6TL0B4X4J5

18-08629

WISCONSIN MOTOR VEHICLE CRASH REPORT

ocument Number Overri	_	Primary Crash Document #		Crash Number 29	Investigating Officer/Deputy DEPUTY E. KNULL			
rash Date 8/07/2018	Crash Time 02:22 PM		Date Arrived 08/07/2018 Total Units		Time Arrived 03:09 PM			
ate Notified	Time Notified				Total Injured Total Kil		led	
8/07/2018	02:22 PM	1	01		00	00	Donostina.	
On Emergency	Hit and Run	t and Run Lane Closu		Work Zone	Trailer or Towed		Reporting Threshold	
Government Property		chool Zone	NO	Bus Related	Tags			
Reportable	Crash Type DT4000 (STA	ANDARD CRASH)		Amended		Secondary Crash	
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	Loc	ation									
		CARTER ST/ CTHG W	/B			Latitude			Longitud	le	
	1187 FT N						43.630159333		_	-90.231489175	
	OF MAGRUDER RD						X Coordinate		Y Coord	inate	
		HE TOWN OF WOOD SAUK COUNTY	LAND		239307.515625 4835872						
	IIN 3	DAUK COUNT T			Structure Type						
			NO STRUCTURE								
	Cra	sh Scene									
	First	Harmful Event				First Harm	nful Event l	_ocation			
	FEN	ICE				OUTSID	E RIGHT	-OF-WAY (TI	RAFFICW	AY)	
	Man	ner of Collision				Light Condition					
	NO	COLLISION W/VEHIC	LE IN TRANSPORT			DAYLIGHT					
	Road Surface Condition(s)						Factor(s)				
	DRY	(
	Envi	ronment Factor(s)									
	NON	NE				NONE					
	Wea	ther Condition(s)									
	CLC	DUDY									
	Anim	nal Type			Relation To Trafficway						
						NON TRAFFICWAY - OTHER					
		th Classification - Location				Crash Classification - Jurisdiction NO SPECIAL JURISDICTION					
	Triba	al Land				Access Control Special Study					
					1	NO CONTROL					
	NO NO	in Interchange Area	Junction Location NON-JUNCTION			ction Type NN INTERSECTION					
	I Ini	Cummary -									
		t Summary Status		Vehicle One	erating As C	lassification	1	Linit Type			
	Unit	Status			erating As C	lassification	1	Unit Type	RII F		
	Unit IN T	Status RANSIT		Vehicle Ope	-	lassification	l	AUTOMO		nents	
5	Unit IN T Vehi	Status			-	lassification	1	1		nents	
5	Unit IN T Vehi PAS	Status 'RANSIT cle Type	Train/Bus # Injured	D CLASS	-		Total Tra	AUTOMO Operating A	s Endorser	ments Mat Types	
5	Unit IN T Vehi PAS	Status RANSIT cle Type SSENGER CAR	Train/Bus # Injured	D CLASS				AUTOMO Operating A	s Endorser		
5	Unit IN T Vehi PAS Tota 1	Status RANSIT cle Type SSENGER CAR	Train/Bus # Injured Direction Of Travel	Total # Cita			Total Tra	AUTOMO Operating A	s Endorser Total Haz	Mat Types	
5	Unit IN T Vehi PAS Tota 1 Insur YES	Status FRANSIT cle Type SSENGER CAR I Occs rance?	Direction Of Travel WESTBOUND	Total # Cita 0 Pre	tions Issued CrashTire Mark		Total Tra	AUTOMO Operating A illers	Total Haz Total Lane 2	Mat Types	
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	Unit IN T Vehi PAS Tota 1 Insur YES Most FEN Traff TWO Surfa BLA Truc NO	Status RANSIT cle Type SSENGER CAR I Occs rance? St Harmful Event: Collision ICE ic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOU k Bus or HazMat Vehicle License Plate Number 719ZEA Vehicle Identification Num 2C3CCAGG1HH5403 Color GRY - GRAY Initial Contact Point 12FRONT	Direction Of Travel WESTBOUND With S)	Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva CURVE Li Plate Type AUT - AU Make CHRYSL Body Style SD - SED Vehicle Da	CrashTire Mark Inction INCLICATION INCLICA	ETION	Total Tra 0 Speed Li 55 St WI Year 2017	AUTOMO Operating A illers mit Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED S Model 300 Bus Use NOT A BU	Total Haz Total Lane Motor Vehi LICABLE rol Inoperat suance FATES	Mat Types es cle Use ive/Missing	
	Unit IN T Vehi PAS Tota 1 Insury PES Most FEN Truck BLA Truck NO	Status RANSIT cle Type SSENGER CAR I Occs rance? St Harmful Event: Collision ICE ic Way D-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOU k Bus or HazMat Vehicle License Plate Number 719ZEA Vehicle Identification Num 2C3CCAGG1HH5403 Color GRY - GRAY Initial Contact Point	Direction Of Travel WESTBOUND With S)	Total # Cita 0 Pre Special Fun NO SPEC Traffic Cont NO CONT Road Curva CURVE Li Plate Type AUT - AU Make CHRYSL Body Style SD - SED Vehicle Da 1RIGHT	CrashTire Mark Action EIAL FUNC ETCI TROL ACTURE ATTOMOBIL ER DAN Amage	ETION LE CORNER,	St WI Year 2017	AUTOMO Operating A illers mit Emergency NOT APP Traffic Cont NO Road Grade LEVEL Country of Is UNITED S Model 300 Bus Use NOT A BU	Total Haz Total Lane Motor Vehi LICABLE rol Inoperat suance FATES	Mat Types es cle Use	

