

6TL08F2KWG

19-09202

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

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Document Number Override		Primary Crash Document #	Agency Crash Number <b>19-09202</b>	Investigating Officer/Deputy <b>DEPUTY T. SUTHERLAND</b>	
Crash Date <b>07/24/2019</b>		Crash Time <b>10:30 PM</b>	Date Arrived <b>07/25/2019</b>	Time Arrived <b>06:52 AM</b>	
Date Notified <b>07/25/2019</b>		Time Notified <b>06:30 AM</b>	Total Units <b>01</b>	Total Injured <b>00</b>	Total Killed <b>00</b>
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure	<input type="checkbox"/> Work Zone	<input 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>DT4000 (STANDARD CRASH)</b>		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

## Description

Diagram <p>Neuheisel Road</p> <p>Fence</p> <p>Not To Scale</p>	Reconstruction By
	Photos By
	Additional Information <b>NONE</b>

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

ON 07-24-19 VEHICLE WAS TRAVELING NORTH ON NEUHEISEL ROAD NEGOTIATING A CURVE IN THE ROAD. OPERATOR SAID SHE SWERVED TO MISS A DEER AND WENT OFF THE ROAD STRICKING A FENCE ON THE EAST SIDE OF THE ROAD. THREE FENCE POSTS WERE DAMAGED ALONG WITH THE TOP THREE FENCE LINES. VEHICLE CAME TO REST IN FARM PASTURE WITH DAMAGED RIGHT FRONT TIRE. INCIDENT WAS NOT REPORTED UNTIL THE NEXT MORNING BY THE FARM PROPERTY OWNERS. CONTACT WAS MADE WITH VEHICLE OPERATOR AND OWNER VIA PHONE.

## Location

<b>ON NEUHEISEL RD 0.26 MI S OF CTHWC NB IN THE TOWN OF SPRING GREEN IN SAUK COUNTY</b>	Latitude <b>43.213769707</b>	Longitude <b>-90.035679986</b>
	X Coordinate <b>253418.875</b>	Y Coordinate <b>4789029</b>
	Structure Type <b>NO STRUCTURE</b>	

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Crash Scene

Table with 7 rows and 2-3 columns. Fields include: First Harmful Event (FENCE), First Harmful Event Location (OUTSIDE RIGHT-OF-WAY (TRAFFICWAY)), Manner of Collision (NO COLLISION W/VEHICLE IN TRANSPORT), Light Condition (DARK/UNLIT), Road Surface Condition(s) (GRAVEL), Environment Factor(s) (ANIMAL (S) IN ROADWAY), Weather Condition(s) (CLEAR), Animal Type (DEER), Relation To Trafficway (TRAFFICWAY - NOT ON ROAD), Crash Classification - Location (PRIVATE PROPERTY), Crash Classification - Jurisdiction (PRIVATE PROPERTY), Tribal Land, Access Control (NO CONTROL), Special Study, Within Interchange Area (NO), Junction Location (NON-JUNCTION), Intersection Type (NOT AN INTERSECTION).

Unit Summary

Table with 10 rows and 5-6 columns. Fields include: Unit Status (IN TRANSIT), Vehicle Operating As Classification (D CLASS), Unit Type (AUTOMOBILE), Vehicle Type (PASSENGER CAR), Operating As Endorsements, Total Occs (2), Train/Bus # Recorded, Total # Citations Issued (1), Total Trailers (0), Total HazMat Types (0), Insurance? (YES), Direction Of Travel (NORTHBOUND), Pre Crash Tire Mark, Speed Limit (55), Total Lanes (2), Most Harmful Event: Collision With (FENCE), Special Function (NO SPECIAL FUNCTION), Emergency Motor Vehicle Use (NOT APPLICABLE), Traffic Way (TWO-WAY, NOT DIVIDED), Traffic Control (NO CONTROL), Traffic Control Inoperative/Missing (NO), Surface Type (SLAG, GRAVEL, OR STONE), Road Curvature (CURVE LEFT), Road Grade (HILLCREST), Truck Bus or HazMat (NO).

