WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT **BARABOO, WI 53913**

Document Number Override	e Primary Cras	Primary Crash Document # Crash Time 03:15 PM Time Notified 03:17 PM it and Run Lane Closu		y Crash Number 934	Investigating Officer/Deputy CAPTAIN M. STODDARD Time Arrived 03:42 PM			
Crash Date 06/07/2018				rrived /2018				
Date Notified 06/07/2018				Jnits	Total Injured 00	Total Kill 00	Killed	
On Emergency	Hit and Run			Work Zone	Trailer or Towed		Reporting Threshold	
Government Property		School Zone	Schoo NO	Bus Related	Tags			
✓ Reportable	Crash Type DT4000 (S	TANDARD CRAS	SH)		Amended		Secondar Crash	
escription iagram	·					constructio		
					Ac	otos By APTAIN N ditional Info	I STODDARD Drmation	
⊽ I, a sworn law enfoi	rcement officer, a	gree that I have	not adde	d anv CJIS data in t	his report.			

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	Loc	ation ====									
		ELDER RIDGE RD				Latitude			Longitud	le	
	1247	7 FT W	43.409285206		-90.008112919						
	OF (CENTER VALLEY RD		X Coordinate		Y Coord	inate				
		HE TOWN OF WESTF	FIELD	256440.96875 4810662.5							
	IN S	AUK COUNTY		Structure			10.000				
					UCTURE						
	C=	ah Caana									
		sh Scene									
		Harmful Event					nful Event L				
	DITO						DER RIGH	1			
	-	ner of Collision				Light Cond					
		COLLISION W/VEHIC	LE IN TRANSPORT			DAYLIG					
		Surface Condition(s)				Roadway	Factor(s)				
	DRY	•									
	Envir	onment Factor(s)									
	NON	IE				NONE					
	Weat	ther Condition(s)									
	CLE										
						5.1.1	//				
	Anim	al Type				Relation To Trafficway TRAFFICWAY - NOT ON ROAD					
	Crasl	h Classification - Location				Crash Classification - Jurisdiction					
		SLIC PROPERTY				NO SPECIAL JURISDICTION					
	Triba	l Land				Access Control				Special Study	_
					NO CO			NO CONTROL			
		n Interchange Area	Junction Location			ction Type AN INTERSECTION					
	NO	_	NON-JUNCTION		NOT AN	INTERSE	CTION				
		Summary 💳									
		Status		-	_	Classification Unit Type					
		RANSIT		D CLASS		AUTOMOBILE					
-		cle Type				Operating As Endorsements					
		Occs	Train/Bus # Injured	Total # Cita	tiona laguas	ed Total Trailers Total HazMat Types			Mat Types		
	10tai	Occs	Hally Dus # Injured	101a1 # Cita	lions issued	0		0		wat Types	
		ance?	Direction Of Travel		CrashTire					es	
	YES				Mark	55		2			
-	Most				pecial Function			Emergency			_
,	CUL	.VERT	IAL FUNC	TION		NOT APPLICABLE					
		ic Way			Traffic Control NO CONTROL Road Curvature CURVE LEFT			Traffic Control Inoperative/Missing NO Road Grade LEVEL			
		D-WAY, NOT DIVIDED ace Type									
		CKTOP (BITUMINOU	S)								
		k Bus or HazMat	<u>-,</u>			FEAFF					
	NO										
	1	/ehicle									
	[License Plate Number Plate Type					St	Country of Is	suance		
		161TZB			AUT - AUTOMOBILE		WI UNITED ST		TATES		
-	_	Vehicle Identification Number Make				Year		Model			
•	6							MUSTANG			
		Color			Body Style			Bus Use NOT A BUS			
	111	, ,			2D - 2DR NOT A BUS Vehicle Damage						
-	7	1RIGHT FRONT CORNER			_						
Ž	¥	Extent Of Damage 1RI				ONT CORNER, 7LEFT REAR CORNER, 11LEFT FRONT FRONT, UNDERCARRIAGE					
٦.		FUNCTIONAL DAMAGE			12 500	ONT, UNDERCARRIAGE					
כ	VEHICLE	FUNCTIONAL DAMA	AGE	CORNER	k, 12FRO	NT, UNDE	ERCARRIA	AGE			

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					Vehicle Removed By						
		TOWED DUE TO	DISABLING DAMAGE	REE	DSBURG SALVAGE						
		What Driver Was Doi	ing	Vehic	cle Factors						
		NEGOTIATING CURVE									
		Driver Prior Action Other			APPLICABLE						
		Driver Actions									
	Е	OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER									
_	Ë	OF ENAMED INCOME VEHICLE IN INATTENTIAL, CANCELEGO ON ENNAMEN									
	VEHICL										
5	표										
	>										
		Driver Distractions									
		UNKNOWN IF DIS	STRACTED								
_											
6	01										
		Owner Name		- 1.	Owner Address						
		CANDICE SWAR	T7		540 N PINE ST						
		OANDIOL OWAR			REEDSBURG, WI 53959 , US						
					, ,						
	;	Sequence Of E	vents								
	1	Event									
	01	DOWNHILL RUNA	AWAY								
	~	Event									
	02	RUN OFF ROADV	VAY RIGHT								
		Event									
	03	CULVERT									
		Event									
	04	Event									
╘		Policy Holder									
L N		Insurance Company			dividual						
-		LIBERTY-MUTUAL-INS-CO			ANDICE SWARTZ						
		Individual									
		Driver		l Ci	tations Issued	Sex					
		CASEY SWARTZ	•	1	tations issued	MALE					
	٦L	(000) 445 0054			(8)						
	'n				ate of Birth	Race WHITE					
	INDIVIDUA					Willie					
3	\leq	Address			iver License Number						
_	Ä	540 N PINE ST	E20E0 11C	STATE: WISCONSIN COUNTRY: UNITED STATES							
	=	REEDSBURG, WI 53959 , US			STATE. WISCONSIN COUNTRY: UNITED STATES						
			On Duty Crash	Sa	afety Equipment						
		Equipment									
		Seat Position			SHOULDER & LAP BELT						
		1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY									
		Helmet Use			Helmet Compliance						
		Troiner 036			Tiennet Compilative						
		Eye Protection			Tint Compliance						
				Tim Compilance							
	_		Injury Severity	Λ:	rbag						
6	90	Injury									
_	<u> </u>	110711171112111111100111			NON DEPLOYED						
		Ejected				Trapped/Extricated					
		NOT EJECTED			OT EJECTED/NOT APPLICABL	NOT TRAPPED					

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		Medical Transport			EMS Agenc	y Identifier	EMS Run #			
		NOT TRANSPORT	ED							
		Hospital			Date of Dea	th	Time of Death			
						1				
		Non Motorist	Striking Unit #	Prior Action		Location		To/From School		
		Action								
	_									
_	A									
LNO	INDIVIDUAL									
–	₫									
	Z									
		Action Other								
			Suspected Alco	halllaa	Suspected [Drug Haa				
	L	Drug & Alcohol	NO	noi ose	NO	orug ose				
		Alcohol Test Given			Alcohol Tes	t Type	Alcohol Test Results			
		TEST NOT GIVEN								
		Drug Test Given TEST NOT GIVEN			Drug Test T	ype	Drug Test Results			
7	001	Drug Type								
	0									
		Individual Condition								
		APPEARED NORM	IAL							
	,	Violations								
		UTC Number Issue To? Statute Number			Seq Num 001	Description INATTENTIVE DRIVING	NG.			
	2	J359503	001	346.89(1)	001	INATIENTIVE DRIVII	10			