6TL0BSNQ72

18-13369

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash Document # Crash Time 11:52 AM Time Notified 11:52 AM		Agency Crash Number 18-13369		Investigating Officer/Deputy DEPUTY M. BURCH					
7	Crash Date 12/01/2018			Date Ar		Time Arrived 11:52 AM					
3 2	Date Notified 12/01/2018			Total Units 01		Total Injured Total Kille		ed			
ם ס	On Emergency Hi	and Run	Lane Clos	sure	Work Zone	Trailer	or Towed	Reporting Threshold			
12/01/2018 11:52 AM On Emergency Hit and Run Government Property Active S			chool Zone	hool Zone School Bus Related NO			Tags				
,	✓ Reportable	Crash Type DT4000 (STA	ANDARD CRASI	H)		Amend	ed	Secondary Crash			
	Description Diagram	1				1	Reconstructio				
		not too s	cale		us hwy 12		Additional Info				
	I, a sworn law enforceme OPERATOR OF UNIT #1 WAS EA 1 WAS REMOVED BY OWNER W	STBOUND ON U	JS HWY 12 WHEN				THE WEST SID	DE OF US HWY 12. UNIT#			

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Location

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Crash Time 11:52 AM

•	402	USH12 EB FT S SAUK AVE				Latitude 43.4621 1				959351	
	IN T	HE TOWN OF BARAB AUK COUNTY	00			X Coordinate 276000.625			Y Coord 481585		
						Structure NO STR	Type UCTURE				
(Cra	sh Scene									
	First	Harmful Event				First Harm	ful Event Lo	ocation			
	DIT				OF-WAY (T	RAFFICW	AY)				
		ner of Collision	Light Condition								
		COLLISION W/VEHICL	DAYLIGHT Roadway Factor(s)								
	Road Surface Condition(s)						racior(s)				
	SLU	SH									
	Envi	ronment Factor(s)									
	WE	ATHER CONDITIONS				NONE					
	Wea	ther Condition(s)									
		ET/HAIL									
	Anım	Animal Type					Relation To Trafficway TRAFFICWAY - NOT ON ROAD				
	Cras	h Classification - Location				Crash Clas	ssification -	Jurisdiction			
		BLIC PROPERTY						ISDICTION			
	Triba	Tribal Land					Access Control Special Stu NO CONTROL			Special Study	
	With	in Interchange Area	Junction Location		Intersectio						
	NO		NON-JUNCTION		NOT AN	INTERSE	CTION				
	Uni	t Summary 💳									
		Status			_	Classification Unit Type					
		RANSIT		D CLASS				AUTOMOBILE			
01	Vehicle Type					Operating As Endorsements					
•		SSENGER CAR Occs	Total # Citat	otal # Citations Issued Total Traile			 lers				
	10la	Occs	1	lions issued	0		CIS	0	wat Types		
	Insu	urance? Direction Of Travel			Pre CrashTire		Speed Limi		Total Lan	es	
⊥	YES	;	EASTBOUND		Mark		· ·		4	4	
UNIT	Most Harmful Event: Collision With				Special Function NO SPECIAL FUNCTION				Emergency Motor Vehicle Use NOT APPLICABLE		
	Diron				Traffic Control			Traffic Control Inoperative/Missing			
	•				NO CONTROL			NO			
					ad Curvature			Road Grade			
	BLACKTOP (BITUMINOUS) ST				STRAIGHT			LEVEL			
	Truck Bus or HazMat										
	NO										
	'	Vehicle									
		License Plate Number		Plate Type AUT - AUTOMOBIL		LE WI Year		Country of Issuance			
		579UTX						UNITED STATES			
5	2	Vehicle Identification Num JTKKU4B48B101229		Make TOYOTA		7 ear 2011	Model SCION XD				
		Color		Body Style			Bus Use				
		GRN - GREEN		4H - HATCHBACK 4 DOOR			NOT A BUS				
	щ	Initial Contact Point	Vehicle Da	Vehicle Damage							
LNO	CL	12FRONT									
5	/EHICL	Extent Of Damage	12FROM	12FRONT							
	7	MINOR DAMAGE									
	noin N	Notor Vehicle Crash	Т	his report does not	include any	C.IIS data			Crash Date	12/01/2018	

