WISCONSIN MOTOR VEHICLE CRASH REPORT

	Document Number Override	Primary Crash Document #				"	Investigating Officer/Deputy DEPUTY L. GJORGJIEV			
كر T	Crash Date 05/16/2019	Crash Time 11:52 PM				Time Arrived				
ם צ	Date Notified 05/16/2019	Time Notified 11:52 PM		Total U	Total Units		Total Injured Total Kill		ed	
OILU9/RB3		t and Run	∠ Lane Clos	I	Work Zone	Trailer			Reporting Threshold	
ا و	Government Property		hool Zone	School NO	Bus Related	Tags			1	
	✓ Reportable	Crash Type DT4000 (STA	NDARD CRASH	l)		Amend	ded		Secondary Crash	
	Description									
	Diagram						Phot	onstruction tos By DRGJIEV		
	not to scale	CTHT					Addi	itional Infor	rmation	
	unit 1	The second secon			eshoot rd	unit 1	PHU	OTOS		
	I, a sworn law enforcement						OT DI		H T LINIT 1 FAU ED TO	
	STOP AT THE STOP SIGN AND (CAME TO REST IN BETWEEN THE TAKEN TO THE HOSPITAL BY E	CONTINUED DRI	VING UNTILL IT EI	NTERED	THE DITCH ON THE S	SIDE OF CTH T. U	NIT 1	STRUCK	MULTIPLE TREES AND	

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0	ON 32 F OF T IN TI IN S. First I	RAP SHOOT RD HE TOWN OF FAIRFII AUK COUNTY Sh Scene Harmful Event					SHOULD	ate 0375 Type UCTURE Iful Event Lo DER RIGH dition		Longitud -89.718 Y Coord 482033	8804081 linate
_	DRY Envir	onment Factor(s) E her Condition(s)				Roadway Factor(s) NONE					
	Animal Type Crash Classification - Location PUBLIC PROPERTY Tribal Land						Relation To Trafficway TRAFFICWAY - ON ROAD Crash Classification - Jurisdiction NO SPECIAL JURISDICTION Access Control NO CONTROL Special Study			Special Study	
-	Within Interchange Area NO INTERSECTION Closure Type LANE CLOSURE Date Initial Lane/Rd Closed 05/17/2019 Date All Lanes Open 05/17/2019 Junction Location INTERSECTION Time Initial Lane/Rd Closed 12:00 AM Time All Lanes Open 05/17/2019 01:41 AM				Reasons for Closu			RSECTION Sure CEMENT, FIRE/EMS			
	Unit Summary Unit Status IN TRANSIT Vehicle Type (SPORT) UTILITY VEHICLE				LASS		lassification		Unit Type AUTOMOBILE Operating As Endorsements		
	2 Insura UNK	INKNOWN EASTBOUND lost Harmful Event: Collision With		5 Spec	Total # Citations Issued 5 Pre CrashTire Mark Special Function NO SPECIAL FUNC		Speed Lim 35		0		es icle Use
-	Traffic Way TWO-WAY, NOT DIVIDED Surface Type BLACKTOP (BITUMINOUS) Truck Bus or HazMat NO			Traff STC Road	Traffic Control STOP SIGN Road Curvature STRAIGHT		NO Road		NO	Road Grade	
5	_	Vehicle License Plate Number AAT1995 Vehicle Identification Nur 1FMZU73KX5UB844		AU Mal		ITOMOBIL	.E	St WI Year 2005	Country of Iss UNITED ST Model EXPLORER	ATES	

