

6TL0BJ1GH2  
18-09541

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 <b>18-09541</b>		Investigating Officer/Deputy <b>DEPUTY J. MACASKILL</b>	
Crash Date <b>08/29/2018</b>		Crash Time <b>01:15 AM</b>		Date Arrived <b>08/29/2018</b>		Time Arrived <b>01:35 AM</b>	
Date Notified <b>08/29/2018</b>		Time Notified <b>01:18 AM</b>		Total Units <b>01</b>		Total Injured <b>00</b>	Total Killed <b>00</b>
<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 <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

<p>Diagram</p>	Reconstruction By
	Photos By
	Additional Information <b>NONE</b>

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

ON 8/29/18 AT APPROXIMATELY 0115 UNIT 1 WAS TURNING OUT OF A DRIVEWAY ONTO OLD WI-12. DRIVER OF UNIT 1 DID NOT NOTICE THAT WATER WAS COVERING THE ROADWAY. UNIT 1 THEN DROVE INTO THE DITCH THAT HAD A COUPLE FEET OF WATER IN IT. UNIT 1 WAS THEN STUCK IN THE COUPLE FEET OF WATER OFF THE ROADWAY.

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Location

ON OLD 12 364 FT N OF CTHH SB IN THE CITY OF WISCONSIN DELLS IN SAUK COUNTY	Latitude <b>43.627323091</b>	Longitude <b>-89.808003748</b>
	X Coordinate <b>273461.9375</b>	Y Coordinate <b>4834313.5</b>
	Structure Type	

Crash Scene

First Harmful Event <b>DITCH</b>	First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DARK/UNLIT</b>	
Road Surface Condition(s) <b>WATER (STANDING/MOVING)</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>WEATHER CONDITIONS</b>		
Weather Condition(s) <b>RAIN</b>		
Animal Type	Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>	Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land	Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>

Unit Summary

01 UNIT	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>		
	Vehicle Type <b>PASSENGER CAR</b>			Operating As Endorsements		
	Total Occs <b>1</b>	Train/Bus # Injured	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>YES</b>	Direction Of Travel <b>SOUTHBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>35</b>	Total Lanes <b>2</b>	
	Most Harmful Event: Collision With <b>IMMERSION, FULL OR PARTIAL</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>					

01 UNIT	<b>Vehicle</b>				
	01 VEHICLE	License Plate Number <b>176ZGF</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>4T1BE32K95U562744</b>	Make <b>TOYOTA</b>	Year <b>2005</b>	Model <b>CAMRY LE/X</b>
	Color <b>SIL - SILVER (ALUMINUM)</b>	Body Style <b>4D - 4DR</b>		Bus Use <b>NOT A BUS</b>	
	Initial Contact Point <b>NON-COLLISION</b>	Vehicle Damage			
	Extent Of Damage <b>DISABLING DAMAGE</b>	<b>ALL AREAS</b>			

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UNIT	VEHICLE	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>	Vehicle Removed By <b>CRAIGS TOWING</b>		
		What Driver Was Doing <b>LEFT TURN</b>	Vehicle Factors		
		Driver Prior Action Other	<b>NOT APPLICABLE</b>		
		Driver Actions <b>RAN OFF ROADWAY</b>			
01	01	Driver Distractions <b>NOT DISTRACTED</b>			
		Owner Name <b>ADRIANA LEONOR VIOLA (608) 432-1168</b>	Owner Address <b>1905 BROADWAY # 14 WISCONSIN DELLS, WI 53965 , US</b>		
<b>Sequence Of Events</b>					
UNIT	INDIVIDUAL	01	Event <b>LEFT TURN</b>		
		02	Event <b>RUN OFF ROADWAY RIGHT</b>		
		03	Event <b>DITCH</b>		
		04	Event <b>IMMERSION, FULL OR PARTIAL</b>		
<b>Policy Holder</b>					
UNIT	INDIVIDUAL	Insurance Company <b>HARTFORD-UNDERWRITERS-INS-CO</b>	Individual <b>ADRIANA VIOLA</b>		
		Driver <b>ADRIANA LEONOR VIOLA (608) 432-1168</b>	Citations Issued <b>0</b>	Sex <b>FEMALE</b>	
UNIT	INDIVIDUAL	Date of Birth [REDACTED]	Race		
		Address <b>1905 BROADWAY # 14 WISCONSIN DELLS, WI 53965 , US</b>	Driver License Number [REDACTED] <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
01	001	<b>Equipment</b>	On Duty Crash	Safety Equipment	
		Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>		<b>SHOULDER &amp; LAP BELT</b>	
		Helmet Use		Helmet Compliance	
		Eye Protection		Tint Compliance	
		<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>	
		Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABL</b>	Trapped/Extricated <b>NOT TRAPPED</b>

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<b>UNIT</b>          <b>01</b>	<b>INDIVIDUAL</b>          <b>001</b>	Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier		EMS Run #		
		Hospital	Date of Death		Time of Death		
		<b>Non Motorist</b>	Striking Unit #	Prior Action	Location		To/From School
		Action					
		Action Other					
		<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>		Suspected Drug Use <b>NO</b>		
		Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type		Alcohol Test Results		
		Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type		Drug Test Results		
		Drug Type					
		Individual Condition <b>APPEARED NORMAL</b>					