

6TL0BFKD96
18-14416

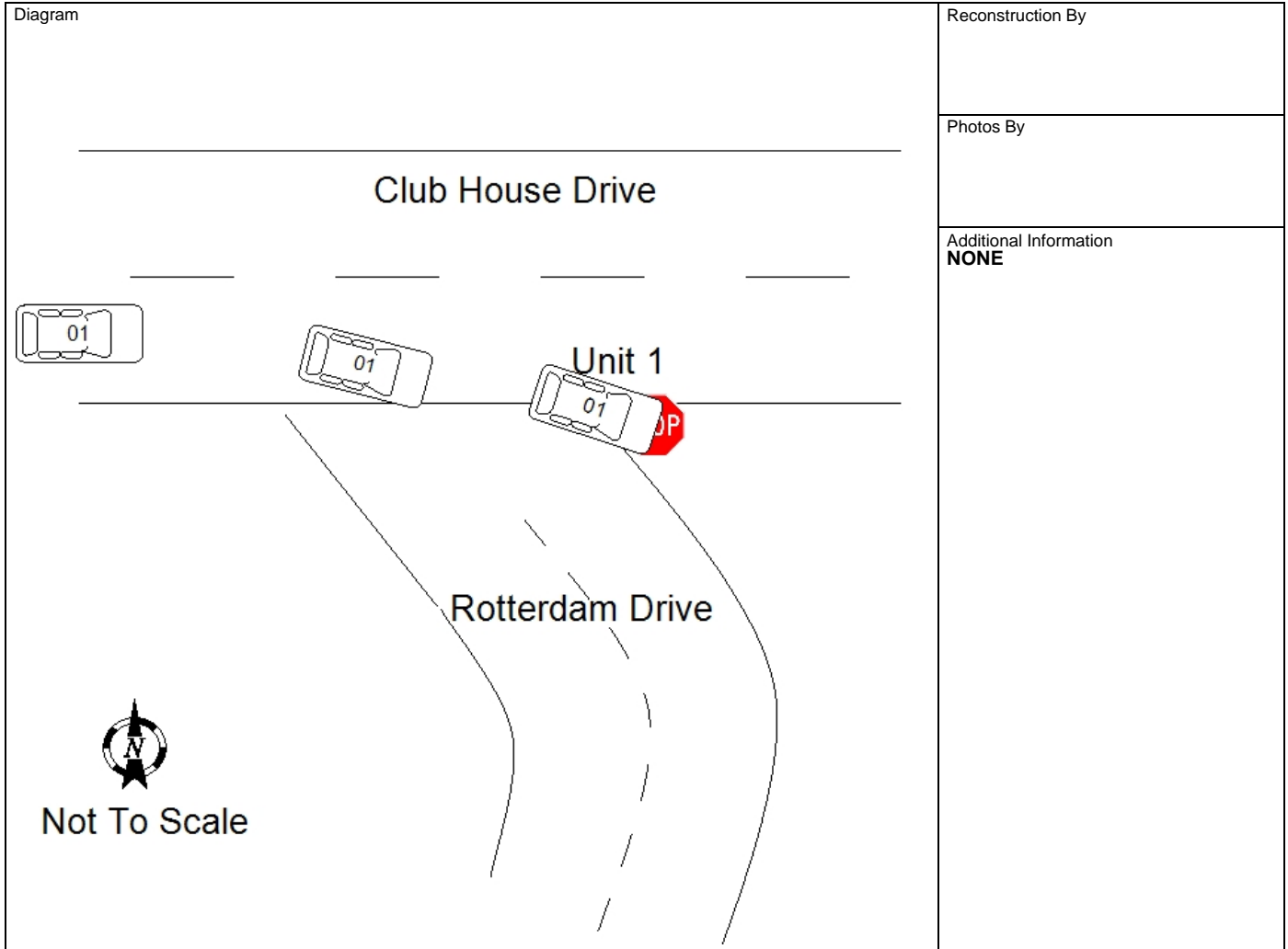
WISCONSIN MOTOR VEHICLE
CRASH REPORT

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 18-14416	Investigating Officer/Deputy DEPUTY H. LARKIN	
Crash Date 12/28/2018		Crash Time 06:50 PM	Date Arrived 12/28/2018	Time Arrived 07:26 PM	
Date Notified 12/28/2018		Time Notified 07:01 PM	Total Units 01	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



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

UNIT 1 WAS TRAVELING EB ON CLUB HOUSE DRIVE. UNIT 1 ATTEMPTED TO TURN RIGHT/SB ONTO ROTTERDAM DRIVE. UNIT 1 SLID DOWN THE ROAD DUE TO THE SNOW AND ICE AND TRAVELED INTO THE SE DITCH AT THE INTERSECTION STRIKING THE STOP SIGN AND COMING TO REST IN THE DITCH.

