WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	de Primary Crash		Agency 18-124	Crash Number 04	Investigating DEPUTY E	Officer/Deputy B. MEARS	1
Crash Date 11/07/2018	Crash Time 10:35 AM		Date Arrived 11/07/2018 Total Units 01		Time Arrived 10:49 AM		
Date Notified 11/07/2018	Time Notified 10:35 AM				Total Injured	Total Kill	ed
On Emergency	Hit and Run	Lane Closur	re	Work Zone	Trailer	or Towed	Reporting Threshold
Government Property	Active S	ala a a I 7 a a a	School I	Bus Related	Tags		
Reportable	Crash Type DT4000 (STA	ANDARD CRASH)			Amend	led	Secondar Crash
escription =	-						
	NON REPORT	(ABLE/SMOKE II	N DAS	H AREA		Photos By Additional Info	ormation

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	Loc	ation									
	ON STH23 WB					Latitude		Longitude			
	340 FT E					43.532792331		-89.948943163			
		OF COPPER SPRINGS RD IN THE TOWN OF EXCELSIOR					X Coordinate		Y Coord	inate	
		AUK COUNTY	-510K			261718.2	03125		482420	8.5	
			Structure Type								
	Cra	sh Scene									
		Harmful Event				Firet Harm	ful Event L	ocation			
		E/EXPLOSION				ON ROA		ocation			
		ner of Collision				Light Cond					
	NO	COLLISION W/VEHIC	LE IN TRANSPORT			DAYLIGI					
	Road	d Surface Condition(s)				Roadway	Factor(s)				
	DRY	•									
	Envir	ronment Factor(s)									
	NON	NE				NONE					
	Wea	ther Condition(s)									
	CLC	OUDY									
	Anim	al Type				Relation T		=			
	Cros	h Classification - Location					WAY - O	Jurisdiction			
		BLIC PROPERTY	ı					ISDICTION			
	Triba	l Land				Access Co				Special Study	
					NO CONTROL						
	NO	in Interchange Area	Junction Location NON-JUNCTION			ection Type AN INTERSECTION					
	Unit	Summary =									
		Status		Vehicle Ope	erating As C	assification		Unit Type			
	IN T	RANSIT		D CLASS		AUTOMOBILE					
_	Vehic	cle Type			0			Operating A	Operating As Endorsements		
•		SENGER CAR									
	Total	Occs	Train/Bus # Injured	Total # Citat	tions Issued	ashTire Speed Limit 55 bn L FUNCTION		,		Mat Types	
		ance?	Direction Of Travel							96	
	YES		WESTBOUND	Pre	Crash i ire Mark			2			
		Harmful Event: Collision		Special Fun				Emergency Motor Vehicle Use NOT APPLICABLE			
	_	IER NON-COLLISION									
		ic Way D-WAY, NOT DIVIDED	1	Traffic Cont NO CONT				Traffic Control Inoperative/Missing NO			
		ace Type	,	Road Curva				Road Grade			
		CKTOP (BITUMINOL	JS)	STRAIGH		DOWNH					
		k Bus or HazMat	•			I					
	NO										
	1	Vehicle									
		License Plate Number	**			TOMOBILE St WI		Country of Issuance			
					TOMOBIL	VI UNITED STATES Year Model					
5	01				ER	2001 NO DATA FO					
					Body Style Bus Use						
	BLU - BLUE Initial Contact Point NON-COLUSION					NOT A BUS					
_											
		NON-COLLISION Extent Of Damage UNIV									
5	/EHICLE			UNKNOV	VN						

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		Towed Due To Dama	=	Vehicle Removed By CRAIGS TOWING				
	TOWED BUT NOT DUE TO DISABLING DAMAG What Driver Was Doing							
				Vehicle Factors				
		GOING STRAIGH		OTHER				
		Driver Prior Action Ot	ther	OTHER				
		Driver Actions						
	ш	NO CONTRIBUTION	NG ACTION					
_								
	=							
–	VEHICL							
	>							
		Driver Distractions						
		Driver Distractions NOT DISTRACTE	D					
5	01							
		Owner Name		Owner Address				
		DEBRA J WEDEK	(IND	209 HITCHCOCK ST				
		(608) 963-8392		BARABOO, WI 53913 , US				
		Sequence Of E	vents					
		Event						
	01	FIRE/EXPLOSION						
	02	Event						
		Event						
	03	Lvent						
	+	Event						
	04							
_	Ī	Policy Holder						
LIND		Insurance Company		Individual				
-		NATIONWIDE-INS	SURANCE-COMPANY-OF-AMER	I DEBRA WEDEKIND				
		Individual						
	Ī	Driver		Citations Issued	Sex			
		DEBRA J WEDEKIND (608) 963-8392		0	FEMALE			
	M			Date of Birth	Race			
_	Ы				WHITE			
	INDIVIDUA	Address		Driver License Number				
-		209 HITCHCOCK						
	=	BARABOO, WI 53913 , US		STATE: WISCONSIN COUNTRY: UNITED STATES				
			On Duty Crash	Safety Equipment				
		Equipment						
		Seat Position		SHOULDER & LAP BELT				
		1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY						
		Helmet Use		Helmet Compliance				
		Eye Protection		Tint Compliance				
	_		Injury Severity	Airbag				
5	90	Injury	NO APPARENT INJURY	NON DEPLOYED				
		Ejected	1	Ejection Path Trapped/Extricated				
		NOT EJECTED		NOT EJECTED/NOT APPLICABL	NOT TRAPPED			

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		Medical Transport			EMS Agency Identifier		EMS Run #	
		NOT TRANSPORTED						
	Non Motorist Striking Unit # Prior Action				Date of Death		Time of Death	
				ID: 4.0		li e		T /F 0 1 1
				Prior Action		Location		To/From School
		Action	•					
	7							
⊨	INDIVIDUAL							
UNIT	₹							
	S							
		Action Other						
	E	Drug & Alcohol	NO	Use	Suspected Drug Us	6 e		
		Alcohol Test Given			Alcohol Test Type		Alcohol Test Results	
		Drug Test Given			Drug Test Type		Drug Test Results	
		Drug Test Given TEST NOT GIVEN	I					
01	001	Drug Type			•			
	0							
		Individual Condition						
		APPEARED NOR	MAL					