

6TL08F2KWH
19-09387

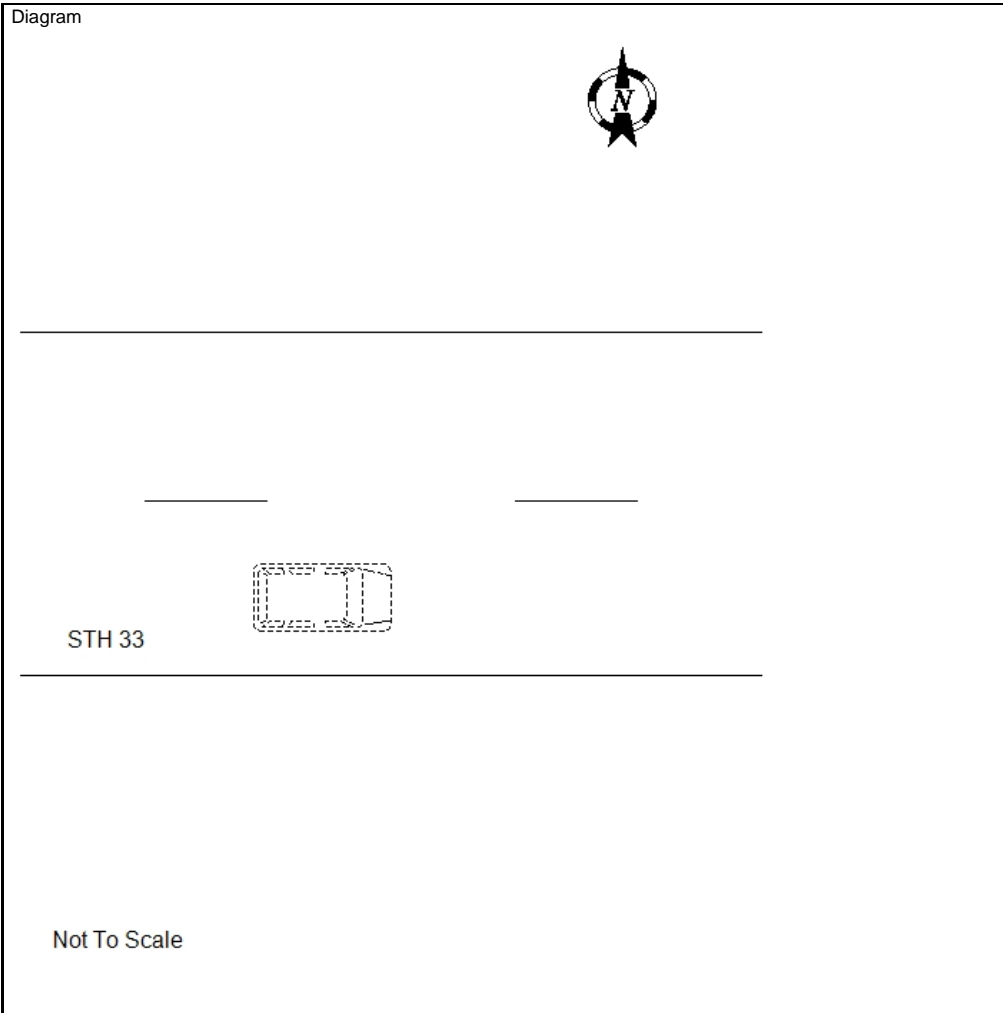
WISCONSIN MOTOR VEHICLE CRASH REPORT

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 19-09387	Investigating Officer/Deputy DEPUTY T. SUTHERLAND	
Crash Date 07/29/2019		Crash Time 12:30 PM	Date Arrived 07/29/2019	Time Arrived 01:09 PM	
Date Notified 07/29/2019		Time Notified 01:06 PM	Total Units 01	Total Injured 00	Total Killed 00
<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 NO		Tags	
<input checked="" type="checkbox"/> Reportable	Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash	

Description

Diagram 	Reconstruction By
	Photos By
	Additional Information NONE

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

ON 07-29-19 THE VEHICLE WAS TRAVELING EAST ON STH 33 A COUPLE MILES FROM LAVALLE. VEHICLE OPERATOR HIT A PIPE IN THE ROAD CAUSING MINOR DAMAGE TO THE FRONT BUMPER AREA AND PUNCTURING THE RADIATOR. VEHICLE OPERATOR DROVE TO ROCK SPRINGS AND PARKED THE VEHICLE. OPERATOR WAS NOT SURE ON EXACT LOCATION OF INCIDENT. NO INJURIES REPORTED.

