

6TLOBFKDBF  
19-05692

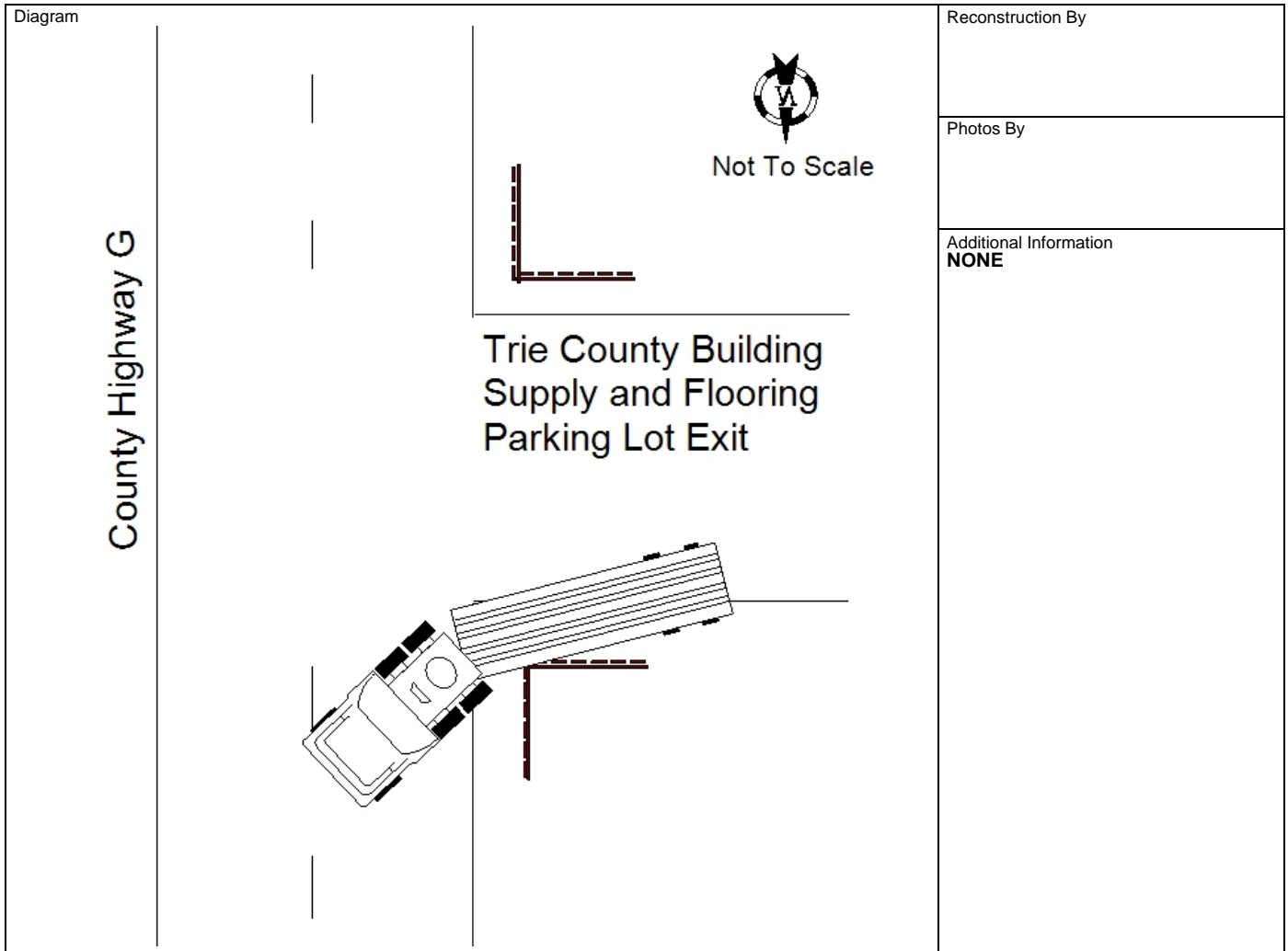
WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

6TLOBFKDBF

Document Number Override		Primary Crash Document #	Agency Crash Number <b>19-05692</b>	Investigating Officer/Deputy <b>DEPUTY H. LARKIN</b>	
Crash Date <b>05/17/2019</b>		Crash Time <b>11:50 AM</b>	Date Arrived <b>05/17/2019</b>	Time Arrived <b>12:49 PM</b>	
Date Notified <b>05/17/2019</b>		Time Notified <b>11:56 AM</b>	Total Units <b>01</b>	Total Injured <b>00</b>	Total Killed <b>00</b>
<input type="checkbox"/> On Emergency	<input checked="" type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone	<input checked="" type="checkbox"/> Trailer or Towed	<input type="checkbox"/> Reporting Threshold
<input type="checkbox"/> Government Property	<input type="checkbox"/> Active School Zone	School Bus Related <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type <b>PRIVATE PROPERTY/PARKING LOT</b>		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description



I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

UNIT 1 WAS EXITING A PRIVATE PARKING LOT. UNIT 1 TURNED LEFT ON CTH G AND BEGAN TRAVELING NB ON CTH G. UNIT 1 STRUCK THE FENCE AT THE EXIT OF THE LOT WHILE EXITING. UNIT 1 DID NOT STOP AND TRAVELED NORTH ON CTH G AND THEN EAST ON USH 14.

