6TL0B7D6R1 19-02223

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash Document #					vestigating Officer/Deputy EPUTY A. SUKOWATEY		
_	Crash Date 02/23/2019	Crash Time 12:26 AM		Date Arrived 02/23/2019		Time Arrived 12:50 AM			
OI LUDI DOR	Date Notified 02/23/2019	Time Notified 12:26 AM		Total Units 01		Total Injured Total Kil		lled	
֝֝֝֝֟֝֝֝֝֝֟֝֝֝֩֝֩֝	On Emergency Hit	and Run	Lane Closu	ıre	Work Zone	Trailer	or Towed	Reporting Threshold	
	Government Property	Active Sc	hool Zone	School I	Bus Related	Tags			
	Reportable	Crash Type DT4000 (STA	NDARD CRASH	l)		Amend	ed	Secondary Crash	
	Description					1			
	Diagram						Reconstruction	н Ву	
	SLIDE OFF NO	ON-REPOR	RTABLE						
							Photos By		
							Additional Info	rmation	
	I, a sworn law enforcement								
	UNIT 1 WAS TRAVELING ON MOREPORTED.	on road and l	LOST CONTROL D	OUE TO TI	HE ICE COVERED ROA	ADWAY. UNIT 1 E	NTERED THE	DITCH. NO DAMAGE	

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Crash Date 02/23/2019

Crash Time 12:26 AM

I	Loc	ation									
ſ	ON	MOON RD (1)		Latitude			Longitude				
	0.53 MI W					43.561199448			-89.749217966		
		CTHA EB	X Coordinate		Y Coordinate						
		N THE TOWN OF DELTON					277961.53125		4826810.5		
	IN 5	IN SAUK COUNTY					Туре				
				Olluciale	Турс						
(Cra	sh Scene									
Ī	First	Harmful Event				First Harm	nful Event Lo	ocation			
	DIT	СН				OUTSIDI	E RIGHT-0	OF-WAY (TR	RAFFICW	AY)	
ŀ	Mani	ner of Collision				Light Cond		•			
	NO	COLLISION W/VEHIC	LE IN TRANSPORT			DARK/U					
ŀ		d Surface Condition(s)				Roadway					
		DW, ICE					(-,				
ŀ	Envi	ronment Factor(s)									
	ЮИ	NE									
ŀ	Wea	ther Condition(s)									
	CLC	DUDY									
ŀ	Anim	nal Type					o Trafficway				
ļ	Cros	ch Classification Lacotion					ssification -	OT ON ROA	D		
	Crash Classification - Location PUBLIC PROPERTY Tribal Land							ISDICTION			
						Access Control Special Study NO CONTROL					
ļ	/V/:+r	in Interchange A	lunction Leasting		Intoro'						
	Within Interchange Area Junction Location Intersection NO NON-JUNCTION NOT AN I						ion Type N INTERSECTION				
ì	Init	t Summary =									
ď		Status		Vehicle Ope	erating As C	`lassification	1	Unit Type			
				D CLASS	rating 715 C	AUTOMOBILE					
L	IN TRANSIT D CLASS Vehicle Type			Operating As Endorsements							
- 1	PASSENGER CAR						Operating /	3 Elidoladi	nono		
ŀ		l Occs	Train/Bus # Recorded	Total # Cita	tione lecue	1	Total Trail	ers	Total Haz	Mat Types	
	1	1 0003	Train, Buo // Trocordou	0	110113 133060	4	0		rotarriaz	mac Typoo	
ŀ	Insur	rance?	Direction Of Travel	Pro	CrashTire	Tire Speed Lin		imit Total		es	
	YES	3	EASTBOUND		Mark	•	45		2		
ŀ	Most	t Harmful Event: Collision	With	Special Fun				Emergency Motor Vehicle Use			
	DITCH		NO SPEC	NO SPECIAL FUNCTION				PLICABLE			
		Traffic Way Traffic Con					Traffic Control Inoperative/Missing				
		O-WAY, NOT DIVIDED)	NO CONT	NTROL			NO			
		ace Type		Road Curva				Road Grade			
ļ		ACKTOP (BITUMINOU k Bus or HazMat	JS)	STRAIGH	T	LEVEL					
	NO	DUS UI I IAZIVIAL									ļ
ĺ	'	Vehicle									
		License Plate Number Plate Type					St	Country of Is	suance		
	R7369T			AUT - AUTOMOBILE		LE	WI	UNITED STATES			
		Vehicle Identification Nu	Make	Make		Year	Model				
- 11				PONTIAC	PONTIAC		2007	VIBE			
	01										
	01	Color		Body Style		,		Bus Use	s		
		Color RED - RED		HB - HAT	СНВАСК	(Bus Use NOT A BUS	8		
	Е	Color RED - RED Initial Contact Point			СНВАСК	[8		
	Е	Color RED - RED Initial Contact Point 12FRONT		HB - HAT Vehicle Da	TCHBACK mage	(5		
		Color RED - RED Initial Contact Point		HB - HAT	TCHBACK mage				8		

