6TL09PBQBH

19-01736

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash Document # Crash Time 05:20 AM Time Notified 05:28 AM t and Run				Investigating Officer/Deputy DEPUTY B. STODDARD Time Arrived 06:04 AM			
6TL09PBQBH	Crash Date 02/12/2019								
	Date Notified 02/12/2019					Total Injured Total Kill		led	
						Trailer or Towed		Reporting Threshold	
	Government Property	Active Sc	hool Zone	NO	Bus Related	Tags			
	Reportable	Crash Type DT4000 (STA	NDARD CRASH	H)			ed	Secondary Crash	
	Description						Reconstruction		
	Non-reportable					-	Photos By Additional Info NONE	irmation	
	✓ I, a sworn law enforceme	nt officer, agre	e that I have no	ot addeo	l any CJIS data in tl	nis report.			
	UNIT 1 WAS EASTBOUND. UNIT 1 REQUIRED A PULL-OUT BY A						1 ENTERED	THE SOUTH DITCH. UNIT	

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l	LOC	ation									
Ī	ON STH33 EB 0.40 MI N					Latitude 43.493080317			Longitude -89.633836081		
		OF MAN MOUND RD N THE TOWN OF GREENFIELD					X Coordinate		Y Coordinate		
							0625		481894		
	IN SAUK COUNTY					Structure Type					
(Cra	sh Scene 📃									
Ī	First Harmful Event						ful Event L	ocation			
	DIT	СН				SHOULD	DER RIGH	Т			
ŀ	Man	ner of Collision				Light Condition					
	NO	COLLISION W/VEHIC	LE IN TRANSPORT			DARK/U	NLIT				
	Road	d Surface Condition(s)				Roadway Factor(s)					
	SNC	DW									
-	Envi	ronment Factor(s)				-					
	WF	ATHER CONDITIONS			ETC)			CONDITION	I (WET, IC	CY, SNOW, SLUSH,	
-											
		ther Condition(s)									
	SNC	NOW									
	Anim	nal Type					o Trafficwa	ау			
_	Crash Classification - Location PUBLIC PROPERTY Tribal Land				TRAFFICWAY - ON ROAI			-			
						Crash Classification - Jurisdiction NO SPECIAL JURISDICTION Access Control					
-										Special Study	
					NO CONTROL					opecial olddy	
		in Interchange Area	Junction Location			ection Type					
	NO NON-JUNCTION					OT AN INTERSECTION					
l	Jni	t Summary 🛛 💻									_
	Unit	Unit Status Vehicle Operating As C									
_				D CLASS	CLASS						
01							Operating As Endorsements				
	(SPORT) UTILITY VEHICLE Total Occs Train/Bus # Recorded			Total # Citations Issue		d Total Trail		ailers Total HazMat Types			
	TULA	OCCS		0		0				Mat Types	
-	Insurance? Direction Of Travel		Direction Of Travel	Pre CrashTi		re Speed Lim		imit Total Lan		es	_
_	UNKNOWN EASTBOUND			Mark		55		2			
	Most Harmful Event: Collision With				Special Function NO SPECIAL FUNCTION			Emergency Motor Vehicle Use			
	DITCH					TION		NOT APPLICABLE			
		Traffic Way			Traffic Control			Traffic Control Inoperative/Missing		tive/Missing	
-		D-WAY, NOT DIVIDED)		NO CONTROL Road Curvature			NO Road Grade	240		
	Surface Type BLACKTOP (BITUMINOUS)										
ŀ		k Bus or HazMat	···,	SOILVE L	CORVELENT						_
	NO										
	,	Vehicle									
	1			Plate Type	Plate Type LTK - LIGHT TRUCK		St				
		License Plate Number					WI	UNITED S	D STATES		
		GY3085					Vaci				
5	1	GY3085 Vehicle Identification Nu		Make			Year 2017				_
5	01	GY3085 Vehicle Identification Nur 3GNCJKSB5HL2454		Make CHEVRC	DLET		Year 2017	TRAX			
5	01	GY3085 Vehicle Identification Nu		Make CHEVRC Body Style	DLET		2017				
D	Щ	GY3085 Vehicle Identification Nur 3GNCJKSB5HL2454		Make CHEVRC Body Style			2017	TRAX Bus Use			_
	Щ	GY3085 Vehicle Identification Nut 3GNCJKSB5HL2454 Color Initial Contact Point 1RIGHT FRONT CC	\$21	Make CHEVRO Body Style UT - SPO			2017	TRAX Bus Use			
UNIT 01		GY3085 Vehicle Identification Nut 3GNCJKSB5HL2454 Color Initial Contact Point	\$21	Make CHEVRO Body Style UT - SPO	DLET DRT UTILIT amage		2017	TRAX Bus Use			

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		Towed Due To Damage		hicle Removed By						
		NOT TOWED		CRAIGS TOWING						
		What Driver Was Doing NEGOTIATING CURVE	Ve	hicle Factors						
		Driver Prior Action Other		NOT APPLICABLE						
		Driver Actions								
	щ	SPEED TOO FAST/COND								
UNIT	<u></u>									
5	VEHICLE									
	>									
		Owner Name		Owner Address						
	_									
9	6			, ,						
	;	Sequence Of Events								
	2	Event DITCH								
	02	Event								
		Event								
	03									
	04	Event								
		Individual	Ottotione locued							
		Individual		Citations Issued 0	Sex					
	AL			Date of Birth	Race					
⊢	DO									
UNIT	Σ	Address		Driver License Number						
-	Address									
		, ,								
	_	On Duty Crash		Safety Equipment						
	Sa	fety Equipment								
		Seat Position								
				Lalmat Compliance						
		Helmet Use		Helmet Compliance						
		Eye Protection		Tint Compliance						
_	Σ	Injury Severity		Airbag						
2	001	Injury								
		Ejected Ejection Path			Trapped/Extricated					
		Medical Transport		EMS Agency Identifier	EMS Run #					
		Hospital		Date of Death	Time of Death					
	Distracted By Source									
	Distracted By Distracted By Action									
		Non Motorist	ocation							
1										

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		Prior Action					
		Action					
	IAI						
UNIT	D						
5	N						
	INDIVIDUAL						
		A. (' O)					
		Action Other					To/From School
		Suspected Alo	cohol Use	Suspected Drug Use			
	L	Drug & Alcohol					
		Alcohol Test Given	Alcohol Test Type	1		Alcohol Test Results	
		Drug Test Given	Drug Test Type		Drug Test Results	3	
	-	Drug Type					
9	001	2.09.790					
		Individual Condition					