Location

ON STH33 EB 0.27 MI E OF SCHUETTE RD IN THE TOWN OF LA VALLE IN SAUK COUNTY	Latitude 43.566086924	Longitude -90.089881774
	X Coordinate 250466.984375	Y Coordinate 4828320.5
	Structure Type NO STRUCTURE	

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Crash Scene

First Harmful Event OTHER OBJECT - NOT FIXED		First Harmful Event Location ON ROADWAY	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT		Light Condition DAYLIGHT	
Road Surface Condition(s) DRY		Roadway Factor(s) NONE	
Environment Factor(s) NONE			
Weather Condition(s) CLEAR			
Animal Type		Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY		Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land		Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION	

Unit Summary

UNIT	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type (SPORT) UTILITY VEHICLE				Operating As Endorsements	
	Total Occs 2	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With OTHER OBJECT - NOT FIXED		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 BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

Vehicle

UNIT	VEHICLE	License Plate Number 7851DD8				Plate Type AUT - AUTOMOBILE	St TN	Country of Issuance UNITED STATES
		Vehicle Identification Number 3C4PDCBG5CT341416				Make DODGE	Year 2012	Model JOURNEY
		Color SIL - SILVER (ALUMINUM)				Body Style 4D - 4DR		Bus Use NOT A BUS
		Initial Contact Point 12--FRONT				Vehicle Damage 12--FRONT, UNDERCARRIAGE		
		Extent Of Damage FUNCTIONAL DAMAGE						
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE				Vehicle Removed By REEDSBURG SALVAGE		
		What Driver Was Doing GOING STRAIGHT				Vehicle Factors NOT APPLICABLE		
		Driver Prior Action Other						

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTION	
		Owner Name JANELLE F SOENKSEN (608) 393-8821	Owner Address 230 LAKEWOOD DRIVE CROSSVILLE, TN 38558 , US
UNIT	01	Sequence Of Events	
		01	Event OTHER OBJECT - NOT FIXED
		02	Event
		03	Event
UNIT	04	Policy Holder	
		Insurance Company ERIE-INSURANCE-EXCHANGE	Individual JANELLE SOENKSEN
UNIT	INDIVIDUAL	Individual	
		Driver JANELLE F SOENKSEN (608) 393-8821	Citations Issued 0
		Date of Birth	Sex FEMALE
UNIT	001	Address 230 LAKEWOOD DRIVE CROSSVILLE, TN 38558 , US	
		Driver License Number STATE: TENNESSEE COUNTRY: UNITED STATES	
		Safety Equipment	
		On Duty Crash	Safety Equipment SHOULDER & LAP BELT
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY	Helmet Compliance
		Helmet Use	Tint Compliance
		Eye Protection	Airbag NON DEPLOYED
		Injury	Injury Severity NO APPARENT INJURY
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE
		Trapped/Extricated NOT TRAPPED	Medical Transport NOT TRANSPORTED
EMS Agency Identifier			
EMS Run #			
Hospital			
Date of Death			
Time of Death			
Distracted By			
Distracted By Source NOT APPLICABLE (NOT DISTRACTED)			
Distracted By Action NOT DISTRACTED			
Non Motorist			
Striking Unit #	Location		
Prior Action			

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT INDIVIDUAL	Action		
	Action Other		To/From School
	Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use 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
	Drug Type		
	Individual Condition APPEARED NORMAL		
	Individual		
	Passenger JERRY L SOENKSEN (608) 393-8821	Citations Issued 0	Sex MALE
	Address 230 LAKEWOOD DRIVE CROSSVILLE, TN 38558 , US		Date of Birth WHITE
Driver License Number STATE: TENNESSEE COUNTRY: UNITED STATES			
UNIT INDIVIDUAL	Safety Equipment	On Duty Crash	Safety Equipment
	Seat Position 3--FRONT SEAT-RIGHT SIDE (TRAIN ENGINEER	SHOULDER & LAP BELT	
	Helmet Use	Helmet Compliance	
	Eye Protection	Tint Compliance	
	Injury	Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #
	Hospital	Date of Death	Time of Death
	Distracted By	Distracted By Source	
	Distracted By Action		
UNIT INDIVIDUAL	Non Motorist	Striking Unit #	Location
	Prior Action		

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		Action Other		To/From School
01	002	Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use 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
		Drug Type		
		Individual Condition APPEARED NORMAL		