6TL092T5MC 18-12136

WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT **BARABOO, WI 53913** (608) 356-4895

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| 0 | |
| | |
| | |

| Document Number Override | | | • | | Agency Crash Number 18-12136 | | Investigating Officer/Deputy DEPUTY J. KIRKENG | | |
|--------------------------|---------------------|--|------------------------|-----------------|--|-------------|--|------------------------|---------------------|
| ر د | | | 12:13 AM Time Notified | | Date Arrived 11/01/2018 Total Units 01 Ire Work Zone | | Time Arrived 12:42 AM | | |
| : I 3I | | | | | | | Total Injured 00 | Total Killed 00 | |
| -032 | | | | | | | Trailer or Towed | | Reporting Threshold |
| 0 [| Government Property | | Active Sc | School Zone Sch | | Bus Related | Tags | | |
| Crash Type DT4000 (STAND | | | NDARD CRASH |) | | Amended | | Secondary Crash | |

Description



Additional Information **NONE**

UNIT 1 TURNED W/B ONTO N DUTCH HOLLOW RD OFF OF THOMPSON. UNIT 1 SWERVED TO MISS A DEER GOING INTO THE DITCH ON THE NORTH SIDE OF THE ROADWAY. UNIT 1 THEN HIT SEVERAL TREES AND BRUSH UNTIL IT CAME TO REST.

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Location

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Crash Time 12:13 AM

| | | 4 | | | | | | | | |
|------|--------|------------------------------|---------------------|---|--|---|--|-------------------|------------|--|
| ٠ | | DUTCH HOLLOW RD FT W | | Latitude 43.59454423 | | | de REE 470E | | | |
| | | THOMPSON RD | | | | | | | 3554795 | |
| | | HE TOWN OF LA VAL | LE | | | Coordinate 6655.515625 | | Y Coord 483162 | | |
| | | AGR GOGHT | | | | ucture Type STRUCTURE | | · I | | |
| | Cra | sh Scene | | | | | | | | |
| 1 | | Harmful Event | | | Fir | st Harmful Event L | ocation | | | |
| | DIT | | | | | OULDER RIGH | | | | |
| | Manr | ner of Collision | | | Lig | ht Condition | | | | |
| | NO | COLLISION W/VEHICL | E IN TRANSPORT | | DA | ARK/UNLIT | | | | |
| | Road | d Surface Condition(s) | | | Ro | Roadway Factor(s) | | | | |
| | DRY | 1 | | | | | | | | |
| | Fnvir | ronment Factor(s) | | | | | | | | |
| | | MAL (S) IN ROADWAY | , | | NO | ONE | | | | |
| | | | | | | J.11_ | | | | |
| | | ther Condition(s) | | | | | | | | |
| | CLC | DUDY | | | | | | | | |
| | Anim | al Type | | | Re | lation To Trafficwa | ау | | | |
| | DEE | ER . | | | TF | RAFFICWAY - C | N ROAD | | | |
| | | h Classification - Location | | | | ash Classification - | | | | |
| | | BLIC PROPERTY | | | | SPECIAL JUF | RISDICTION | | To | |
| | Triba | al Land | | | | Access Control Special Study NO CONTROL | | | | |
| | Withi | in Interchange Area | Junction Location | | Intersection Ty | /ре | | | | |
| | NO | | NON-JUNCTION | | NOT AN INT | ERSECTION | | | | |
| ĺ | Unit | t Summary 💻 | | | | | | | | |
| | | Status | | Vehicle Ope | erating As Class | Classification Unit Type | | | | |
| | | RANSIT | | D CLASS | | AUTOMOBILE | | | | |
| 01 | | cle Type | | | | Operating As Endorsements | | | | |
| | | SENGER CAR | Train/Bus # Injured | Total # Citat | Total # Citations Issued Total Trailers Total HazMat Types | | | | | |
| | 10lai | Occs | rrain/bus # injureu | Total # Citations Issued 0 | | 0 | liers | 0 | wat Types | |
| | Insur | ance? | Direction Of Travel | Pre | CrashTire | Speed Li | mit | Total Land | es | |
| = | YES | ; | WESTBOUND | | Mark | 45 | | 2 | | |
| | | Harmful Event: Collision V | Vith | Special Fun | ction |)N | Emergency Motor Vehicle Use NOT APPLICABLE | | | |
| | TRE | | | | | | Traffic Control Inoperative/Missing | | | |
| | | ic Way D-WAY, NOT DIVIDED | | Traffic Contr | | NO | | .ive/iviissing | | |
| | | ace Type | | Road Curva | | | Road Grade | | | |
| | | NCRETE | | | STRAIGHT | | | LEVEL | | |
| | Trucl | k Bus or HazMat | | | | | | | | |
| | NO | | | | | | | | | |
| | , | Vehicle | | | | | | | | |
| | | License Plate Number 773EXJ | | | | St | Country of Issuance UNITED STATES | | | |
| | | | | | JTOMOBILE | WI | | | | |
| 5 | 7 | Vehicle Identification Num | Make | | Year | Model | | | | |
| ٦ | 0 | 5J6RE4H54AL096483 | , | | HONDA 2010 | | | CR-V EX | | |
| | | Color BLU - BLUE | | Body Style UT - SPORT UTILITY VEHICLE Bus Use NOT A BUS | | | | | | |
| | Ш | Initial Contact Point | | Vehicle Damage | | | | | | |
| ⊨ | ICLE | 1RIGHT FRONT CORNER | | | | | | | | |
| | Ĭ | Extent Of Damage | | | AS | | | | | |
| _ | νен | DISABLING DAMAGE | | | | | | | | |
| iecc | nein A | Notor Vehicle Crash | т | his report does not | include any C II | S data | | Crash Date | 11/01/2018 | |
| 1500 | 110111 | notor verticle Clasti | | THE TOPOIT GOES HOL | morado arry Odi | o dutu. | | J. GOIT DUIL | | |