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		Towed Due To Damage	Vehicle Removed By							
		NOT TOWED	OPERATOR Vehicle Factors							
		What Driver Was Doing								
		GOING STRAIGHT								
		Driver Prior Action Other	NOT APPLICABLE							
		Driver Actions								
	Щ	SPEED TOO FAST/COND								
╘	겅									
LINO	VEHICL									
	%									
		Owner Name	Owner Address S2590 HASTINGS RD REEDSBURG, WI 53959 , US							
5	5	BONNIE KELLY (608) 402-5942								
0	0	(000) 402 0042	KEEDODOKO, WOOOOO , CO							
	;	Sequence Of Events								
	7	Event DITCH								
	02	Event								
		Event								
	03	Evolit								
		Event	nt							
	9									
_		Policy Holder								
		Insurance Company	Individual							
-		WISCONSIN-MUTUAL-INS-CO	BONNIE KELLY							
		ndividual								
	INDIVIDUAL	Driver	Citations Issued	Sex						
		BONNIE KELLY	0	FEMALE						
		(608) 402-5942	Date of Birth	Race						
╘	ਠ			WHITE						
	≥	Address	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES							
_	2	S2590 HASTINGS RD REEDSBURG, WI 53959 , US								
	_	KEEDSBOKG, WI 33333 , 03								
	Sat	On Duty Crash fety Equipment	Safety Equipment							
		Seat Position	SHOULDER & LAP BELT							
		1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY								
		•	Helmet Compliance							
		Helmet Use	Helmet Compliance							
		•	Helmet Compliance Tint Compliance							
		Helmet Use								
7	0	Eye Protection Injury Severity	Tint Compliance Airbag							
01	100	Eye Protection Injury Injury NO APPARENT INJURY	Tint Compliance	Toward (Estricuted						
01	001	Eye Protection Injury Injury Injury Severity NO APPARENT INJURY Ejected Ejection Path	Tint Compliance Airbag NON DEPLOYED	Trapped/Extricated						
10	001	Eye Protection Injury Injury Injury Injury Severity NO APPARENT INJURY Ejected NOT EJECTED NOT EJECTED/NOT AP	Tint Compliance Airbag NON DEPLOYED	NOT TRAPPED						
10	001	Eye Protection Injury Injury NO APPARENT INJURY Ejected NOT EJECTED Medical Transport Eye Protection Injury Severity NO APPARENT INJURY Ejection Path NOT EJECTED/NOT AP	Tint Compliance Airbag NON DEPLOYED							
01	100	Eye Protection Injury Injury Injury Injury Severity NO APPARENT INJURY Ejected NOT EJECTED NOT EJECTED/NOT AP	Tint Compliance Airbag NON DEPLOYED	NOT TRAPPED						
10	001	Eye Protection Injury NO APPARENT INJURY Ejected NOT EJECTED Medical Transport NOT TRANSPORTED	Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier	NOT TRAPPED EMS Run #						
10	001	Eye Protection Injury Injury Injury Injury NO APPARENT INJURY Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital Distracted By Source	Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier Date of Death	NOT TRAPPED EMS Run #						
01	100	Eye Protection Injury Injury Injury Injury NO APPARENT INJURY Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital Distracted By Distracted By NOT APPLICABLE (NOT DISTR	Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier Date of Death	NOT TRAPPED EMS Run #						
01	001	Eye Protection Injury Injury Injury Injury NO APPARENT INJURY Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital Distracted By Source	Tint Compliance Airbag NON DEPLOYED PLICABLE EMS Agency Identifier Date of Death	NOT TRAPPED EMS Run #						

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		Non Motorist	Striking Unit #	Location				
		Prior Action						
LIND	INDIVIDUAL	Action						
		Action Other						To/From School
	1	Drug & Alcohol	Suspected Alcohol UNO	Jse	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		
10	001	Drug Type						
		Individual Condition						
		APPEARED NORM	MAL					