### 6TL0B655NN 19-02460

## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	_		Agency Crash Number 19-02460				Investigating Officer/Deputy DEPUTY W. NEUBAUER					
Z	Crash Date <b>02/28/2019</b>	/28/2019 07:28 PM 02/							Time Arrived 07:28 PM				
0B655NN	Date Notified Time Notified 07:28 PM				Total Units <b>01</b>			, ,		Total Killed 00			
.0B(	On Emergency Hit		and Run Lane Closu		ure	re Work Zone					Reporting Threshold		
eTL	Government Active School			hool Zone	School Bus Related NO			Tag	Tags				
	Reportable		Crash Type DT4000 (STA	NDARD CRASH	(ASH)				Amended Secondary Crash				
	I, a sworn law enfo	rceme	nt officer, agre	e that I have no	JIS data in	this repo	rt.						
ĺ	Location												
f	ON STH136 WB						Latitude			Longitud	de		
	910 FT E						43.482219685 -89.810277371						
	OF HATCHERY RD IN THE TOWN OF BAR	AROO	)			X Coordinate <b>272733.40625</b>			Y Coord				
	IN SAUK COUNTY		•						481820		03.5		
							Structure 7		•				
							NO STR	JCTURE					
(	Crash Scene												
Ī	First Harmful Event						First Harmful Event Location						
	DITCH						ON ROA	DWAY	Y				
	Manner of Collision						Light Condition						
	NO COLLISION W/VEH	IICLE I	N TRANSPOR	Г			DARK/UNLIT						
	Road Surface Condition(s)						Roadway Factor(s)						
	DRY												
	Environment Factor(s)	Environment Factor(s)											
	NONE							NONE					
	Weather Condition(s)						Relation To Trafficway						
	CLEAR												
	Animal Type												
							TRAFFICWAY - ON ROAD						
	Crash Classification - Locat	tion					Crash Classification - Jurisdiction NO SPECIAL JURISDICTION						
	PUBLIC PROPERTY Tribal Land							ISDICTION		To			
	Tribai Land						Access Control NO CONTROL			Special Study			
	Within Interchange Area	Llue	action Location			Intercent							
							ction Type IN INTERSECTION						
ļ								<u> </u>					
	Unit Summary			I Voh	iala Opar	oting As	Classification		Unit Time				
	Unit Status  Vehicle Operating As						Classification Unit Type AUTOMOBILE						
	IN TRANSIT D CLASS  Vehicle Type						Operating As Endorsements						
5	PASSENGER VAN								Operating A	S LIIUUISE	ments		
	Total Occs Train/Bus # Recorded Total # Citations						d Total Trailers Total HazMat Types			Mat Types			
	2				# Citations issued 0					0			
ŀ	Insurance?	Discretion Of Travel				Speed Lir			es				
┍╽	YES		VESTBOUND			Pre Crash i ire Mark		55		2			
LNO	Most Harmful Event: Collision			Spe	cial Func		Emergency Motor Vehicle Use						
<b>-</b>	DITCH				NO SPECIAL FUNCTION				NOT APP				
	Traffic Way Traffic C					ic Control			Traffic Control Inoperative/Missing				
	TWO-WAY, NOT DIVIDED				NO CONTROL				NO				

