

6TL09426S6

19-00659

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

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Document Number Override		Primary Crash Document #	Agency Crash Number 19-00659	Investigating Officer/Deputy DEPUTY A. KULAS	
Crash Date 01/15/2019		Crash Time 09:09 PM	Date Arrived 01/15/2019	Time Arrived 09:11 PM	
Date Notified 01/15/2019		Time Notified 09:11 PM	Total Units 01	Total Injured	Total Killed
<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 type="checkbox"/> Reportable	Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

Description

Diagram	Reconstruction By
	Photos By
	Additional Information NONE

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

VEHICLE SLIDE OFF.

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Location

ON STH78 NB 723 FT N OF LONGWOOD DR IN THE TOWN OF PRAIRIE DU SAC IN SAUK COUNTY	Latitude 43.319599522	Longitude -89.733912195
	X Coordinate 278316.6875	Y Coordinate 4799936.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event DITCH	First Harmful Event Location ON ROADWAY	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DARK/UNLIT	
Road Surface Condition(s) ICE	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) RAIN		
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

UNIT 01	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	Total Trailers 0	Total HazMat Types	
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With DITCH		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 LEVEL	
	Truck Bus or HazMat NO					

UNIT 01	Vehicle					
	01	License Plate Number AE8201		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1G1AL58F177332766		Make CHEVROLET	Year 2007	Model COBALT LT
	VEHICLE	Color		Body Style 4D - 4DR		Bus Use NOT A BUS
		Initial Contact Point 12--FRONT		Vehicle Damage		
Extent Of Damage NO DAMAGE		NO DAMAGE				

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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
01	01	Owner Name ROSE MARIE MIDTHUN (608) 370-2047		Owner Address E9066 CASSEL RD SAUK CITY, WI 53583 , US
Sequence Of Events				
	01	Event DITCH		
	02	Event		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company PROGRESSIVE-CASUALTY-INS-CO		Individual ROSE MIDTHUN	
UNIT INDIVIDUAL	Individual			
	Driver ROSE MARIE MIDTHUN (608) 370-2047		Citations Issued	Sex FEMALE
	Address E9066 CASSEL RD SAUK CITY, WI 53583 , US		Date of Birth	Race WHITE
	Driver License Number		STATE: WISCONSIN COUNTRY: UNITED STATES	
UNIT INDIVIDUAL	Safety Equipment		On Duty Crash	
	Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		Safety Equipment SHOULDER & LAP BELT	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	01 001	Injury		Injury Severity NO APPARENT INJURY
		Airbag NON DEPLOYED		
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		
Medical Transport NOT TRANSPORTED		Trapped/Extricated NOT TRAPPED		
Hospital		EMS Agency Identifier	EMS Run #	
		Date of Death	Time of Death	
Distracted By		Distracted By Source		
Distracted By Action NOT DISTRACTED				

WISCONSIN MOTOR VEHICLE CRASH REPORT

UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
01	001	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					
		Individual					
		Passenger SYDNEY TAYLOR SPRECHER (608) 390-4305			Citations Issued		Sex FEMALE
		Address 320 FRANKLIN ST SAUK CITY, WI 53583 , US			Date of Birth Race WHITE		
Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			Safety Equipment				
Safety Equipment		On Duty Crash		SHOULDER & LAP BELT			
Seat Position 3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER		Helmet Compliance					
Helmet Use		Tint Compliance					
Eye Protection		Airbag NON DEPLOYED					
01	002	Injury		Injury Severity NO APPARENT INJURY			
		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			

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT	Individual		
	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	