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Towed Due To Dama	ge		e Removed By					
		NOT TOWED			OPERATOR Vehicle Feeters					
		What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors						
				NOT	APPLICABLE					
		Driver Filor Action Of	IICI							
		Driver Actions								
	щ	FAILURE TO CON	ITROL							
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L	VEHICL									
	>									
		2 2 2 4								
		Driver Distractions NOT DISTRACTE	D							
2	6									
		Owner Name LORA LEE SATTE	EDI CE		wner Address 1711 GROSS DR					
		(608) 403-7790	INLEE	WONEWOC, WI 53968, US						
		()			,					
	,	∟ Sequence Of E	vents							
		Event	vents							
	5	FENCE								
	7	Event								
	05									
	03	Event								
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	04	Event								
		L Policy Holder								
LNO		Insurance Company		Indi	vidual					
5		ERIE-INS-CO			RA SATTERLEE					
		Individual								
		Driver		l Cita	itions Issued	Sex				
		LORA LEE SATTERLEE				FEMALE				
	₹	(608) 403-7790		Date	e of Birth	Race				
⊨I	ב					WHITE				
L N	INDIVIDUAL	Address			Driver License Number					
_		E1711 GROSS DR WONEWOC, WI 53968 , US			STATE: WISCONSIN COUNTRY: UNITED STATES					
	_									
			On Duty Crash	Coff	ety Equipment					
		Equipment	On Duty Grasii	Sale	ety Equipment					
		Seat Position		SHOULDER & LAP BELT						
		1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY Helmet Use								
				Helmet Compliance						
		Eye Protection			Tint Compliance					
			Injury Severity	Airb	nan					
2	90	Injury Severity NO APPARENT INJURY			N DEPLOYED					
		Ejected	1	I	ction Path	Trapped/Extricated				
		NOT EJECTED		_	T EJECTED/NOT APPLICABL	NOT TRAPPED				

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Medical Transport			EMS Agency Identi	fier	EMS Run #				
		NOT TRANSPORTED			Line riginity lateralies						
		Hospital			Date of Death		Time of Death				
		Triophai					Timo di Bodui				
		Non Motorist	Striking Unit #	Prior Action	I	Location		To/From School			
LINO	INDIVIDUAL	Action Action Other	Supported Alaskal	lea .	L Supported Drug III						
	Ľ	Orug & Alcoho	& Alcohol NO Suspected Alcohol Use			Suspected Drug Use NO					
		Alcohol Test Giver TEST NOT GIVE			Alcohol Test Type		Alcohol Test Results				
		Drug Test Given TEST NOT GIVE	ΞN		Drug Test Type		Drug Test Results				
01	001	Drug Type									
		Individual Condition									
		APPEARED NO	RMAL								
	Pro	perty Owner									
PROP OWNER 01	Indiv BRI (608	idual AN V BROOKS 8) 464-3456			Address S487 COUNTY RO WONEWOC, WI 5	OAD G 3968,US					
	Fixe	ed Objects St	ruck								
	5		Struck Object FENCE				Structure Number	Damage Tag Number			