

6TL09N3P58
18-04752

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

6TL09N3P58

Document Number Override		Primary Crash Document #	Agency Crash Number 18-04752	Investigating Officer/Deputy DEPUTY C. FRANK	
Crash Date 05/10/2018		Crash Time 12:01 AM	Date Arrived 05/10/2018	Time Arrived 09:48 AM	
Date Notified 05/10/2018		Time Notified 09:16 AM	Total Units 01	Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input checked="" 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 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>	Reconstruction By
	Photos By 9198
	Additional Information PHOTOS

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

ON THE ABOVE DATE AND TIME THE ABOVE OPERATOR AND UNIT WAS INVOLVED IN A 1 UNIT CRASH ON KELLEY DR SOUTH OF GAVIN RD IN THE COUNTY OF SAUK. UNIT 1 LEFT THE ROADWAY AND STRUCK A BARBED WIRE FENCE AND A 2 GATES. THE REGISTERED OWNER BRITTANY M SCHULTZ FAILED TO NOTIFY LAW ENFORCEMENT OF THE CRASH UNTIL I LOCATED TO UNIT AND BEGAN SEARCHING FOR HER. BRITTANY STATED SHE WAS THE PASSENGER DURING THE CRASH. SHE STATED A FRIEND WAS DRIVING AND SWERVED TO AVOID A DEER. SHE ADMITTED THEY WERE EXCEEDING THE SPEED LIMIT AND DRIVING RECKLESSLY. BRITTANY STATED SHE HAS NO INSURANCE ON THE UNIT BEING OPERATED. BRITTANY STATED SHE WAS AFRAID TO REPORT THE CRASH DUE TO HER AND FRIEND HAVING A REVOKED DRIVING STATUS. UTC COMPLETED, ISSUED AND EXPLAINED.

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Location

ON KELLY DR 200 FT S OF GAVIN RD IN THE TOWN OF WINFIELD IN SAUK COUNTY	Latitude 43.618873161	Longitude -89.979397752
	X Coordinate 259600.28125	Y Coordinate 4833857.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event FENCE	First Harmful Event Location ROADSIDE	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DARK/UNLIT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) ANIMAL (S) IN ROADWAY		
Weather Condition(s) UNKNOWN		
Animal Type DEER	Relation To Trafficway TRAFFICWAY - NOT ON ROAD	
Crash Classification - Location PRIVATE PROPERTY	Crash Classification - Jurisdiction PRIVATE PROPERTY	
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 HIT AND RUN	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
		Vehicle Type (SPORT) UTILITY VEHICLE				Operating As Endorsements
	Total Occs 2	Train/Bus # Injured	Total # Citations Issued 2	Total Trailers 0	Total HazMat Types 0	
	Insurance? UNKNOWN	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 45	Total Lanes 2	
	Most Harmful Event: Collision With FENCE		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 RIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

UNIT	01	Vehicle			
		License Plate Number 240VNW	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 5GTDN13E478178563	Make HUMMER	Year 2007	Model H3 SUV
		Color WHI - WHITE	Body Style UT - SPORT UTILITY VEHICLE		Bus Use NOT A BUS
		Initial Contact Point 12--FRONT	Vehicle Damage 1--RIGHT FRONT CORNER, 2--RIGHT SIDE FRONT, 3--RIGHT SIDE MIDDLE, 4--RIGHT SIDE REAR, 5--RIGHT REAR CORNER, 7--LEFT REAR CORNER, 8--LEFT SIDE REAR		
		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 EXCEED SPEED LIMIT, FAILURE TO CONTROL, RAN OFF ROADWAY, FAILED TO KEEP IN DESIGNATED LANE, OPERATED MOTOR VEHICLE IN AGGRESSIVE/RECKLESS MANNER, OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER				
01	01	Driver Distractions OUTSIDE THE VEHICLE (INCLUDES UNSPECIFIED EXTERNAL DISTRACTIONS)				
		Owner Name BRITTANY M SCHULTZ (608) 495-3386		Owner Address 2129 VIKING DR REEDSBURG, WI 53959 , US		
		Sequence Of Events				
UNIT	INDIVIDUAL	01	Event FENCE			
		02	Event OTHER FIXED OBJECT			
		03	Event			
		04	Event			
01	001	Individual				
		Passenger BRITTANY MARIE SCHULTZ (608) 495-3386		Citations Issued 2	Sex FEMALE	
				Date of Birth [REDACTED]	Race WHITE	
		Address 2129 VIKING DR REEDSBURG, WI 53959 , US		Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES		
		Equipment		On Duty Crash	Safety Equipment	
		Seat Position 3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER		NONE USED - VEHICLE OCCUPANT		
		Helmet Use		Helmet Compliance		
		Eye Protection		Tint Compliance		
		Injury		Injury Severity NO APPARENT INJURY	Airbag NOT APPLICABLE	
		Ejected NOT APPLICABLE		Ejection Path NOT EJECTED/NOT APPLICABL	Trapped/Extricated NOT APPLICABLE	
Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #			

WISCONSIN MOTOR VEHICLE
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UNIT	INDIVIDUAL	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		Suspected Drug Use		
		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					
		NOT OBSERVED					
UNIT	INDIVIDUAL	Individual					
		Driver	Citations Issued	Sex			
			0				
			Date of Birth	Race			
		Address	Driver License Number				
		, ,					
		Equipment	On Duty Crash	Safety Equipment			
		Seat Position	NONE USED - VEHICLE OCCUPANT				
		1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY					
		Helmet Use	Helmet Compliance				
Eye Protection	Tint Compliance						
UNIT	INDIVIDUAL	01	002	Injury	Injury Severity	Airbag	
				NO APPARENT INJURY	NO APPARENT INJURY	NOT APPLICABLE	
				Ejected	Ejection Path		Trapped/Extricated
				NOT APPLICABLE	NOT EJECTED/NOT APPLICABL		NOT APPLICABLE
				Medical Transport	EMS Agency Identifier		EMS Run #
				NOT TRANSPORTED			
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	Suspected Drug Use
			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 NOT OBSERVED			
	01	Violations				
		UTC Number A1389965	Issue To? 001	Statute Number 346.70(1)	Seq Num 004	Description FAILURE OF OCCUPANT TO NOTIFY POLICE OF ACCIDENT
		UTC Number A1389966	Issue To? 001	Statute Number 344.62(1)	Seq Num 001	Description OPERATE MOTOR VEHICLE W/O INSURANCE

Property Owner

PROP OWNER	01	Individual KAREN R MEICHUS (608) 524-4917	Address E6619 GAVIN RD LYNDON STATION, WI 53944 , US
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Fixed Objects Struck

01	Striking Unit 01	Struck Object FENCE	Structure Number	Damage Tag Number
	Striking Unit 02	Struck Object OTHER FIXED OBJECT	Structure Number	Damage Tag Number