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					Vehicle Removed By					
		NOT TOWED			ERATOR					
		What Driver Was Doing		Vehicle Factors						
		GOING STRAIGHT								
		Driver Prior Action Other			NOT APPLICABLE					
		Driver Actions		<u> </u>						
	ш	SPEED TOO FAS	T/COND							
╘	VEHICL									
LIND	Ĭ									
_	ΛE									
		Driver Distractions	D							
		NOT DISTRACTE	D							
2	01									
	0									
		Owner Name			Owner Address					
		JENNIFER L RULAND			W14450 SCHNELLER RD					
		(608) 335-9372			PRAIRIE DU SAC, WI 53578 , US					
		Sequence Of E	vents							
	01	Event								
	0	DITCH								
	02	Event								
		Event								
	Event									
	04	Event								
느	ı	Policy Holder								
L N		Insurance Company PROGRESSIVE-CASUALTY-INS-CO			ndividual I ENNIFER RULAND					
			ASUALI I-INS-CO		VERNII ER ROLAND					
		Individual Driver		10	Citations Issued	Leav				
		BRIAN HAMRE (608) 335-9372		1		Sex MALE				
	AL				Date of Birth	Race				
_	INDIVIDUA					WHITE				
	⋝	Address			Priver License Number	<u> </u>				
⊃	ቯ	W14450 SCHNELLER RD PRAIRIE DU SAC, WI 53578 , US								
	=			STATE: WISCONSIN COUNTRY: UNITED STATES						
	,	Equipment	On Duty Crash	S	Safety Equipment					
		Seat Position		١	SHOULDER & LAP BELT					
		1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY			Helizat Canaliana					
		Helmet Use			Helmet Compliance					
		Eye Protection		T	Tint Compliance					
		,		'						
_	001	Injury Severity			irbag					
5	0	Injury			NON DEPLOYED					
		Ejected NOT E JECTED			jection Path	Trapped/Extricated				
		NOT EJECTED		ľ	OT EJECTED/NOT APPLICABL	NOT TRAPPED				

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	Medical Transport	ren.		EMS Agend	y Identifier	EMS Run #	EMS Run#	
	Hospital			Date of Death		Time of Death	Time of Death	
	Non Motorist	Striking Unit #	Prior Action		Location		To/From School	
	Action							
INDIVIDUAL								
E	Action Other Prug & Alcohol	Suspected Alco	hol Use	Suspected I	Drug Use			
	Alcohol Test Given TEST NOT GIVEN			Alcohol Tes	t Type	Alcohol Test Results		
	Drug Test Given TEST NOT GIVEN			Drug Test T	ype	Drug Test Results		
001	Drug Type							
		MAL						
1	/iolations							
0.1	UTC Number BB340476	Issue To? 001	Statute Number 343.44(1)(a)	Seq Num 001	Description OPERATING AFTER	SUSPENSION		
	001 INDIVIDUAL	NOT TRANSPORT Hospital Non Motorist Action Action Action Other Drug & Alcohol Alcohol Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Type Individual Condition APPEARED NORI Violations UTC Number	NOT TRANSPORTED Hospital Non Motorist Action Action Action Other Drug & Alcohol Alcohol Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Type Individual Condition APPEARED NORMAL Violations UTC Number Issue To?	NOT TRANSPORTED Hospital Non Motorist Action Action Action Suspected Alcohol Use NO Alcohol Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN Drug Type Individual Condition APPEARED NORMAL Violations UTC Number Issue To? Statute Number	NOT TRANSPORTED Hospital Non Motorist Action Action Action Action Other Suspected Alcohol Use NO	NOT TRANSPORTED Hospital Date of Death	Non Motorist Striking Unit #	