

6TL0B655N8
19-01078

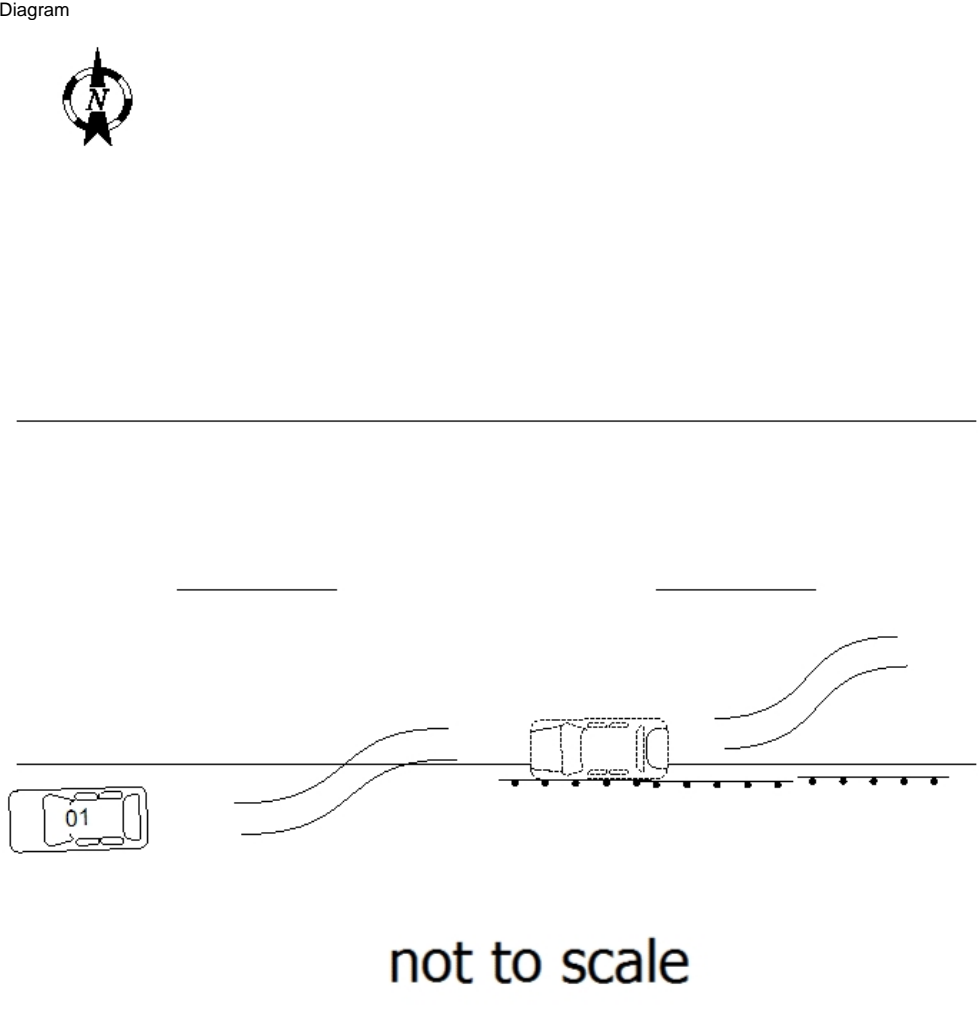
WISCONSIN MOTOR VEHICLE CRASH REPORT

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 19-01078	Investigating Officer/Deputy DEPUTY W. NEUBAUER	
Crash Date 01/26/2019		Crash Time 11:50 PM	Date Arrived 01/27/2019	Time Arrived 12:40 AM	
Date Notified 01/27/2019		Time Notified 12:17 AM	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 checked="" 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

Diagram  <p style="text-align: center;">not to scale</p>	Reconstruction By
	Photos By DEP. W. NEUBAUER 9140
	Additional Information NONE, PHOTOS

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

UNIT 1 WAS TRAVELING W/B ON STH 33 NEAR THE INTERSECTION WITH CTH U. UNIT 1 STATED SHE HIT A PATCH OF ICE AND LOST CONTROL OF HER VEHICLE. UNIT 1 STRUCK THE GUARD RAIL ON THE SOUTH SIDE OF THE ROAD WAY AND CONTINUED ON TO THE SHOULDER OF THE SOUTH SIDE OF THE ROAD, COMING TO REST.

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Location

ON STH33 WB 127 FT N OF CTHU SB IN THE TOWN OF FAIRFIELD IN SAUK COUNTY	Latitude 43.503369771	Longitude -89.633007855
	X Coordinate 287144.0625	Y Coordinate 4820083.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event GUARDRAIL FACE	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) WEATHER CONDITIONS		
Weather Condition(s) CLOUDY		
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 YES	Junction Location INTERSECTION	Intersection Type T-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 WESTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With GUARDRAIL FACE	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 CURVE LEFT		Road Grade LEVEL	
	Truck Bus or HazMat NO				

UNIT	Vehicle				
	01	License Plate Number ABS1153	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1G6DM57N630138671	Make CADILLAC	Year 2003	Model CTS
	VEHICLE	Color BLU - BLUE	Body Style SD - SEDAN		Bus Use NOT A BUS
		Initial Contact Point 11--LEFT FRONT CORNER	Vehicle Damage		
Extent Of Damage DISABLING DAMAGE		10--LEFT SIDE FRONT, 11--LEFT FRONT CORNER, 12--FRONT			

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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By OWNER	
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
01	01	Owner Name STEPHANIE BUSHOR (608) 566-0006		Owner Address 208 W HOWARD ST PORTAGE, WI 53901 , US
Sequence Of Events				
	01	Event GUARDRAIL FACE		
	02	Event		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company PROGRESSIVE-CASUALTY-INS-CO		Individual STEPHANIE BUSHOR	
UNIT INDIVIDUAL	Individual			
	Driver STEPHANIE BUSHOR (608) 566-0006		Citations Issued 0	Sex FEMALE
	Address 208 W HOWARD ST PORTAGE, WI 53901 , US		Date of Birth	Race
	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		
Trapped/Extricated NOT TRAPPED				
Medical Transport NOT TRANSPORTED		EMS Agency Identifier		
Hospital		EMS Run #		
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 CANDACE JOSETTE ROUSE (608) 745-8970			Citations Issued 0	Sex FEMALE	
		Address E11616A GALL RD BARABOO, WI 53913 , US			Date of Birth	Race WHITE	
		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
		01	002	Safety Equipment		On Duty Crash	Safety Equipment SHOULDER & LAP BELT
Seat Position 3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER				Helmet Compliance			
Helmet Use				Tint Compliance			
Eye Protection				Airbag NON DEPLOYED			
Injury				Injury Severity NO APPARENT INJURY	Ejection Path NOT EJECTED/NOT APPLICABLE		
Ejected NOT EJECTED				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 NOT OBSERVED		

Property Owner _____

PROP OWNER 01	Government WISCONSIN DEPT OF TRANSPORTATION (608) 246-3800	Address 2101 WRIGHT ST MADISON, WI 53705 2583, US
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Fixed Objects Struck			
01	Striking Unit 01	Struck Object GUARDRAIL FACE	Structure Number
			Damage Tag Number 337736