# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Description 1 2 11		Primary Crash Document #			0 1 11 1	Investinati	Officer/Deputy		
Document Number Override		Primary Crash Document #		19-092		Investigating Officer/Deputy DEPUTY S. PARKHURST			
Crash Date 07/26/2019  Date Notified 07/26/2019  On Emergency		Crash Time 06:09 PM Time Notified 06:12 PM it and Run		Date Arr 07/26/2		Time Arrived 06:34 PM			
				Total Units <b>01</b>		Total Injured	Total Injured Total Killed		
						Trailer or Towed		Reporting	
Government			hool Zone	School E	Bus Related	Tags		Threshold	
Property		Crash Type		NO				Secondary	
Reportable		DT4000 (STA	NDARD CRASH	1)		Amend	ed	Crash	
Diagram Diagram							Reconstruction	on Bv	
biagram							Reconstruction	л Бу	
							Photos By		
							Additional Inf NONE	ormation	
1 3									
	)								
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	_		\		`				
	// 1	$\gg\rangle$			Kent View	Dr			
/9	′ '	Ω/			`				
		7//							
<u> </u>	_ /	7/		\					
	R~	/	Not t	o Sc	ale				
7	7								
I, a sworn law enfor									
UNIT 1 WAS SOUTH BOUN AND FULLY ENTERED TH						DITCH. THE OPE	RATOR WAS	UNABLE TO CORRECT	
Location ON KENTVIEW RD					Latitude		Longit	tudo	
138 FT S					43.4197533	328		rude 72829779	
OF SOLUM LN IN THE TOWN OF MER	RIMAC				X Coordinate 283626.468			ordinate 899.5	
IN SAUK COUNTY					Structure Typ		4010	033.3	

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#### **Crash Scene**

						First Harmful Event Location						
	-				ROADSIDE							
	Manner of Collision				Light Condition							
	NO	COLLISION W/VEHICI	LE IN TRANSPORT				DAYLIGHT					
	Road	d Surface Condition(s)					Roadway Factor(s)					
	DRY											
	DKI											
	Envi	ronment Factor(s)										
	NONE Weather Condition(s)						NONE					
	CLE	AR										
	Anim	nal Type					Relation T	Relation To Trafficway				
						TRAFFIC	CWAY - N	OT ON RO	AD			
	Cras	h Classification - Location					Crash Clas	ssification -	Jurisdiction			
	PUE	BLIC PROPERTY					NO SPE	CIAL JUR	RISDICTION			
	Triba	l Land					Access Co	ontrol			Special Study	
							NO CON	TROL				
	With	in Interchange Area	Junction Location			Intersectio	n Type				ı	
	NO	· ·	NON-JUNCTION				INTERSE	CTION				
	Clos	ure Type			Reaso	ns for Closu	ure					
	FUL	L CLOSURE					<del></del>					
	Date	Initial Lane/Rd Closed	Time Initial Lane/Rd Closed		TOW	TRUCK						
	07/2	6/2019	07:25 PM									
	Date	All Lanes Open	Time All Lanes Open		Date S	Scene Clear	ed	Tir	ne Scene Cle	eared		
	07/2	6/2019	07:52 PM		07/26	/2019		07	':55 PM			
	Uni	t Summary =										
		Status		Vehi	icle Ope	rating As C	lassification	1	Unit Type			
	IN T	RANSIT			LASS	· -			AUTOMOBILE			
	Vehicle Type								Operating As Endorsements			
5	PASSENGER CAR											
					I # Citat	ions Issued		Total Trai	lers	Total Haz	Mat Types	
	2			0	0			0	0			
	Insu	ance?	Direction Of Travel	Pre CrashTire		Speed Lin		imit Total Lanes		es		
⊢	YES	}	SOUTHBOUND	Mark		35		2				
	Most	Harmful Event: Collision V	Vith		Special Function		l		Emergency Motor Vehicle Use			
ر	TRE	Ε		NO	NO SPECIAL FUNCTION			NOT APPLICABLE				
	Traff	affic Way			Traffic Control				Traffic Control Inoperative/Missing			
	TWO	D-WAY, NOT DIVIDED	N		NO CONTROL			NO				
	Surfa	ace Type			Road Curvature				Road Grad	de		
	BLA	CKTOP (BITUMINOUS	S)	STF	STRAIGHT				LEVEL			
		k Bus or HazMat										
	NO											
	,	Vehicle										
		License Plate Number		Pla	Plate Type		St		Country of Issuance			
		Vehicle Identification Number 2C3CDYAG7DH517975  Color BLK - BLACK Initial Contact Point			Make Yea DODGE 20 Body Style		_E WI		UNITED STATES			
_	_						Year <b>2013</b>	Model				
5	Ò							CHALLENGER				
							Bus Use					
					CP - COUPE NOT A BUS							
	- 1				Vehicle Damage							
LNO	$\overline{c}$				1RIGHT FRONT CORNER, 2RIGHT SIDE FRONT, 3RIGHT SIDE MIDDLE, 4							
5	프	12FRONT			RIGHT SIDE REAR, 5RIGHT REAR CORNER, 7LEFT REAR CORNER, 8							
	7				LEFT SIDE REAR							
	TOWED DUE TO DISABLING DAMAGE			Vehicle Removed By								
				BIL	BILLS TOWING							
		What Driver Was Doing										
		GOING STRAIGHT										

