WISCONSIN MOTOR VEHICLE CRASH REPORT

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

											(608) 356-4895		
	Document Number Override	Primary Crash	Document #	Agency 19-079	/ Crash Nu 957	mber	Investigating DEPUTY 0						
ב	Crash Date 07/01/2019	Crash Time 02:45 PM		Date Ai			Time Arrived	t					
	Date Notified	Time Notified		Total U			Total Injured	1	Total Kille	rd			
-	07/01/2019	02:57 PM			01				00				
)	On Emergency Hi	t and Run	Lane Clos			k Zone	Trailer	or T	Towed		Reporting Threshold		
0150311116	Government Property	Active So	chool Zone	School NO	Bus Relate	ed	Tags						
	✓ Reportable	Crash Type DT4000 (STA	ANDARD CRASH	H)			Amend	ded			Secondary Crash		
١	Description							_					
	field drive way I, a sworn law enforceme UNIT 1 WAS TRAVELING EASTE PROCEEDED TO THE NORTH D	OUND ON USH1	ee that I have no	ED LEFT	d any CJ	ER AND ENT	ERED INTO THE	Add NO		rmation	NIT 1		
	Location												
İ	ON USH14 EB 0.34 MI E					Latitude 43.190960			Longitu	ide 6196446	<u> </u>		
	OF PORTER RD IN THE TOWN OF SPRING G	DEEN				X Coordinate			Y Coor		•		
	IN SAUK COUNTY	INEEN				242720.73			47868	89			
						Structure Ty	/pe						

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Crash Scene

	First	Harmful Event	First Harmful Event Location								
	DIT	тсн					ROADSIDE				
	Manı	anner of Collision					Light Condition				
	NO	IO COLLISION W/VEHICLE IN TRANSPORT				DAYLIGHT					
	Road	Road Surface Condition(s)					Roadway Factor(s)				
	DRY	DRY									
	Envi	Environment Factor(s)									
	МОИ	NE .				NONE					
	Wea	ther Condition(s)									
	CLC	OUDY				Relation To Trafficway					
	Anim	al Type									
		,,			TRAFFICWAY - ON ROAD						
		h Classification - Location				Crash Classification - Jurisdiction					
		SLIC PROPERTY				RISDICTION		Ta			
	Iriba	Il Land				Access Co		Special Study			
	With	n Interchange Area	Junction Location	Intersection		IKOL					
	NO	=	NON-JUNCTION			INTERSE					
	Uni	Summary			I						
		Status		Vehicle Ope	erating As C	assification		Unit Type			
	IN TRANSIT			D CLASS	D CLASS			AUTOMOBILE			
01		cle Type				Operating As Endorsements					
0		SENGER CAR	1.7								
	Tota 1	Occs	Train/Bus # Recorded	Total # Citat	Total # Citations Issued Total			ailers	l otal Haz	:Mat Types	
	Insurance? Direction Of Travel						Chandlim		Total Lan	es	
T	YES EASTBOUND				Pre CrashTire Mark		55		2		
UNIT	Most Harmful Event: Collision With				Special Function NO SPECIAL FUNCTION			Emergency Motor Vehic			
١		TOR VEH IN TRANSPO			TION		NOT APPLICABLE				
		ic Way	Traffic Cont			Traffic Control Inoperative/Missing NO Road Grade					
		D-WAY, NOT DIVIDED ace Type	NO CONT Road Curva								
		CKTOP (BITUMINOUS		STRAIGHT			LEVEL				
	Truc	k Bus or HazMat		I							
	NO										
	1	Vehicle									
		License Plate Number		Plate Type	Plate Type AUT - AUTOMOBIL		St	Country of Is			
		ABW6332 Vehicle Identification Numl		Make		WI Year	Model	IAIES			
5	6	1FAHP35N38W256250	FORD			2008	FOCUS SE/S				
		Color	Body Style	Body Style				Bus Use			
		GRN - GREEN		4D - 4DR			NOT A BUS				
_	쁘	Initial Contact Point 12FRONT	Vehicle Da	Vehicle Damage							
UNIT	$\stackrel{\circ}{=}$	Extent Of Damage	6REAR	6REAR, 12FRONT, UNDERCARRIAGE							
–	12FRONT Extent Of Damage DISABLING DAMAGE			1 1127111,	TELLIS, IZ TRONT, ONDERORIMINOE						
		Towed Due To Damage		Vehicle Removed By							
		TOWED DUE TO DISA	S AUTO E	BODY							
		What Driver Was Doing		Vehicle Fac	ctors						
		GOING STRAIGHT		NOT APP	I ICARI E						
		Driver Prior Action Other		101 A11	NOT APPLICABLE						

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		Driver Actions									
	Щ	RAN OFF ROADW	ΙΑΥ								
╘	VEHICLE										
L	Ĭ										
)	回										
	>										
		Owner Name				Owner Address					
		MICHELLE DOERI	FI INGE	R		3027 THINNES RD					
5	5	(608) 572-9307	LINOL			CROSS PLAINS, WI 5	3528 . US				
٦	U	(****)				, , , , , , , , , , , , , , , , , , , ,					
	;	Sequence Of Events									
	_	Event									
	2	MOTOR VEH IN TE	RANSP	ORT							
	~ I	Event									
	02	RUN OFF ROADW	AY LE	FT							
		Event									
	03	DITCH									
		Event									
	9	Event									
	_										
⊢		Policy Holder									
LINO		Insurance Company				Individual					
-		AMERICAN-FAMIL	LY-INS-	CO		MICHELLE DOERFLING	GER				
		Individual									
		Driver				Citations Issued		Sex			
		VIVIANNE MARIE DOERFLINGER				0		FEMALE			
	7	(608) 228-7588									
	3				Date of Birth		Race WHITE				
L	₽						Willie				
5	\leq	(608) 228-7588				Driver License Number					
_	Ħ					STATE: WISCONSIN COUNTRY: UNITED STATES					
	_	AILLIA, WI 33303	, 00								
	Sat	fety Equipment	On Duty	Crash		Safety Equipment					
	Sai										
		Seat Position				SHOULDER & LAP BELT					
		1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY Helmet Use				Helmet Compliance					
		Eye Protection				Tint Compliance					
_	_		Injury S	everity		Airbag					
6	90	Injury	POSSI	BLE INJUR	RY	NON DEPLOYED					
		POSSIBLE INJURY Ejected Ejection Path			Trapped/Extricated						
		NOT EJECTED NOT EJECTED/NOT APP				ICABI F		NOT TRAPPED			
		Medical Transport				EMS Agency Identifier		EMS Run #			
		EMS GROUND			6000554		Live Ruit ii				
						Date of Death		Time of Dooth			
		Hospital SAUK PRAIRIE HOSP				Date of Death	Time of Death				
		SAUK PRAIRIE H		l D O							
		Distracted By Source OTHER DISTRACTION (ANIMAL, FOOD, GROOMING)									
		Distracted By Action OTHER ACTION (LOCKING AWAY FROM TASK ETC)									
		OTHER ACTION (LOOKING AWAY FROM TASK ETC)									
		Striking Unit # Location Location									
		Prior Action		·							

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