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Location

ON ROTTERDAM DR 41 FT S OF CLUB HOUSE DR IN THE TOWN OF LA VALLE IN SAUK COUNTY	Latitude 43.607568391	Longitude -90.189983518
	X Coordinate 242559.578125	Y Coordinate 4833233.5
	Structure Type	

Crash Scene

First Harmful Event TRAFFIC SIGN POST	First Harmful Event Location ROADSIDE	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DARK/UNLIT	
Road Surface Condition(s) WET, SNOW, SLUSH, ICE	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) SNOW, SLEET/HAIL, FREEZING RAIN OR FREEZING DRIZZLE		
Animal Type	Relation To Trafficway TRAFFICWAY - NOT 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

UNIT	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR	Operating As Endorsements			
	Total Occs 2	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 35	Total Lanes 2
	Most Harmful Event: Collision With TRAFFIC SIGN POST	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 STRAIGHT		Road Grade DOWNHILL	
	Truck Bus or HazMat NO				

UNIT	VEHICLE	Vehicle			
		License Plate Number 71P189	Plate Type AUT - AUTOMOBILE	St WV	Country of Issuance UNITED STATES
		Vehicle Identification Number JTDZN3EU6C3157377	Make TOYOTA	Year 2012	Model PRIUS
		Color SIL - SILVER (ALUMINUM)	Body Style HB - HATCHBACK		Bus Use NOT A BUS
		Initial Contact Point 12--FRONT	Vehicle Damage 12--FRONT		
		Extent Of Damage MINOR DAMAGE			

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UNIT	VEHICLE	Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR	
		What Driver Was Doing RIGHT TURN	Vehicle Factors	
		Driver Prior Action Other	NOT APPLICABLE	
		Driver Actions SPEED TOO FAST/COND		
01	01	Owner Name GEOFFREY G HILSABECK (805) 617-6068	Owner Address 305 PARK ST MORGANTOWN, WV 26501 , US	
Sequence Of Events				
	01	Event TRAFFIC SIGN POST		
	02	Event DITCH		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company GEICO-CASUALTY-CO	Individual GEOFFREY HILSABECK		
UNIT	INDIVIDUAL	Individual		
		Driver GEOFFREY G HILSABECK (805) 617-6068	Citations Issued 0	Sex MALE
			Date of Birth	Race WHITE
		Address 305 PARK ST MORGANTOWN, WV 26501 , US	Driver License Number STATE: WEST VIRGINIA COUNTRY: UNITED STATES	
01	001	Safety Equipment	On Duty Crash	Safety Equipment
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY	SHOULDER & LAP BELT	
		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 APPLICABLE	Trapped/Extricated NOT TRAPPED	
	Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #	
	Hospital	Date of Death	Time of Death	
	Distracted By	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
	Distracted By Action NOT DISTRACTED			

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UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
		Action Other				To/From School	
01	001	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO		
		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					
		Individual					
		Passenger ESTHER J HILSABECK (805) 617-6068			Citations Issued 0	Sex FEMALE	
		Address 305 PARK ST MORGANTOWN, WV 26501 , US			Date of Birth Race WHITE		
		Driver License Number					
		01	002	Safety Equipment		On Duty Crash	Safety Equipment
Seat Position 6--SECOND SEAT-RIGHT SIDE				CHILD RESTRAINT SYSTEM - FORWARD FACING			
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 APPLICABLE	Trapped/Extricated NOT TRAPPED		
Medical Transport NOT TRANSPORTED				EMS Agency Identifier	EMS Run #		
Hospital				Date of Death	Time of Death		
Distracted By				Distracted By Source			
Distracted By Action							
Non Motorist		Striking Unit #	Location				

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UNIT	Prior Action				
	Action				
	Action Other		To/From School		
	Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use NO		
	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 APPEARED NORMAL				
	01	002			