

6TL096J8XJ
18-10664


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 18-10664	Investigating Officer/Deputy DEPUTY J. SOLCHENBERGER	
Crash Date 09/25/2018		Crash Time 06:12 PM	Date Arrived 09/25/2018	Time Arrived 06:32 PM	
Date Notified 09/25/2018		Time Notified 06:14 PM	Total Units 02	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 NO	Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram	Reconstruction By
<p>not to scale</p> <p>not exact location. Reporting party was unsure where the accident happened on cth hh. reporting party though it was 1/4 mile from cth h</p> 	Photos By
	Additional Information NONE

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

UNIT 1 WAS DRIVING ON COUNTY HWY HH WAS THE DRIVE CAME TO A STOP IN THE MIDDLE OF THE ROADWAY. UNIT 1 THEN BACK INTO UNIT 2. AFTER UNIT 1 STRUCK UNIT 2, UNIT 1 THEN DROVE OFF AND LEFT THE SCENE. UNIT 1 AND OPERATOR SUBSEQUENTLY LOCATED STILL DRIVING AND ARRESTED FOR OWI.

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Location

ON CTHH SB 0.35 MI N OF CTHH WB IN THE TOWN OF DELLONA IN SAUK COUNTY	Latitude 43.598542285	Longitude -89.942652643
	X Coordinate 262485.21875	Y Coordinate 4831493.5
	Structure Type	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision OTHER	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

01 UNIT	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE		
	Vehicle Type (SPORT) UTILITY VEHICLE		Operating As Endorsements		
	Total Occs 1	Train/Bus # Injured	Total # Citations Issued 5	Total Trailers 0	Total HazMat Types 0
	Insurance? UNKNOWN	Direction Of Travel SOUTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT		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 UNKNOWN	Road Grade UNKNOWN	
	Truck Bus or HazMat NO				

01 UNIT VEHICLE	Vehicle			
	License Plate Number 439ZBE	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 2GNFLNEK7D6268668	Make CHEVROLET	Year 2013	Model EQUINOX LT
	Color BLU - BLUE	Body Style UT - SPORT UTILITY VEHICLE		Bus Use NOT A BUS
	Initial Contact Point 6--REAR	Vehicle Damage		
	Extent Of Damage NO DAMAGE	NO DAMAGE		

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UNIT	VEHICLE	Towed Due To Damage TOWED BUT NOT DUE TO DISABLING DAMAG		Vehicle Removed By STEVES AUTO SERVICE			
		What Driver Was Doing BACKING		Vehicle Factors			
		Driver Prior Action Other		NOT APPLICABLE			
		Driver Actions UNSAFE BACKING					
01	01	Driver Distractions UNKNOWN IF DISTRACTED					
		Owner Name MEGAN MARIE LEMOINE (608) 408-8504		Owner Address S1121 SMITH RD LA VALLE, WI 53941 , US			
Sequence Of Events							
UNIT	INDIVIDUAL	01	Event MOTOR VEH IN TRANSPORT				
		02	Event				
		03	Event				
		04	Event				
Individual							
UNIT	INDIVIDUAL	01	001	Driver MEGAN MARIE LEMOINE (608) 408-8504		Citations Issued 5	Sex FEMALE
				Date of Birth [REDACTED]		Race WHITE	
		Address S1121 SMITH RD LA VALLE, WI 53941 , US		Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES			
		Equipment		On Duty Crash	Safety Equipment		
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		RESTRAINT USE UNKNOWN			
		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 #		

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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 YES		Suspected Drug Use NO		
		Alcohol Test Given TEST REFUSED BUT OBTAINED			Alcohol Test Type BLOOD		Alcohol Test Results PENDING	
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Results	
		Drug Type						
		Individual Condition PHYSICALLY IMPAIRED, NOT OBSERVED						
		Violations						
UNIT	01	UTC Number	Issue To?	Statute Number	Seq Num	Description		
		AI387659	001	346.63(1)(a)	001	OPERATING WHILE UNDER THE INFLUENCE(2ND)		
		UTC Number	Issue To?	Statute Number	Seq Num	Description		
		AI387660	001	343.44(1)(a)	001	OPERATING AFTER SUSPENSION		
		UTC Number	Issue To?	Statute Number	Seq Num	Description		
AI387661	001	346.87	001	UNSAFE BACKING OF VEHICLE				
UTC Number	Issue To?	Statute Number	Seq Num	Description				
AI387662	001	346.935(2)	001	POSSESS OPEN INTOXICANTS IN MV-DRIVER				
UTC Number	Issue To?	Statute Number	Seq Num	Description				
AI387663	001	346.67(1)	004	HIT AND RUN				

Unit Summary

UNIT	02	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE			
		Vehicle Type PASSENGER CAR				Operating As Endorsements			
		Total Occs 1		Train/Bus # Injured		Total # Citations Issued 0		Total Trailers 0	Total HazMat Types 0
		Insurance? UNKNOWN		Direction Of Travel SOUTHBOUND		<input type="checkbox"/> Pre CrashTire Mark		Speed Limit 55	Total Lanes 2
		Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT				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 UNKNOWN		Road Grade UNKNOWN	
		Truck Bus or HazMat NO							
		Vehicle							

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UNIT VEHICLE	02	02	License Plate Number ABL4105	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
			Vehicle Identification Number 1FAHP36N89W105677	Make FORD	Year 2009	Model FOCUS SES
			Color RED - RED	Body Style 4D - 4DR	Bus Use NOT A BUS	
			Initial Contact Point 12--FRONT	Vehicle Damage 11--LEFT FRONT CORNER, 12--FRONT		
			Extent Of Damage MINOR DAMAGE			
			Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR		
			What Driver Was Doing UNKNOWN	Vehicle Factors NOT APPLICABLE		
UNIT VEHICLE	02	02	Driver Actions NO CONTRIBUTING ACTION			
			Driver Distractions UNKNOWN IF DISTRACTED			
			Owner Name BULA GIERINGER FARMS	Owner Address 349 HIGHWAY M COLOMA, WI 54930 , US		
Sequence Of Events						
UNIT INDIVIDUAL	01	01	Event MOTOR VEH IN TRANSPORT			
	02	02	Event			
	03	03	Event			
	04	04	Event			
Individual						
		Driver MICHAEL J SUBERLA (608) 403-1975	Citations Issued 0	Sex MALE		
			Date of Birth [REDACTED]	Race WHITE		
		Address 330 MILL ST LOGANVILLE, WI 53943 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES			
		Equipment	On Duty Crash	Safety Equipment SHOULDER & LAP BELT		
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY				

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02	002	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	
		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	
02	002	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					