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19-04384

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 99:99 Time Notified 03:33 AM		Agency Crash Number 19-04384		0 0	Investigating Officer/Deputy DEPUTY A. MEEKER Time Arrived 03:51 AM		
р С	Crash Date 04/17/2019				Date Arrived 04/17/2019 Total Units 01				
61L09B/DB	Date Notified 04/17/2019						Total InjuredTotal Killed0000		
-091	On Emergency	t and Run		Ire Work Zone			or Towed	Reporting Threshold	
	Government Property	Active School Zone		School NO	School Bus Related NO		Tags		
	✓ Reportable	Crash Type DT4000 (STA	NDARD CRASH	ł)			led	Secondary Crash	
	Description						Reconstruction		
	I, a sworn law enforcement officer, agree that I have not a				Drawing not to		Photos By Additional Info NONE	rmation	
	UNIT 1 WAS TRAVELING SOUTH RAIL FACE CAUSING DAMAGE. SCENE. PLEASE SEE CASE # 19	BOUND ON STA	ATE HIGHWAY 13 AS MOVED A SHO	6, CROSS ORT WAY	SED THE CENTER LINE	FOR AN UNKN			

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Location					
ON RIVER ST/ STH136 EB 0.26 MI N	Latitude 43.485029542	Longitude -89.917708791			
OF OAK ST IN THE VILLAGE OF ROCK SPRINGS IN SAUK COUNTY	X Coordinate 264055.96875	Y Coordinate 4818815			
	Structure Type				
Crash Scene					
First Harmful Event	First Harmful Event Locatio	First Harmful Event Location			
GUARDRAIL FACE	ON ROADWAY	ON ROADWAY			
Manner of Collision	Light Condition	Light Condition			
NO COLLISION W/VEHICLE IN TRANSPORT	DARK/UNLIT	DARK/UNLIT			
Road Surface Condition(s)	Roadway Factor(s)	Roadway Factor(s)			
DRY					
Environment Factor(s)		-			
NONE	NONE	NONE			
Weather Condition(s)					
CLEAR					

CLEAR				
Animal Type		Relation To Trafficway TRAFFICWAY - ON ROAD		
Crash Classification - Locat PUBLIC PROPERTY	ion	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION		
Tribal Land		Access Control Special Study NO CONTROL		
Within Interchange Area	Junction Location NON-JUNCTION	n Type INTERSECTION		

	Uni	t Summary						
	Unit Status			Vehicle Operating As Classification	n	Unit Type		
	IN TRANSIT			D CLASS		AUTOMOBILE		
-	Vehi	cle Type				Operating As Endorsements		
2	PASSENGER CAR							
	Total Occs Train/Bus # Recorded		Total # Citations Issued Total Traile		rs Total HazMat Types			
	01		04 0			0		
	Insurance? Direction		Direction Of Travel	Pre CrashTire	Speed Limit		Total Lanes	
⊢	UN	KNOWN	EASTBOUND	Mark	35		2	
UNIT	Mos	t Harmful Event: Collision W	ith	Special Function		Emergency Motor Vehicle Use		
	GUARDRAIL FACE			NO SPECIAL FUNCTION		NOT APPLICABLE		
	Traffic Way			Traffic Control		Traffic Control Inoperative/Missing		
	TWO-WAY, NOT DIVIDED			NO CONTROL		NO		
	Surface Type			Road Curvature		Road Grade		
	BLACKTOP (BITUMINOUS)			CURVE LEFT		LEVEL		
	Truc	k Bus or HazMat				•		
	NO							
		Vehicle						
	License Plate Number 912AWE			Plate Type	St	Country of Issuance		
				AUT - AUTOMOBILE	WI	UNITED S	TATES	
-	Vehicle Identification Number 1G2NE52E2XC580992		Make	Year	Model			
2			PONTIAC	1999	9 GRAND AM S			
	Color BLK - BLACK			Body Style		Bus Use		
UNIT				4D - 4DR		NOT A BUS		
	Initial Contact Point 12FRONT		Vehicle Damage 1RIGHT FRONT CORNER, 10LEFT SIDE FRONT, 12FRONT					
								Image: Disabling DAMAGE

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		Towed Due To Damage	Ve	hicle Removed By			
			STEVES AUTO SERVICE				
		What Driver Was Doing		Vehicle Factors			
		UNKNOWN	N				
		Driver Prior Action Other		OT APPLICABLE			
		Driver Actions					
	ш	UNKNOWN					
E	СГ						
UNIT	VEHICLE						
	<pre></pre>						
		Owner Name LOIS A GRACE		Owner Address 406 N GROVE ST # A			
6	01	(608) 495-3800		REEDSBURG, WI 53959, US			
	•						
		Sequence Of Events					
		Event					
	01	CROSS CENTERLINE					
	02	Event GUARDRAIL FACE					
	03	Event					
	4	Event					
	04						
	I	Individual					
	1	Driver		Citations Issued	Sex		
	١L	MIRANDA ANN PEDROZA (608) 415-2522		04	FEMALE		
_	INDIVIDUAL	(000) 410 2022		Date of Birth	Race WHITE		
UNIT	NI	Address		Driver License Number			
	D	406 N GROVE ST # A					
	=	REEDSBURG, WI 53959 , US		STATE: WISCONSIN COUNTRY: UNITED STATES			
	Saf	On Duty Crash fety Equipment		Safety Equipment			
		Seat Position		RESTRAINT USE UNKNOWN			
		1FRONT SEAT-LEFT SIDE (DRIVER	R/MOTORCY				
		Helmet Use		Helmet Compliance			
		Eye Protection		Tint Compliance			
-	5	Injury Severity		Airbag			
01	001	Injury NO APPARENT IN		NON DEPLOYED			
			Ejection Path		Trapped/Extricated		
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #		
	Hospital			Date of Death	Time of Death		
		Distracted By Source					
		Distracted By Action					
		UNKNOWN					
		Striking Unit #	Location				

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		Prior Action								
		Action								
	JAL									
UNIT	INDIVIDUAL									
5	NDIV									
	-									
		Action Other							To/From School	
			Suspected Alco	ohol Us	se	Suspected Drug Use				
	L	Drug & Alcoh						1		
		Alcohol Test Giver	IVEN		Alcohol Test Type			Alcohol Test Results	hol Test Results	
		Drug Test Given TEST NOT GIV			Drug Test Type	Drug Test Results				
6	001	Drug Type								
		Individual Condition								
		NOT OBSERVE								
		NOT OBSERVE								
	1	Violations				1				
	01	UTC Number Issue To? Statute Number 343.44(1)(b)				Description OPERATING WHILE	REVOKED (FO	RFEITURE 2ND)		
	02	UTC Number AE142046	Issue To? 001		ute Number 6 2(1)	Description OPERATE MOTOR	/EHICLE W/O IM	SURANCE		
	03	UTC Number AE142047	Issue To? 001		ute Number . 05(1)	Description OPERATING LEFT OF CENTER LINE				
	04	UTC Number AE142048	Issue To? 001		ute Number . 70(1)	Description FAILURE OF OCCU	PANT TO NOTIF	Y POLICE OF ACCI	DENT	
	Pro	perty Owne	r 🚽							
PROP OWNER 01	wis	iovernment VISCONSIN DEPT OF TRANSPORTATION 608) 246-3800				Address 2101 WRIGHT ST MADISON, WI 53705 2583, US				
	Fixe	d Objects St	ruck							
	01	Striking Unit 01	Struck Object GUARDRAIL FA	ACE				Structure Number	Damage Tag Number 337812	