle Removed By OWNER | DLEFT SIDE FRONT, 11LEFT FRONT CORNER, 12FRONT  ehicle Removed By |   |  |  |  |  |
|         |                   | What Driver Was Doing  Driver Prior Action Other   | Vehicle Factors  |   |   |  |  |  |  |
| LINO    | VEHICLE           | Driver Actions NO CONTRIBUTING ACTION  |  |   |   |  |  |  |  |
| 10      | 10                | Driver Distractions NOT DISTRACTED   |  |   |   |  |  |  |  |
|         |                   | Owner Name   | Owner Address  |   |   |  |  |  |  |
| Ħ       |                   | Policy Holder Insurance Company  | In dividual  |   |   |  |  |  |  |
| 5       |                   | PROGRESSIVE-CLASSIC-INS-CO   | Individual COURTNEY VAN DEN                                    | BERGH   |   |  |  |  |  |
|         | I                 | Individual   |  |   |   |  |  |  |  |
| LIND    | NAL               | Driver COURTNEY G VAN DEN BERGH (608) 284-1595   | Citations Issued  O  Date of Birth                             |   | Sex FEMALE Race WHITE                               |  |  |  |  |
|         | INDIVIDUAL        | Address<br>836 W SEMINARY ST<br>RICHLAND CENTER, WI 53581, US                                  | Driver License Number STATE: WISCONSIN C                       |   |   |  |  |  |  |
|         |                   | Equipment On Duty Crash Seat Position  | Safety Equipment SHOULDER & LAP BE                             | Safety Equipment SHOULDER & LAP BELT                              |   |  |  |  |  |
|         |                   | Helmet Use   | Helmet Compliance  | Helmet Compliance   |   |  |  |  |  |
|         |                   | Eve Protection   | Tint Compliance  |   |   |  |  |  |  |

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|---------|-----------------|----------------------|-----------------------------|----------------|---------------------------------|-------------------|----------------------|----------------|--|--|--|
|         |                 |                      |                             |                |                                 |                   |                      |                |  |  |  |
| 10      | 001             | Injury               | Injury Severity NO APPARENT | INJURY         | Airbag                          |                   |                      |                |  |  |  |
|         |                 | Ejected              |                             |                | Ejection Path                   |                   | Trapped/Extricated   |                |  |  |  |
|         |                 | Medical Transport    |                             |                | EMS Agency Identifier EMS Run # |                   |                      |                |  |  |  |
|         |                 | NOT TRANSPOR         | TED                         |                |                                 |                   |                      |                |  |  |  |
|         |                 | Hospital             |                             |                | Date of Death                   |                   | Time of Death        |                |  |  |  |
|         |                 |                      |                             |                |                                 |                   |                      |                |  |  |  |
|         |                 | Non Motorist         | Striking Unit #             | Prior Action   |                                 | Location          |                      | To/From School |  |  |  |
|         |                 | Action               | •                           | •              |                                 | •                 |                      |                |  |  |  |
|         |                 |                      |                             |                |                                 |                   |                      |                |  |  |  |
|         | 7               |                      |                             |                |                                 |                   |                      |                |  |  |  |
| _       | INDIVIDUAL      |                      |                             |                |                                 |                   |                      |                |  |  |  |
| UNIT    | ₽               |                      |                             |                |                                 |                   |                      |                |  |  |  |
| <b></b> | $\geq$          |                      |                             |                |                                 |                   |                      |                |  |  |  |
|         | 닐               |                      |                             |                |                                 |                   |                      |                |  |  |  |
|         | =               |                      |                             |                |                                 |                   |                      |                |  |  |  |
|         |                 |                      |                             |                |                                 |                   |                      |                |  |  |  |
|         |                 | Action Other         |                             |                |                                 |                   |                      |                |  |  |  |
|         |                 |                      |                             |                |                                 |                   |                      |                |  |  |  |
|         |                 |                      | Suspected Alcohol           | Use            | Suspected Drug U                |                   |                      |                |  |  |  |
|         | E               | Drug & Alcohol       | NO                          |                | NO                              |                   |                      |                |  |  |  |
|         |                 | Alcohol Test Given   |                             |                | Alcohol Test Type               |                   | Alcohol Test Results |                |  |  |  |
|         |                 | TEST NOT GIVEN       | I                           |                | 71                              |                   |                      |                |  |  |  |
|         | Drug Test Given |                      |                             | Drug Test Type |                                 | Drug Test Results |                      |                |  |  |  |
|         |                 | TEST NOT GIVEN       | T NOT GIVEN                 |                |                                 |                   |                      | 3              |  |  |  |
| _       | Ξ               | Drug Type            |                             |                |                                 |                   |                      |                |  |  |  |
| 10      | 001             |                      |                             |                |                                 |                   |                      |                |  |  |  |
|         |                 |                      |                             |                |                                 |                   |                      |                |  |  |  |
|         |                 | Individual Condition |                             |                |                                 |                   |                      |                |  |  |  |
|         | APPEARED NORMAL |                      |                             |                |                                 |                   |                      |                |  |  |  |
|         |                 |                      |                             |                |                                 |                   |                      |                |  |  |  |