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| | | Towed Due To Dama | ge DISABLING DAMAGE | Vehicle Removed By SHIELDS TOWING | | | | | | | | |
|------|--|--------------------------------|--------------------------|--|---------------------------------|--|--|--|--|--|--|--|
| | | What Driver Was Doi | | Vehicle Factors | | | | | | | | |
| | | GOING STRAIGH | | venilue i autois | | | | | | | | |
| | | Driver Prior Action Of | | NOT APPLICABLE | | | | | | | | |
| LINO | Driver Actions RAN OFF ROADWAY, SWERVED OR AVOIDED DUE TO WIND, SLIPPERY SURFACE, MOTOR VEHICLE, OBJECT, NON-MOTORIST IN ROADWAY, ETC. | | | | | | | | | | | |
| | Driver Distractions UNKNOWN IF DISTRACTED | | | | | | | | | | | |
| 01 | 5 | | | | | | | | | | | |
| 0 | 0 | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | Owner Name HELENE S FULL | | Owner Address S2910 FAIRWAY DR. | | | | | | | | |
| | | (608) 393-0237 | | REEDSBURG, WI 53959 , US | | | | | | | | |
| | | | | | | | | | | | | |
| | : | Sequence Of E | vents | | | | | | | | | |
| | 2 | Event MOTOR VEH IN T | RANSPORT | | | | | | | | | |
| | 05 | Event RUN OFF ROADV | VAY RIGHT | | | | | | | | | |
| | 03 | Event DITCH | | | | | | | | | | |
| | 9 | Event TREE | | | | | | | | | | |
| _ | | Policy Holder | | | | | | | | | | |
| UNIT | | Insurance Company | | Individual | | | | | | | | |
| ر | | USAA-CASUALT | Y-INS-CO | HELENE FULL | | | | | | | | |
| | | Individual | | | | | | | | | | |
| | | Driver HELENE S FULL | | Citations Issued | Sex | | | | | | | |
| | A L | (608) 393-0237 | | Date of Birth | FEMALE Race | | | | | | | |
| _ | INDIVIDUA | | | Date of Birth | WHITE | | | | | | | |
| | ₹ | Address | | Driver License Number | | | | | | | | |
| ر | S | S2910 FAIRWAY REEDSBURG, WI | | STATE: WISCONSIN COUNTRY: UNITED STATES | | | | | | | | |
| | _ | KEEDSBOKG, WI | 33339 , 03 | OTATE: WISCONSIN COCKTICT: C | MILDOTATEO | | | | | | | |
| | | Equipment | On Duty Crash | Safety Equipment | | | | | | | | |
| | | Seat Position | | SHOULDER & LAP BELT | | | | | | | | |
| | | | EFT SIDE (DRIVER/MOTORCY | | | | | | | | | |
| | | Helmet Use | | Helmet Compliance | | | | | | | | |
| | | Eye Protection | | Tint Compliance | | | | | | | | |
| _ | Σ | | Injury Severity | Airbag | | | | | | | | |
| 5 | O INO ALL AILENT INDOINT | | | DEPLOYED-COMBINATION | | | | | | | | |
| | | Ejected NOT EJECTED | | Ejection Path NOT EJECTED/NOT APPLICABL | Trapped/Extricated NOT TRAPPED | | | | | | | |
| | | ı | | | · · · · · · · - | | | | | | | |

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Crash Date 11/01/2018

Crash Time 12:13 AM

| | | Medical Transport | | | EMS Agency Ident | ifier | EMS Run # | |
|------|------------|--------------------------------|-------------------|--------------|-------------------|----------|----------------------|----------------|
| | | NOT TRANSPORTED | | | | | | |
| | | Hospital | | | Date of Death | | Time of Death | |
| | | Non Motorist | Striking Unit # | Prior Action | | Location | | To/From School |
| | | Action | | | | | | |
| | | | | | | | | |
| | INDIVIDUAL | | | | | | | |
| UNIT | פֿ | | | | | | | |
| 5 | ≥ | | | | | | | |
| | Z | | | | | | | |
| | | | | | | | | |
| | | Action Other | | | | | | |
| | | | Suspected Alcohol | Hea | Suspected Drug U | 20 | | |
| | E | Orug & Alcohol | NO | Ose | NO | 5C | | |
| | | Alcohol Test Given | | | Alcohol Test Type | | Alcohol Test Results | |
| | | TEST NOT GIVEN | | | Drug Test Type | | Drug Test Results | |
| | | Drug Test Given TEST NOT GIVEN | I | | | | Brug Foot Roound | |
| 01 | 001 | Drug Type | | | | | - | |
|) | 0 | | | | | | | |
| | | Individual Condition | | | | | | |
| | | APPEARED NOR | MAL | | | | | |
| | | | | | | | | |