

6TL0B8M7TC
18-06684

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 18-06684	Investigating Officer/Deputy DEPUTY B. MEARS	
Crash Date 06/25/2018		Crash Time 04:45 PM	Date Arrived 06/25/2018	Time Arrived 05:00 PM	
Date Notified 06/25/2018		Time Notified 04:48 PM	Total Units 01	Total Injured 00	Total Killed 00
<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 YES, SCHOOL BUS INDIRE	Tags	
<input checked="" type="checkbox"/> Reportable	Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

Description

<p>Diagram</p> <p style="text-align: center;">RUNNING BOARD FROM UNIT</p> <p style="text-align: center;">STH 33</p> <p style="text-align: center;">*NOT TO SCALE*</p>	Reconstruction By
	Photos By DEPUTY MEARS
	Additional Information NONE, PHOTOS

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

UNIT WAS WB ON STH 33 EAST OF COON BLUFF RD WHEN OPERATOR STATED THE FRONT LEFT TIRE TREAD CAME OFF CAUSING HER TO START TO LOSE CONTROL. THE RUNNING BOARD FROM THE DRIVERS SIDE WAS BLOWN OFF ACROSS THE ROAD AND THE TIRE DEBRIS ALSO CAUSED DAMAGE TO THE FRONT AND SIDE OF THE UNIT. OPERATOR WAS ABLE TO STEER IT OFF THE ROAD. SHE WAS NOT INJURED. THE TIRE WAS STILL INFLATED. THE TIRES TREAD HAD COME COMPLETED OFF IN ONE PIECE. OPERATOR STATED THE TIRE WAS PURCHASED A FEW MONTHS AGO. AFTER CHANGING THE TIRE. OPERATOR REMOVED THE UNIT.

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Location

ON STH33 WB 587 FT E OF COON BLUFF RD IN THE TOWN OF EXCELSIOR IN SAUK COUNTY	Latitude 43.527758661	Longitude -89.86495847
	X Coordinate 268485.40625	Y Coordinate 4823412.5
	Structure Type	

Crash Scene

First Harmful Event OTHER NON-COLLISION	First Harmful Event Location ON ROADWAY	
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) CLOUDY		
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 01	Train/Bus # Injured	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 02	
	Most Harmful Event: Collision With OTHER NON-COLLISION		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 STRAIGHT	Road Grade DOWNHILL		
	Truck Bus or HazMat NO					

UNIT 01	Vehicle			
	License Plate Number 973UCU	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1G3NK52F03C170862	Make OLDSMOBILE	Year 2003	Model ALERO GX
	Color TRQ - TURQUOISE	Body Style 4D - 4DR		Bus Use NOT A BUS
	Initial Contact Point UNDERCARRIAGE	Vehicle Damage 9--LEFT SIDE MIDDLE, 10--LEFT SIDE FRONT, 11--LEFT FRONT CORNER, 12--FRONT, UNDERCARRIAGE		
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 GOING STRAIGHT		Vehicle Factors TIRES			
		Driver Prior Action Other					
		Driver Actions NO CONTRIBUTING ACTION					
		Driver Distractions NOT DISTRACTED					
01	01	Owner Name MICHELLE L MCSWEENEY (608) 434-8253		Owner Address S324 LAVALLE RD LA VALLE, WI 53941 , US			
Sequence Of Events							
	01	Event EQUIPMENT FAILURE (BLOWN TIRE, BRAKE FAILURE, ETC)					
	02	Event					
	03	Event					
	04	Event					
UNIT	Policy Holder						
	Insurance Company WADENA-INSURANCE-CO			Individual MICHELLE MCSWEENEY			
UNIT	INDIVIDUAL	Driver MICHELLE L MCSWEENEY (608) 434-8253		Citations Issued 0	Sex FEMALE		
		Address S324 LAVALLE RD LA VALLE, WI 53941 , US		Date of Birth [REDACTED]	Race WHITE		
				Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES			
01	001	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			
		Injury		Injury Severity NO APPARENT INJURY		Airbag NON DEPLOYED	
		Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABL		Trapped/Extricated NOT TRAPPED	

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UNIT 01	INDIVIDUAL 001	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
		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				