19-08762

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

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Document Number Override	Primary Crash Document #	Agency Crash Nu 19-08762			Officer/Deputy		
Crash Date	Crash Time	Date Arrived	Time Arrive				
07/16/2019 Date Notified	05:23 PM Time Notified	07/16/2019 Total Units	05:52 PM Total Injure		otal Killed		
07/16/2019	05:24 PM	02	00		00		
On Emergency	t and Run			r or To	wed Reporting Threshold		
Government Property	Active School Zone	School Bus Relate	d Tags				
Reportable	Crash Type DT4000 (STANDARD CRAS	iH)	Amen	ded	Secondary Crash		
Description							
Diagram				Recor	nstruction By		
					;		
				Additi NON	onal Information E		
UNIT 1 WAS TURNING LEFT IN TIME. UNIT 2 ATTEMPTED TO A	ent officer, agree that I have n TO PECKS, LOCATED AT S3217 S AVOID UNIT 2. THE PASSENGER HE VEHICLES AND POSSIBLY MIN	STATE HWY 14. UNI SIDE MIRROR OF L	T 2 WAS BEHIND UNIT 1 AN	D DID N PASSEN	iot see unit 1 turning in Ger side of unit 1 causing		
Location							
ON USH14 WB 0.57 MI E					Longitude		
OF PORTER RD			43.190913368 X Coordinate		-90.161727621 Y Coordinate		
IN THE TOWN OF SPRING G	REEN						

IN SAUK COUNTY

243083.6875

Structure Type

4786870

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Crash Scene

	First	Harmful Event	First Harmful Event Location								
	MO	TOR VEH IN TRANSP	ORT		ON ROADWAY						
	Man	ner of Collision				Light Condition					
	05	SIDESWIPE/SAME D	IRECTION			DAYLIGHT					
	Road	d Surface Condition(s)				Roadway Factor(s)					
	DR	1									
	Envi	ronment Factor(s)	NONE								
	NOM	NE									
	Wea	ther Condition(s)									
	CLE	AR									
	Anim	nal Type	Relation T	o Trafficwa	у						
							WAY - O				
		h Classification - Locatior BLIC PROPERTY	1					Jurisdiction			
		al Land				Access Co				Special Study	
						NO CON	TROL				
		in Interchange Area	Junction Location		Intersectio						
	NO	-	NON-JUNCTION		NOTAN	INTERSE	CTION				
		t Summary Status		Vehicle Ope	roting Ac C	localification		Line in True o			
				D CLASS	Hating AS C	lassilication	assification Unit Type AUTOMOBILE				
	IN TRANSIT D CLASS Vehicle Type							Operating As Endorsements			
01		ORT) UTILITY VEHIC					opolating				
	Total Occs Train/Bus # Recorded			Total # Cita	Total # Citations Issued		Total Trailers 1		Total HazMat Types		
	1		0			0		0			
	Insurance? Direction Of Travel		Pre	Pre CrashTire		Speed Limit		Total Lane	es		
F	YES WESTBOUND			Mark		55		2			
UNIT		: Harmful Event: Collision	Special Fun NO SPEC		TION		Emergency NOT APP				
		ic Way		Traffic Cont	Traffic Control		Traffic Control Inoperative/M			ive/Missing	
	тwo	D-WAY, NOT DIVIDED)	NO CONT	NO CONTROL			NO			
	Surfa	асе Туре		Road Curva	Road Curvature			Road Grade			
	BLA	CKTOP (BITUMINOL	JS)	STRAIGH	STRAIGHT			LEVEL			
		k Bus or HazMat									
	-	NO									
		Vehicle					C+	Country of	01101205		
		License Plate Number 317ZFS		Plate Type		LE WI		Country of Issuance			
		Vehicle Identification Nu	Imber	Make	AUT - AUTOMOBIL		Year	UNITED STATES Model			
2	0	JF2SJADC8GH4606		SUBARU	I		2016	FORESTER			
		Color		Body Style			_	Bus Use	<u>د</u>		
		BRZ - BRONZE					LE	NOT A BU	3		
⊢	Ľ.	Initial Contact Point 5RIGHT REAR CO	RNER	Vehicle Da	mage						
UNIT	Ĕ	Extent Of Damage									
	N N	5RIGHT REAR CORNER Extent Of Damage MINOR DAMAGE									
	Towed Due To Damage Vehicle Removed By NOT TOWED OWNER										
		What Driver Was Doing		venicie ra	0.015						
		Driver Prior Action Othe	r	NOT APF	PLICABLE						
				-							

