

6TL08F2KVP
19-00757

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

6TL08F2KVP

Document Number Override		Primary Crash Document #	Agency Crash Number 19-00757	Investigating Officer/Deputy DEPUTY T. SUTHERLAND	
Crash Date 01/18/2019		Crash Time 03:55 PM	Date Arrived 01/18/2019	Time Arrived 04:17 PM	
Date Notified 01/18/2019		Time Notified 03:57 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

<p>Diagram</p> <p>CTH W</p> <p>E9282 CTH W</p> <p>Not To Scale Not To Scale</p>	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.

ON 01-18-19 VEHICLE WAS WESTBOUND ON CTH W TURNING RIGHT INTO A DRIVEWAY AT E9282 CTH W. VEHICLE SLIDE OVER DRIVEWAY INTO A TREE. NO INJURIES REPORTED.

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Location

ON E9282 CTHW WB 0.42 MI E OF CTHPF NB (FIRE E9282) IN THE TOWN OF FREEDOM IN SAUK COUNTY	Latitude 43.444577495	Longitude -89.858771245
	X Coordinate 268667.90625	Y Coordinate 4814156.5
	Structure Type FIRE	

Crash Scene

First Harmful Event TREE	First Harmful Event Location SHOULDER RIGHT	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAYLIGHT	
Road Surface Condition(s) SNOW	Roadway Factor(s) ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)	
Environment Factor(s) WEATHER CONDITIONS		
Weather Condition(s) SNOW		
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 (SPORT) UTILITY VEHICLE	Operating As Endorsements			
	Total Occs 3	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With TREE	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 728WAE	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number JTMDFREY8GJ078796	Make TOYOTA	Year 2016	Model RAV4
		Color GRY - GRAY	Body Style UT - SPORT UTILITY VEHICLE		Bus Use NOT A BUS
		Initial Contact Point 12--FRONT	Vehicle Damage 12--FRONT		
	Extent Of Damage FUNCTIONAL DAMAGE				

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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER	
	What Driver Was Doing RIGHT TURN		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions SPEED TOO FAST/COND			
01	01	Owner Name SANDRA JEAN NEHRING (608) 434-1405		Owner Address S6584 WILSON RD ROCK SPRINGS, WI 53961 , US
Sequence Of Events				
	01	Event TREE		
	02	Event		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company ERIE-INS-CO		Individual SANDRA NEHRING	
UNIT INDIVIDUAL	Individual			
	Driver SANDRA JEAN NEHRING (608) 434-1405		Citations Issued 0	Sex FEMALE
	Address S6584 WILSON RD ROCK SPRINGS, WI 53961 , 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
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED
Medical Transport NOT TRANSPORTED		EMS Agency Identifier		
Hospital		Date of Death	Time of Death	
Distacted By		Distacted By Source		
Distacted By Action NOT DISTRACTED				

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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 GARY H NEHRING (608) 434-1405		Citations Issued 0		Sex MALE		
		Address S6584 WILSON RD ROCK SPRINGS, WI 53961 , US		Date of Birth				
				Race WHITE				
Driver License Number		STATE: WISCONSIN COUNTRY: UNITED STATES						
UNIT	INDIVIDUAL	Safety Equipment		On Duty Crash				
		Seat Position 3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER		Safety Equipment SHOULDER & LAP BELT				
		Helmet Use		Helmet Compliance				
		Eye Protection		Tint Compliance				
		01	002	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		
01	002	Drug & Alcohol			
		Suspected Alcohol Use	Suspected Drug Use		
		NO	NO		
		Alcohol Test Given	Alcohol Test Type	Alcohol Test Results	
		TEST NOT GIVEN			
		Drug Test Given	Drug Test Type	Drug Test Results	
		TEST NOT GIVEN			
		Drug Type			
		Individual Condition			
		APPEARED NORMAL			
UNIT	003	Individual			
		Passenger	Citations Issued	Sex	
		BREA K NEHRING	0	FEMALE	
			Date of Birth	Race	
				WHITE	
		Address	Driver License Number		
		E8187 KLEIN ROAD			
		NORTH FREEDOM, WI 53951 , US			
		Safety Equipment		On Duty Crash	Safety Equipment
		Seat Position	SHOULDER & LAP BELT		
6--SECOND SEAT-RIGHT SIDE					
Helmet Use	Helmet Compliance				
Eye Protection	Tint Compliance				
Injury		Injury Severity	Airbag		
NO APPARENT INJURY	NON DEPLOYED				
Ejected	Ejection Path	Trapped/Extricated			
NOT EJECTED	NOT EJECTED/NOT APPLICABLE	NOT TRAPPED			
Medical Transport	EMS Agency Identifier	EMS Run #			
NOT TRANSPORTED					
Hospital	Date of Death	Time of Death			
Distracted By		Distracted By Source			
Distracted By Action					
	Striking Unit #	Location			
Non Motorist					

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UNIT INDIVIDUAL 01 003	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		