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			Body Style	Bus Use					
			UT - SPORT UTILITY VEHICLE	NOT A BUS					
_	LE		Vehicle Damage						
E N	∃C		1RIGHT FRONT CORNER, 2RIGHT SIDE FRONT, 9LEFT SIDE MIDDLE, 10 LEFT SIDE FRONT, 11LEFT FRONT CORNER, 12FRONT, UNDERCARRIAGE Vehicle Removed By						
>	VEHICL	DISABLING DAMAGE							
		TOWED DUE TO DISABLING DAMAGE	CRAIGS TOWING						
		Ŭ .	Vehicle Factors						
		GOING STRAIGHT	NOT APPLICABLE						
		Driver Prior Action Other							
		Driver Actions							
	щ	DISREGARDED STOP SIGN							
L N	VEHICL								
5	Ē								
	>								
		Owner Name	Owner Address						
_	1	ASHLEY JENESS FLOWERS	620 WALNUT ST						
2	01	(608) 477-7326	BARABOO, WI 53913 , US						
		On manage of Francis							
		Sequence Of Events Event							
	01	DITCH							
	02	Event TREE							
	03	Event							
	04	Event							
	ļ	. P. S. I I							
		Individual Driver	Citations Issued	Sex					
		ASHLEY JENESS FLOWERS	5	FEMALE					
	JAI	(608) 477-7326	Date of Birth	Race					
⊨ ا	INDIVIDUAL			WHITE					
E I	DIV	Address 620 WALNUT ST	Driver License Number						
	Ξ	BARABOO, WI 53913 , US	STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sat	On Duty Crash fety Equipment	Safety Equipment						
	Ou.	Seat Position	NOT APPLICABLE						
		1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY	NOT ATTEIOABLE						
		Helmet Use	Helmet Compliance						
		Eye Protection	Tint Compliance						
5	001	Injury Severity Injury SUSPECTED SERIOUS INJUR	Airbag						
	Ō	J J GOO! EGIED GENIOOG INGON	NON DEPLOYED	Tropped/Extrinated					
		Ejected Ejection Path NOT EJECTED NOT EJECTED/NOT APP	LICABLE	Trapped/Extricated NOT TRAPPED					
		Medical Transport	EMS Agency Identifier	EMS Run #					
		EMS GROUND	6000368						
		Hospital	Date of Death	Time of Death					
		ST CLARE HOSP							

WISCONSIN MOTOR VEHICLE CRASH REPORT

		_										
		Distracted By	Distracted By Source UNKNOWN									
		Distracted By Action UNKNOWN										
		Non Motorist	Striking Unit #	Location								
		Prior Action										
		Action										
	Ļ											
⊨	INDIVIDUAL											
E NO	M											
	N N											
		Action Other						To/From School				
			Suspected Alcohol Us	Se.	Suspected Drug Use							
	L	Orug & Alcohol	YES		NO							
				Alcohol Test Type BLOOD			Alcohol Test Results PENDING					
		Drug Test Given		Drug Test Type		Drug Test Results						
		TEST NOT GIVEN										
5	001	Drug Type										
		Individual Condition										
		UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL										
	i	ndividual										
		Passenger TONY ALLEN ADM	KINS		Citations Issued 0		Sex MALE					
	JAL	(608) 477-8523					Race					
L N O		Address			Driver License Number							
5	INDIVIDUA	Address 419 N MAPLE ST										
	=	NORTH FREEDOM, WI 53951 , US			STATE: WISCONSIN COUNTRY: UNITED STATES							
	ا		On Duty Crash		Safety Equipment							
	Sai	fety Equipment Seat Position			NOT APPLICABLE							
		3FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER			NOT AFFLICABLE							
		Helmet Use			Helmet Compliance							
		Eye Protection			Tint Compliance							
7	005	Injury Severity SUSPECTED SERIOUS INJUR			Airbag NON DEPLOYED							
		Ejected Ejection Path			Trapped/Extricate							
		NOT EJECTED NOT EJECTED/NOT APPL Medical Transport			LICABLE NOT TRAP							
		EMS GROUND			6000368							
		Hospital ST CLARE HOSP			Date of Death Time of Death							
		Distracted By	Distracted By Source		•		•					

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

Crash Date 05/16/2019

Crash Time 11:52 PM

		Distracted By Action								
	,	Non Motorist	Striking Unit #		Location					
		Prior Action								
		Action								
_	UAL									
LNO	NDIVIDUAL									
	IND									
		Action Other							To/From School	
	L	Orug & Alcohol	NO Suspected Alco	ohol U	se	Suspected Drug Use NO				
					Alcohol Test Type	ļ.		Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Results			
_	2	Drug Type								
0	002									
		Individual Condition								
		APPEARED NORM	MAL							
	į	Violations								
	01	UTC Number Al387885	Issue To? 001		ute Number . 63(2)(a)1	Description CAUSE INJURY/OPE	ERATE WHILE U	NDER INFLUENCE 1	ST	
	02	UTC Number BB957201	Issue To? 001	Stat 347	ute Number .48(2m)(b)	Description VEHICLE OPERATO	R FAIL/WEAR S	EAT BELT		
	03	UTC Number BB957202	Issue To? 001	Stat 346	ute Number . 46(1)	Description FAIL/STOP AT STOR	SIGN			
	04	UTC Number BB957203	Issue To? 001		ute Number . 935(2)	Description POSSESS OPEN INT	TOXICANTS IN I	IV-DRIVER		
	02	UTC Number BB957204	Issue To? 001	Stat 344	ute Number . 62(2)	Description OPERATE MOTOR \	/EHICLE W/O PI	ROOF OF INSURANC	E	