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		-					
			Vehicle Factors				
		Driver Prior Action Other	WHEELS				
LIND	VEHICLE	Driver Actions FAILURE TO CONTROL					
01	01	Owner Name DARYN JAMES CULVEY (920) 220-0710	Owner Address 212 BABCOCK ST MILTON, WI 53563, US				
		Sequence Of Events					
	01	Event DITCH					
	02	Event TREE					
	03	Event					
	04	Event					
_		Policy Holder					
L		Insurance Company PROGRESSIVE-ADVANCED-INSURANCE-CO	Individual DARYN CULVEY				
	ı	ndividual					
	L	Driver DARYN JAMES CULVEY	Citations Issued  0	Sex MALE			
_	DUA	(920) 220-0710	Date of Birth	Race WHITE			
LINO	INDIVIDUAL	Address 212 BABCOCK ST MILTON, WI 53563, US	Driver License Number  STATE: WISCONSIN COUNTRY: UNITED STATES				
	Sat	On Duty Crash	Safety Equipment				
		Seat Position 1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY	SHOULDER & LAP BELT				
		Helmet Use	Helmet Compliance				
		Eye Protection	Tint Compliance				
5	001	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED				
		Ejected Ejection Path  NOT EJECTED NOT EJECTED/NOT APF		Trapped/Extricated NOT TRAPPED			
		Medical Transport  NOT TRANSPORTED	EMS Agency Identifier	EMS Run #			
		Hospital	Date of Death	Time of Death			
		Distracted By Source NOT APPLICABLE (NOT DISTRA	ACTED)				
		Distracted By Action NOT DISTRACTED	,				
		Non Motorist Striking Unit # Location					
		Prior Action					