Vehicle

Table with 8 rows and 4-5 columns. Fields include: License Plate Number (ACX3956), Plate Type (AUT - AUTOMOBILE), St (WI), Country of Issuance (UNITED STATES), Vehicle Identification Number (4T1BG22K6VU766129), Make (TOYOTA), Year (1997), Model (CAMRY CE/L), Color (WHI - WHITE), Body Style (4D - 4DR), Bus Use (NOT A BUS), Initial Contact Point (12--FRONT), Vehicle Damage (1--RIGHT FRONT CORNER, UNDERCARRIAGE), Extent Of Damage (MINOR DAMAGE), Towed Due To Damage (NOT TOWED), Vehicle Removed By (OWNER), What Driver Was Doing (NEGOTIATING CURVE), Vehicle Factors (NOT APPLICABLE), Driver Prior Action Other.

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UNIT VEHICLE	Driver Actions <b>SPEED TOO FAST/COND, FAILURE TO CONTROL, RAN OFF ROADWAY</b>		
	Owner Name <b>ALFRED T AMACHER (608) 588-4443</b>	Owner Address <b>36026 JESSIE ST LONE ROCK, WI 53556 , US</b>	
	<b>Sequence Of Events</b>		
	01	Event <b>FENCE</b>	
02	Event		
03	Event		
04	Event		
UNIT	<b>Policy Holder</b>		
	Insurance Company <b>GEICO-ADVANTAGE-INSURANCE-CO</b>	Individual <b>ALFRED AMACHER</b>	
UNIT INDIVIDUAL	<b>Individual</b>		
	Driver <b>MYA JANE AMACHER (608) 495-5492</b>	Citations Issued <b>1</b>	Sex <b>FEMALE</b>
		Date of Birth	Race <b>WHITE</b>
	Address <b>36026 JESSIE ST LONE ROCK, WI 53556 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
UNIT 001	<b>Safety Equipment</b>		On Duty Crash
	Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>		Safety Equipment <b>SHOULDER &amp; LAP BELT</b>
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</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 <b>NOT APPLICABLE (NOT DISTRACTED)</b>
Distracted By Action <b>NOT DISTRACTED</b>			
<b>Non Motorist</b>		Striking Unit #	Location
Prior Action			

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UNIT	INDIVIDUAL	Action			
		Action Other		To/From School	
		<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>	
		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>Individual</b>			
		Passenger <b>ALISHA LORETTA MCGLYNN (608) 588-3155</b>	Citations Issued <b>0</b>	Sex <b>FEMALE</b>	
		Address <b>S11276 PAULUS RD SPRING GREEN, WI 53588 , US</b>		Date of Birth	Race <b>WHITE</b>
Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>					
UNIT	INDIVIDUAL	<b>Safety Equipment</b>	On Duty Crash	Safety Equipment	
		Seat Position <b>3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER</b>	<b>SHOULDER &amp; LAP BELT</b>		
		Helmet Use	Helmet Compliance		
		Eye Protection	Tint Compliance		
		<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>	
		Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</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			
UNIT	INDIVIDUAL	<b>Non Motorist</b>	Striking Unit #	Location	
		Prior Action			

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<b>UNIT</b>	<b>INDIVIDUAL</b>	Action				
		Action Other			To/From School	
	<b>01</b>	<b>002</b>	<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
			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>01</b>	<b>Violations</b>				
		UTC Number <b>BB336997</b>	Issue To? <b>001</b>	Statute Number <b>346.70(1)</b>	Description <b>FAILURE OF OPERATOR TO NOTIFY POLICE OF ACCIDENT</b>	

### Property Owner

<b>PROP OWNER</b>	<b>01</b>	Individual <b>GARY L FEINER</b> <b>(608) 574-6476</b>	Address <b>E5611 CTH WC</b> <b>SPRING GREEN, WI 53588 , US</b>
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### Fixed Objects Struck

<b>01</b>	Striking Unit <b>01</b>	Struck Object <b>FENCE</b>	Structure Number	Damage Tag Number
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