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19-01629

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

**Location**

ON LIME RIDGE RD/ CTHK EB 0.45 MI E OF THOMAS RD IN THE TOWN OF IRONTON IN SAUK COUNTY	Latitude <b>43.517382225</b>	Longitude <b>-90.084450434</b>
	X Coordinate <b>250704.828125</b>	Y Coordinate <b>4822894.5</b>
	Structure Type <b>NO STRUCTURE</b>	

**Crash Scene**

First Harmful Event <b>DITCH</b>	First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DARK/UNLIT</b>	
Road Surface Condition(s) <b>SNOW</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>ANIMAL (S) IN ROADWAY</b>		
Weather Condition(s) <b>CLOUDY</b>		
Animal Type <b>DEER</b>	Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>	Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land	Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>

**Unit Summary**

<b>UNIT</b>	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>	
	Vehicle Type <b>PASSENGER CAR</b>	Operating As Endorsements			
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>UNKNOWN</b>	Direction Of Travel <b>EASTBOUND</b>	<input checked="" type="checkbox"/> <b>Pre CrashTire Mark</b>	Speed Limit <b>55</b>	Total Lanes <b>2</b>
	Most Harmful Event: Collision With <b>DITCH</b>	Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>	Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>	Road Curvature <b>CURVE RIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>				

<b>UNIT</b>	<b>VEHICLE</b>	<b>Vehicle</b>			
		License Plate Number <b>275ZHW</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
		Vehicle Identification Number <b>1G4HP54K3Y4247522</b>	Make <b>BUICK</b>	Year <b>2000</b>	Model <b>LESABRE</b>
		Color <b>WHI - WHITE</b>	Body Style <b>SD - SEDAN</b>		Bus Use <b>NOT A BUS</b>
		Initial Contact Point <b>NON-COLLISION</b>	Vehicle Damage		
Extent Of Damage <b>NO DAMAGE</b>	<b>NO DAMAGE</b>				

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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>	
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors	
	Driver Prior Action Other			
	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
01 01	Owner Name <b>GARY A WEBER</b>		Owner Address <b>E4991 CTH K REEDSBURG, WI 53959 , US</b>	
	<b>Sequence Of Events</b>			
01 02 03 04	Event <b>CROSS CENTERLINE</b>			
	Event <b>RUN OFF ROADWAY LEFT</b>			
	Event <b>DITCH</b>			
	Event			
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>GARY A WEBER</b>		Citations Issued <b>0</b>	Sex <b>MALE</b>
	Address <b>E4991 CTH K REEDSBURG, WI 53959 , US</b>		Date of Birth	Race <b>WHITE</b>
			Driver License Number	<b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>
01 001	<b>Safety Equipment</b>		On Duty Crash	
	Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>		Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
	Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run #	
Hospital		Date of Death	Time of Death	
<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>		
Distracted By Action <b>NOT DISTRACTED</b>				
<b>Non Motorist</b>		Striking Unit #	Location	

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<b>UNIT</b>	Prior Action		
	Action		
	Action Other		To/From School
	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>YES</b>	Suspected Drug Use <b>NO</b>
	Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results
	Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results
	Drug Type		
	Individual Condition		
	<b>UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL</b>		
	<b>01</b>	<b>001</b>	