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	Action						
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Z							
	Action Other					To/From School	
	Suspected	Alcohol I Ise	Suspected Drug Use			<u> </u>	
	Drug & Alcohol NO	7.1001101 000					
_	orag a Albono. No		NO				
	Alcohol Test Given	Alcohol Test Type			Alcohol Test Results		
	TEST NOT GIVEN						
	Drug Test Given	Drug Test Type		Drug Test Results			
	IESI NOI GIVEN						
_	Drug Type			1			
Ò	Brug Type						
0							
	Individual Condition						
	APPEARED NORMAL						
ı	ndividual						
	Passenger		Citations Issued		Sex		
	BRITTANY MARGARET LOV	WNIK	0		EEMALE		
7							
<b>7</b>	(,	Date of Birth	le ui dittii				
ם							
<b>&gt;</b>	Address	Driver License Number					
<b>Z</b> MILTON, WI 53563 . US			STATE: WISCONSI	N COUNTRY: UN	ITED STATES		
ļ	On Duty Co	ash	Safety Equipment				
Saf	ety Fauipment	<u></u>	Carety Equipment				
<b>-</b>							
	Seat Position		SHOULDER & LAP BELT				
	3FRONT SEAT-RIGHT SID	E (TRAIN ENGINEER					
		_ (					
	Helmet Use Helmet Compliance						
			Helmet Compliance				
			Helmet Compliance				
	Eye Protection		·				
	Eye Protection		Tint Compliance				
	•		Tint Compliance				
02	Injury Seve	rrity	Tint Compliance				
002	Injury Seve	rity ARENT INJURY	Tint Compliance				
005	Injury Seve	RENT INJURY	Tint Compliance		Trapped/Extricated		
005	Injury Seve	ARENT INJURY ection Path	Tint Compliance Airbag NON DEPLOYED		Trapped/Extricated		
002	Injury Seve NO APPA Ejected Ej NOT EJECTED N	RENT INJURY	Tint Compliance Airbag NON DEPLOYED		NOT TRAPPED		
000	Injury Seve NO APPA  Ejected Ej NOT EJECTED N  Medical Transport	ARENT INJURY ection Path	Tint Compliance Airbag NON DEPLOYED				
002	Injury Seve NO APPA Ejected Ej NOT EJECTED N	ARENT INJURY ection Path	Tint Compliance Airbag NON DEPLOYED		NOT TRAPPED		
005	Injury Seve NO APPA  Ejected Ej NOT EJECTED N  Medical Transport NOT TRANSPORTED	ARENT INJURY ection Path	Tint Compliance Airbag NON DEPLOYED  ICABLE EMS Agency Identifier		NOT TRAPPED EMS Run #		
002	Injury Seve NO APPA  Ejected Ej NOT EJECTED N  Medical Transport	ARENT INJURY ection Path	Tint Compliance Airbag NON DEPLOYED		NOT TRAPPED		
005	Injury Seven NO APPA  Ejected Ejected NOT EJECTED NOT TRANSPORTED  Hospital	ARENT INJURY ection Path OT EJECTED/NOT APPL	Tint Compliance Airbag NON DEPLOYED  ICABLE EMS Agency Identifier		NOT TRAPPED EMS Run #		
000	Injury Seve NO APPA Ejected Ej NOT EJECTED N Medical Transport NOT TRANSPORTED Hospital	ARENT INJURY ection Path OT EJECTED/NOT APPL	Tint Compliance Airbag NON DEPLOYED  ICABLE EMS Agency Identifier		NOT TRAPPED EMS Run #		
005	Injury Seven NO APPA  Ejected Ejected NOT EJECTED NOT TRANSPORTED  Hospital	ARENT INJURY ection Path OT EJECTED/NOT APPL	Tint Compliance Airbag NON DEPLOYED  ICABLE EMS Agency Identifier		NOT TRAPPED EMS Run #		
000	Injury Seven NO APPA Ejected Ejected NOT EJECTED NOT TRANSPORTED Hospital Distracted By	ARENT INJURY ection Path OT EJECTED/NOT APPL	Tint Compliance Airbag NON DEPLOYED  ICABLE EMS Agency Identifier		NOT TRAPPED EMS Run #		
005	Injury Seve NO APPA Ejected Ej NOT EJECTED N Medical Transport NOT TRANSPORTED Hospital	ARENT INJURY ection Path OT EJECTED/NOT APPL	Tint Compliance Airbag NON DEPLOYED  ICABLE EMS Agency Identifier		NOT TRAPPED EMS Run #		
000	Injury Seven NO APPA Ejected Ejected NOT EJECTED NOT TRANSPORTED Hospital Distracted By	ARENT INJURY ection Path OT EJECTED/NOT APPL	Tint Compliance Airbag NON DEPLOYED  ICABLE EMS Agency Identifier		NOT TRAPPED EMS Run #		
000	Injury Seve NO APPA  Ejected Ejected Ejected NOT EJECTED Not TRANSPORTED  Hospital Distracted By  Distracted By  Distracted By Action  Striking University Severation Severation Not Apparatus Severation Not Apparatus Not Transport Not Transp	ARENT INJURY ection Path OT EJECTED/NOT APPL  By Source	Tint Compliance Airbag NON DEPLOYED  ICABLE EMS Agency Identifier		NOT TRAPPED EMS Run #		
000	Injury Seven NO APPA  Ejected Ejected NOT EJECTED NOT TRANSPORTED  Hospital Distracted By  Distracted By Action	ARENT INJURY ection Path OT EJECTED/NOT APPL  By Source	Tint Compliance Airbag NON DEPLOYED  ICABLE EMS Agency Identifier		NOT TRAPPED EMS Run #		
005	Injury Seve NO APPA  Ejected Ej NOT EJECTED N Medical Transport NOT TRANSPORTED Hospital  Distracted By Distracted By  Striking Un	ARENT INJURY ection Path OT EJECTED/NOT APPL  By Source	Tint Compliance Airbag NON DEPLOYED  ICABLE EMS Agency Identifier		NOT TRAPPED EMS Run #		
0002	Injury Seve NO APPA  Ejected Ejected Ejected NOT EJECTED Not TRANSPORTED  Hospital Distracted By  Distracted By  Distracted By Action  Striking University Severation Severation Not Apparatus Severation Not Apparatus Not Transport Not Transp	ARENT INJURY ection Path OT EJECTED/NOT APPL  By Source	Tint Compliance Airbag NON DEPLOYED  ICABLE EMS Agency Identifier		NOT TRAPPED EMS Run #		
	INDIVIDUAL001	Action Other  Drug & Alcohol  Alcohol Test Given TEST NOT GIVEN  Drug Test Given TEST NOT GIVEN  Drug Type  Individual Condition APPEARED NORMAL  Individual  Passenger BRITTANY MARGARET LOV (608) 719-7888  Address 212 BABCOCK ST MILTON, WI 53563 , US  Safety Equipment  Seat Position 3FRONT SEAT-RIGHT SID	Action Other    Drug & Alcoho  Suspected Alcohol Use NO	Action Other    Drug & Alcoho  NO	Action Other    Drug & Alcohol	Action Other    Action Other	

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Crash Date 07/26/2019

Crash Time 06:09 PM

LIND	INDIVIDUAL	Action					
		Action Other  Suspected Alcohol U	lse	Suspected Drug Use			To/From School
	L	Drug & Alcohol NO		NO			
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type			Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results		
10	005	Drug Type					
		Individual Condition					
		APPEARED NORMAL					