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Location

ON S12523 CTHG NB 218 FT S OF USH14 EB (HOUSE/BUILDING S12523)  IN THE TOWN OF SPRING GREEN IN SAUK COUNTY	Latitude <b>43.18911622</b>	Longitude <b>-90.074029731</b>
	X Coordinate <b>250202.96875</b>	Y Coordinate <b>4786404.5</b>
	Structure Type <b>HOUSE/BUILDING</b>	

Crash Scene

First Harmful Event <b>OTHER FIXED OBJECT</b>	First Harmful Event Location <b>IN PARKING LANE OR ZONE</b>	
Manner of Collision <b>NO COLLISION W/VEHICLE IN TRANSPORT</b>	Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>DRY</b>	Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>		
Weather Condition(s) <b>CLOUDY</b>		
Animal Type	Relation To Trafficway <b>NON TRAFFICWAY - PARKING LOT</b>	
Crash Classification - Location <b>PRIVATE PROPERTY</b>	Crash Classification - Jurisdiction <b>PRIVATE PROPERTY</b>	
Tribal Land	Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>

Unit Summary

UNIT	Unit Status <b>HIT AND RUN</b>	Vehicle Operating As Classification <b>A CLASS</b>		Unit Type <b>TRUCK</b>	
	Vehicle Type <b>STRAIGHT TRUCK (INSERT TRUCK)</b>	Operating As Endorsements			
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>
	Insurance? <b>UNKNOWN</b>	Direction Of Travel <b>NORTHBOUND</b>	<input type="checkbox"/> <b>Pre Crash Tire Mark</b>	Speed Limit <b>N/A</b>	Total Lanes
	Most Harmful Event: Collision With <b>OTHER FIXED OBJECT</b>	Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>PARKING LOT OR PRIVATE PROPERTY</b>	Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>	Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>TRUCK OR TRUCK COMBINATION &gt; 10,000LBS GVWR/GCWR</b>				

UNIT	VEHICLE	<b>Vehicle</b>			
		License Plate Number	Plate Type	St	Country of Issuance
		Vehicle Identification Number	Make	Year	Model
		Color	Body Style		Bus Use <b>NOT A BUS</b>
		Initial Contact Point	Vehicle Damage		
		Extent Of Damage <b>VEHICLE NOT AT SCENE</b>	<b>VEHICLE NOT AT SCENE</b>		

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UNIT VEHICLE	Towed Due To Damage <b>NOT TOWED</b>		Vehicle Removed By <b>OPERATOR</b>		
	What Driver Was Doing <b>LEFT TURN</b>		Vehicle Factors		
	Driver Prior Action Other		<b>UNKNOWN</b>		
	Driver Actions <b>IMPROPER TURN, OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER</b>				
01 01	Owner Name		Owner Address , ,		
	<b>Sequence Of Events</b>				
01 01 02 03 04	Event <b>OTHER FIXED OBJECT</b>				
	Event				
	Event				
	Event				
UNIT INDIVIDUAL	Driver		Citations Issued <b>0</b>	Sex	
			Date of Birth	Race	
	Address , ,		Driver License Number		
	<b>Individual</b>				
01 001	<b>Safety Equipment</b>		On Duty Crash		
			Safety Equipment		
	Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>		<b>RESTRAINT USE UNKNOWN</b>		
	Helmet Use		Helmet Compliance		
	Eye Protection		Tint Compliance		
	<b>Injury</b>		Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NOT APPLICABLE</b>	
	Ejected <b>NOT APPLICABLE</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT APPLICABLE</b>	
Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier		EMS Run #	
Hospital		Date of Death		Time of Death	
<b>Distracted By</b>		Distracted By Source			
Distracted By Action					
<b>Non Motorist</b>		Striking Unit #		Location	

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UNIT	INDIVIDUAL	Prior Action					
		Action					
		Action Other			To/From School		
		<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use	Suspected Drug Use		
		Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type		Alcohol Test Results	
		Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type		Drug Test Results	
		Drug Type					
		Individual Condition <b>NOT OBSERVED</b>					
		<b>Carrier</b>					
		UNIT	01	01	<input type="checkbox"/> Use Vehicle Owner Same as Carrier		Source
Name					Address		
UNIT	TRUCK	BUS	GVWR		Vehicle Configuration	Cargo Body Type	
			US DOT #		Carrier Type	Permitted Load	
			<input type="checkbox"/> OS/OW Load	WI Permit Number	<input type="checkbox"/> Permitted Vehicle On Permitted Route	<input type="checkbox"/> Escort Vehicle Required By Permit	<input type="checkbox"/> Escort Vehicle Present
			Measured Height		Measured Length	Measured Width	Measured Weight
			<b>Property Owner</b>				
PROP OWNER	01	Organization/Company <b>TRI COUNTY BUILDING SUPPLY AND FLOORING (608) 588-2538</b>			Address <b>S12523 CTH G SPRING GREEN, WI 53588 , US</b>		
		<b>Fixed Objects Struck</b>					
01	Striking Unit <b>01</b>		Struck Object <b>FENCE</b>		Structure Number	Damage Tag Number <b>000000</b>	