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	щ	Driver Actions NO CONTRIBUTING A	CTION										
UNIT	VEHICLE												
	>												
~	1	Owner Name ANNA GRACE BANKE (724) 591-1106	R		Owner Address 941 ITHACA RD PICHI AND CENTER WI	E2E04 110							
6	01	(724) 591-1106	_		RICHLAND CENTER, WI								
		Sequence Of Event	s										
	01	Event MOTOR VEH IN TRANS	SPORT										
	02	Event											
	03	Event											
	04	Event											
Е	Ī	Policy Holder											
UNIT		Insurance Company RURAL-MUTUAL-INS-(CO-(ATTN:-C	LAIMS-DEPT)	Individual ANNA BANKER								
	I	ndividual			•								
		Driver ANNA GRACE BANKE	R		Citations Issued	Sex FEMALE							
	JAL	(724) 591-1106			Date of Birth	Race							
Ę	/ID(Driver License Number	WHITE							
UNIT	INDIVIDUAI	Address 941 ITHACA RD RICHLAND CENTER, V	VI 53581 , US	3	STATE: WISCONSIN COUNTRY: UNITED STATES								
	Saf	on D Fety Equipment	Outy Crash		Safety Equipment								
	Uu.	Seat Position			SHOULDER & LAP BELT								
		1FRONT SEAT-LEFT	SIDE (DRIVE	R/MOTORCY									
		Helmet Use			Helmet Compliance								
		Eye Protection			Tint Compliance								
2	001	Injury _{NO}			Airbag NON DEPLOYED								
		Ejected NOT EJECTED	Ejection Pa			Trapped/Extricated NOT TRAPPED							
	NOT EJECTED NOT EJECTED/NOT APP Medical Transport Medical Transport				EMS Agency Identifier	EMS Run #							
		NOT TRANSPORTED				Time of Death							
		Hospital			Date of Death	Time of Death							
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)												
		Distracted By Action NOT DISTRACTED											
		Non Motorist	ing Unit #	Location									
		Prior Action		-									

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UNIT	INDIVIDUAL	Action									
	DNI	Action Other									To/From School
			pected Alcohol L	00	Succ	ected Drug Use					
	L	Drug & Alcohol No		50	NO	ected Drug Ose					
		Alcohol Test Given Alcohol Test Ty TEST NOT GIVEN			pe				Alcohol Tes	t Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type			Drug T	est Results	6		
01	001	Drug Type					1				
		Individual Condition									
		APPEARED NORMAL									
		t Summary									
		Status RANSIT			Vehicle Operating As Classification D CLASS			Unit Type AUTOMOBILE			
02	Vehi	cle Type							Operating As Endorsements		
0	-		Train/Bus # Re	corded	Total # Citations Issued Total Traile				ers	Total Haz	Aat Types
	Total Occs Train/Bus # Recorded 1				0 0			0			
Г	Insur YES	Insurance? Direction Of Travel YES WESTBOUND			Pre CrashTire Speed Line Mark 55			nit	Total Lane	S	
UNIT		Iost Harmful Event: Collision With IOTOR VEH IN TRANSPORT				Special Function NO SPECIAL FUNCTION			Emergency NOT APPI		le Use
		ic Way D-WAY, NOT DIVIDED			Traffic Control			Traffic Control Inoperative/Missing NO			
		ace Type			Road Curvature			Road Grade			
		CKTOP (BITUMINOUS))		STRAIGHT			LEVEL			
	Truc NO	k Bus or HazMat									
	١	Vehicle							-		
		License Plate Number 728ZRK					St WI	Country of Is			
02	2	Vehicle Identification Numb			Make			Year	Model		
0	02	1G1PE5SB3G7197056									
		Color BLK - BLACK			Body Style SD - SEDAN			Bus Use NOT A BUS			
F	Ë	Initial Contact Point 10LEFT SIDE FRONT	-		Vehicle Damage						
UNIT	/EHIC	Image: 10-LEFT SIDE FRONT Extent Of Damage MINOR DAMAGE				12FRONT					
	1	Towed Due To Damage		Vehicle Removed By							
		NOT TOWED What Driver Was Doing			OWNE Vehicle						
		GOING STRAIGHT									
		Driver Prior Action Other			NOT APPLICABLE						

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UNIT	VEHICLE	Driver Actions OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER Owner Name Owner Address											
02	02	Owner Name AARON J PLETCHE (608) 220-1839	ER			Owner Address W11642 COUNTY RO LODI, WI 53555 , US							
		Sequence Of Eve	ents										
	01	Event MOTOR VEH IN TRA	ANSPC	RT									
	02	Event											
	03	Event											
	04	Event											
н	Ē	Policy Holder											
UNIT		Insurance Company PROGRESSIVE-CAS			`	Individual AARON PLETCHER							
		ndividual	JUALI	1-110-00	,								
		Driver				Citations Issued		Sex					
	٦L	AARON J PLETCHER (608) 220-1839			0		MALE						
н	INDIVIDUAL					Date of Birth		Race WHITE					
		Address W11642 COUNTY ROAD V			Driver License Number								
	I	LODI, WI 53555 , US				STATE: WISCONSIN COUNTRY: UNITED STATES							
			De Dester	Orașt									
	Saf	ety Equipment	On Duty	Crash		Safety Equipment							
		Seat Position			D/MOTORCY	SHOULDER & LAP BE	LT						
		1FRONT SEAT-LE				Helmet Compliance							
		Eye Protection				Tint Compliance							
03	002	Injury N	njury Sev JO APE	verity PARENT I	NURY	Airbag NON DEPLOYED							
	Ū	Ejected		Ejection Pa	th			Trapped/Extricated					
		NOT EJECTED		NOT EJE	CTED/NOT APPI			NOT TRAPPED					
		Medical Transport NOT TRANSPORTED				EMS Agency Identifier		EMS Run #					
	Hospital					Date of Death	eath Time of Death						
	Distracted By Source												
	Distracted By EXTERNAL (TO VEHICLE/NON-MOTORIST AREA)												
		Distracted By Action OTHER ACTION (LC	OOKIN	G AWAY	FROM TASK ET	C)							
		Non Motorist	Striking L	Jnit #	Location								
		Prior Action			1								

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UNIT	INDIVIDUAL	Action					
		Action Other					To/From School
	Ľ	Drug & Alcohol NO	se	Suspected Drug Use			
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type			Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results		
02	002	Drug Type					
		Individual Condition					
		APPEARED NORMAL					