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Crash Date 02/28/2019

Crash Time 07:28 PM

	Surra			Curvature		Road Grade					
	BLA	ACKTOP (BITUMINOUS)	STRAIGHT			LEVEL					
ĺ	Truc	k Bus or HazMat				•					
	NO										
	,	Vehicle									
		License Plate Number	Plate	Tyne	St	Country of Issuance					
		777UHA		- AUTOMOBILE	WI	UNITED STATES					
		Vehicle Identification Number			Year	Model					
2	5	2C4RC1BG4GR269858		YSLER	2016	TOWN &					
-	J				2010						
		Color	Body	•		Bus Use NOT A BUS					
		GRY - GRAY									
١.	Щ	Initial Contact Point	Vehic	Vehicle Damage							
LIND	$\overline{\circ}$	NON-COLLISION									
5	VEHICL	Extent Of Damage	NO D	AMAGE							
	7	NO DAMAGE									
		Towed Due To Damage	ye Vehicle Removed By								
		NOT TOWED	OPE	RATOR							
İ		What Driver Was Doing	Vehicl	e Factors							
		U TURN									
		Driver Prior Action Other	NOT	APPLICABLE							
		Driver Actions									
	ш	NO CONTRIBUTING ACTION									
╘	占										
L	VEHICLE										
_ ا	Æ										
		Owner Name	О	Owner Address							
		MIRANDA M AMES		7196 SEYMOUR LN							
2	2	(608) 412-3947	P	RAIRIE DU CHIEN, WI 5	S						
		Sequence Of Events									
	,	Event									
	2	DITCH									
		Event									
	02	Evon									
		Event									
	03	Evon									
		Event									
	9	Event									
╘		Policy Holder									
LIND		Insurance Company		vidual							
_		AMERICAN-FAMILY-INS-CO	MII	MIRANDA AMES							
		Individual									
İ		Driver		Citations Issued		Sex					
	_	PATRICIA A AMES	0			FEMALE					
	¥			Date of Birth		Race					
<b> </b>	ᆸ					WHITE					
<b>L</b> NO	NDIVIDUAL	Address	Driver License Number								
>	9	37196 SEYMOUR LN		CTATE, WICCONCIN COUNTRY LIMITED CTATES							
	=	PRAIRIE DU CHIEN, WI 53821 , US	STATE: WISCONSIN COUNTRY: UNITED STATES								
		On Duty Crash	Saf	ety Equipment							
	Sa	fety Equipment									
		Seat Position	SH	OULDER & LAP BELT							
		1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY									
		,									

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		Helmet Use			Helmet Compliance								
		Eye Protection			Tint Compliance								
5	001	Injury Severity Injury NO APPARENT INJURY			Airbag NON DEPLOYED								
					11011 021 20120		Trannod/Extricated						
		Ejected   Ejection Path   NOT EJECTED   NOT EJECTED/NOT APP			Trapped/Extricated  NOT TRAPPED								
		Medical Transport			EMS Agency Identifier		EMS Run #						
		NOT TRANSPORTED											
		Hospital			Date of Death Time of Death								
	,	Distracted By NOT APPLICABLE (NOT DISTRACTED)											
Distracted By Action NOT DISTRACTED													
	,	Non Motorist	Striking Unit	# Location									
		Prior Action		<u> </u>									
		Action											
	AL												
LIND	INDIVIDUAL												
5	IDIV												
	Z												
		Action Other						To/From School					
	L	Drug & Alcohol 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 Typ		Drug Test Type	Drug Test Result								
5	001	Drug Type											
		Individual Condition											
		APPEARED NORMAL											
		Individual											
		Passenger			Citations Issued		Sex						
	Ţ	MIKAYLA A AMES	i		0		FEMALE						
<b>—</b>	INDIVIDUAL	(608) 412-5102			Date of Birth		Race WHITE						
LIND	DIVI	Address 37196 SEYMOUR LN PRAIRIE DU CHIEN, WI 53821, US			Driver License Number								
	Z												
	Saf	ety Equipment	On Duty Cra	sh	Safety Equipment								
		Seat Position  3FRONT SEAT-R	IGHT SIDE	(TRAIN ENGINEER	SHOULDER & LAP BELT								
		Helmet Use			Helmet Compliance								

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		Eye Protection			Tint Compliance							
2	002	Injury Severity			Airbag							
	0	Injury NO APPARENT		NJURY	NON DEPLOYED		Trapped/Extricated					
		Ejected Ejection Path NOT EJECTED NOT EJECTED/NOT AF			ICARI F		NOT TRAPPED					
		Medical Transport			EMS Agency Identifier		EMS Run #					
		NOT TRANSPORTED										
		Hospital			Date of Death		Time of Death					
		Distracted By Source										
		Distracted By Action										
		Non Motorist Strikin	g Unit #	Location								
		Prior Action										
		Action										
	M											
UNIT	ם											
5	INDIVIDUAL											
		A 1' OII						T /5 0 1 1				
		Action Other						To/From School				
		Suspe	ected Alcohol L	Jse	Suspected Drug Use							
	L	Drug & Alcohol NO			NO							
		Alcohol Test Given	Alcohol Test Type				Alcohol Test Results					
		TEST NOT GIVEN										
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results		5					
01	002	Drug Type										
		Individual Condition										
		APPEARED NORMAL										