WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Override					Investigating	ng Officer/Deputy		
Crash Date	Crash Time Date Arrived Ti		Time Arrived	Time Arrived 07:54 PM				
07/10/2019 Date Notified	07:52 PM Time Notified			Total Injured	•			
07/10/2019	07:54 PM		01		01	00	T	
On Emergency Hit	and Run	Lane Closu	_	Work Zone	Trailer	or Towed	Reporting Threshold	
Government Property	Active Scl	hool Zone	NO	sus Related	Tags			
Reportable	Crash Type DT4000 (STAI	NDARD CRASH	1)		Amend	ed	Secondary Crash	
Description					•			
Diagram STH 33 BE	TWEN MIRRO	R LAKE ROAD) AND SA	AND ROAD		Reconstruction Photos By	n By	
						Additional Info NONE	rmation	
		51						
			NO	T TO SCALE				
			110					
I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report. UNIT 1 WAS TRAVELING WESTBOUND ON STH 33 BETWEEN MIRROR LAKE ROAD AND SAND ROAD. UNIT 1 STATED HE SWERVED TO MISS A OBJECT ON THE ROADWAY AND MAY HAVE BLOWN HIS TIRE. UNIT 1 STATED HE LOST CONTROL AND STRUCK A TREE OFF THE SOUTH SIDE SHOULDER. I OBSERVED HIM WITH MINOR INJURIES AN REQUESTED A AMBULANCE TO RESPONDED. AMBULANCE ARRIVED AND EVALUATED BUT DID NOT TRANSPORT. MIKES TOWING REMOVED THE VEHICLE. Location								
ON STH33 WB				Latitude		Longitu		
0.88 MI W OF SAND RD IN THE TOWN OF DELTON				43.5176479 X Coordinate 272485.843		-89.81 Y Coord 48221		
IN SAUK COUNTY Structure Type NO STRUCTURE				V 1V				

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Scene

	First	Harmful Event	First Harmful Event Location									
	TRE	Ε		ON ROADWAY								
	Manı	ner of Collision	Light Condition									
	NO	COLLISION W/VEHICLE IN TRANSPORT					DAYLIGHT					
	Road	Surface Condition(s)					Roadway Factor(s)					
	DRY Environment Factor(s)											
	ANI	MAL (S) IN ROADWAY				NONE						
	Wea	Weather Condition(s)										
	CLE	AR										
		nal Type	Relation To Trafficway TRAFFICWAY - ON ROAD									
		IER NON DOMESTICAT h Classification - Location	ובט					- Jurisdiction				
		BLIC PROPERTY						RISDICTION				
	Triba	al Land				Access Co	ntrol			Special Study		
						NO CONTROL						
		· ·	Junction Location		Intersectio		071011					
	NO		NON-JUNCTION		NOT AN	INTERSE	CHON					
		t Summary ===		17/1:1-0	·: A O	.6		1				
		Status		Vehicle Ope	erating As C	assification		Unit Type				
		CRANSIT Cle Type		D CLASS				TRUCK Operating As Endorsements				
01		ORT) UTILITY VEHICLE	≣			opoliting / to Endologimento						
		Occs	Train/Bus # Recorded	Total # Citat	Total # Citations Issued Total Trail 0		ailers Total HazMat Types					
	1			0								
		rance?	Direction Of Travel		Pre CrashTire		'			Total Lanes		
UNIT	YES	Harmful Event: Collision W	WESTBOUND		Mark 55 Special Function		55	Emergency Motor Vehicle Use				
5	TRE			NO SPECIAL FUNCTION		NOT APPLICABLE						
	Traff	ic Way		Traffic Cont	Traffic Control			Traffic Control Inoperative/Missing				
	TWC	D-WAY, NOT DIVIDED	NO CONT	NO CONTROL			NO					
		ace Type	_		Road Curvature STRAIGHT			Road Grade				
		CKTOP (BITUMINOUS)	STRAIGH				LEVEL				
	NO	k Bus or HazMat										
	,	Vehicle										
		License Plate Number		Plate Type	Plate Type		St		Country of Issuance			
		PK8564			AUT - AUTOMOBIL		WI	UNITED ST	TATES			
5	1	Vehicle Identification Numl	Make			Year	Model					
0	01	JA4AP3AU4JU008755		MITSUBISHI		2018	OUTLANDER					
		Color BLK - BLACK			Body Style UT - SPORT UTILITY VEHICLE		Bus Use NOT A BUS					
_	Щ	Initial Contact Point		Vehicle Damage								
LINO	IC	12FRONT										
5	ᇤ	12FRONT Extent Of Damage DISABLING DAMAGE			1RIGHT FRONT CORNER, 11LEFT FRONT CORNER, 12FRONT							
	>	Towed Due To Damage			Vehicle Removed By							
		TOWED DUE TO DISA	OWING	•								
		What Driver Was Doing	ctors									
	GOING STRAIGHT Driver Prior Action Other NOT APPLICAB											
							E					

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

LIND	VEHICLE	Driver Actions SWERVED OR AVOIDED DUE TO WIND, SLIPPERY SURFACE, MOTOR VEHICLE, OBJECT, NON-MOTORIST IN ROADWAY, ETC.										
04	01	Owner Name SARAH A LIESENF (608) 477-2400			Owner Address 146 S PINE ST REEDSBURG, W							
		Sequence Of Ev	ents									
	01	Event TREE										
	02	Event DITCH										
	03	Event										
	04	Event										
\vdash	ı	Policy Holder										
EN		Insurance Company			Individual							
-		GEICO-GENERAL-	INS-C		SARAH LIESENFE	SARAH LIESENFELD						
		ndividual										
		Driver			Citations Issued		Sex					
	Ļ	MICHAEL ANTHONY MASCIOLA			0		MALE					
╘	INDIVIDUAL	(608) 477-2400			Date of Birth		Race WHITE					
	<u> </u>	Address 146 S PINE ST REEDSBURG, WI 53959 , US			Driver License Number	Driver License Number						
	IN				STATE: WISCONSIN COUNTRY: UNITED STATES							
	Saf	ety Equipment	On Duty	Crash	Safety Equipment							
		Seat Position			SHOULDER & LAI	P BELT						
		1FRONT SEAT-LE	EFT SI	DE (DRIVER/MOTORCY								
		Helmet Use			Helmet Compliance	Helmet Compliance						
	Eye Protection Tint Compliance											
5	001		Injury S	everity	Airbag							
•	ŏ		SUSPE	CTED MINOR INJURY	DEPLOYED-COME	BINATION						
		Ejected Ejection Path				Trapped/Extricated						
		NOT EJECTED NOT EJECTED/NOT APP					NOT TRAPPED					
		Medical Transport NOT TRANSPORTE	ED		EMS Agency Identifie	r	EMS Run #					
		Hospital			Date of Death		Time of Death					
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)											
	Distracted By Action NOT DISTRACTED											
		Non Motorist	Striking	Unit # Location								
		Prior Action										

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

							• •
		Action					
	Υ						
╘	7						
LINO	5						
ر							
	INDIVIDUAL						
		Action Other					To/From School
		Sugn	ected Alcohol Use	Suspected Drug Use			
	I	Drug & Alcohol NO	ected Alcohol Ose	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		
		TEST NOT GIVEN					
_	_	Drug Type					
01	001						
		Individual Condition					
		APPEARED NORMAL					