

6TLOBMQKVS

19-01822

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Location

ON MIRROR LAKE RD 447 FT N OF SHADY LANE RD IN THE TOWN OF EXCELSIOR IN SAUK COUNTY	Latitude 43.548542188	Longitude -89.837370404
	X Coordinate 270793.65625	Y Coordinate 4825644
	Structure Type	

Crash Scene

First Harmful Event DITCH	First Harmful Event Location ROADSIDE	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DARK/UNLIT	
Road Surface Condition(s) SNOW	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
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 PASSENGER CAR	Operating As Endorsements			
	Total Occs 2	Train/Bus # Recorded	Total # Citations Issued 4	Total Trailers 0	Total HazMat Types 0
	Insurance? UNKNOWN	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 45	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	VEHICLE	Vehicle			
		License Plate Number 104NKL	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1G2ZF55B964208428	Make PONTIAC	Year 2006	Model G6
		Color GRY - GRAY	Body Style 4D - 4DR		Bus Use NOT A BUS
		Initial Contact Point NON-COLLISION	Vehicle Damage		
Extent Of Damage MINOR DAMAGE	3--RIGHT SIDE MIDDLE, 12--FRONT				

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UNIT VEHICLE	Towed Due To Damage TOWED BUT NOT DUE TO DISABLING DAMAG		Vehicle Removed By PLATTS WRECKER	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions SPEED TOO FAST/COND			
01 01	Owner Name EMILY M SMITH (000) 000-0000		Owner Address E8646 CTH P WISCONSIN DELLS, WI 53965 , US	
	Sequence Of Events			
01 02 03 04	Event DITCH			
	Event			
	Event			
	Event			
UNIT INDIVIDUAL	Individual			
	Driver GRANT ALEXANDER KAMIEN (000) 000-0000		Citations Issued 4	Sex MALE
	Address S1903 COUNTY ROAD A # 60 BARABOO, WI 53913 , US		Date of Birth	Race WHITE
			Driver License Number	STATE: WISCONSIN COUNTRY: UNITED STATES
01 001	Safety Equipment		On Duty Crash	
	Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		Safety Equipment RESTRAINT USE UNKNOWN	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	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 NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				
Non Motorist		Striking Unit #	Location	

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT	INDIVIDUAL	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 APPEARED NORMAL		
		Individual		
		Passenger JASMINE-ROSE R DECORAH (000) 000-0000	Citations Issued 0	Sex FEMALE
			Date of Birth	Race INDIAN
		Address 1428 BLUE MOUNDS ST BLACK EARTH, WI 53515 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
		01	002	Safety Equipment
Seat Position 3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER				
Helmet Use	Helmet Compliance			
Eye Protection	Tint Compliance			
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		
01	002	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 APPEARED NORMAL			
	Violations			
	01	UTC Number BB338060	Issue To? 001	Statute Number 343.44(1)(a)
02	UTC Number BB338061	Issue To? 001	Statute Number 346.70(1)	Description FAILURE OF OPERATOR TO NOTIFY POLICE OF ACCIDENT
03	UTC Number BB338062	Issue To? 001	Statute Number 341.04(1)	Description NON-REGISTRATION OF AUTO, ETC
04	UTC Number BB338063	Issue To? 001	Statute Number 346.57(2)	Description FAILURE TO KEEP VEHICLE UNDER CONTROL