WISCONSIN MOTOR VEHICLE CRASH REPORT

Document Number Override	Primary Crash Documen	t # Agenc	y Crash Number	Investigating Officer/Deputy DEPUTY T. SUTHERLAND				
Crash Date	Crash Time 02:00 AM	Date A 08/17		Time Arrived				
08/17/2019 Date Notified	Time Notified	Total U		09:36 AM Total Injured Total Killed				
Crash Date 08/17/2019 02:00 AM Date Notified 08/17/2019 Time Notified 09:15 AM On Emergency Hit and Run Government Property Active School Zone		02		00				
On Emergency	lit and Run La	ne Closure	☐ Work Zone	Trailer or	Towed	Reporting Threshold		
Government Property	Active School Zo	one Schoo	I Bus Related	Tags				
Reportable	Crash Type DT4000 (STANDARE	CRASH)		Amended	ļ	Secondary Crash		
Description								
Diagram		•			hotos By	ву		
		350 Mai Street	n		dditional Inforn	nation		
Not To Scale								
N	lain Street							
VEHICLE WAS LEGALLY PARK SOUTHBOUND AND STRUCK MIRROR WAS DAMAGED. HIT	ED ON THE ROAD IN FRO	NT OF 350 MAIN RKED VEHICLE.	STREET IN LOGANVILL SCUFF MARK LEFT ON	E. IT APPEARS A VE REAR DRIVERS SID	DE BUMPER A	ND DRIVERS SIDE		
Location ON 350 MAIN S MAIN ST/S	STH23 EB		Latitude		Longitud	e		
174 FT N OF BADGER ST (HOUSE/BUILDING 350 MA			43.437397 X Coordinat		-90.036 Y Coordi	710121		
IN THE VILLAGE OF LOGA IN SAUK COUNTY	,		254239.26 Structure Ty HOUSE/B	/ре	481386	9		

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

Crash Scene

Ī	First Harmful Event					First Harmful Event Location				
	PARKED MOTOR VEHICLE					ON ROADWAY				
ŀ	Manner of Collision					Light Condition				
	05SIDESWIPE/SAME DIRECTION				DARK/LIGHTED					
	Road Surface Condition(s)				Roadway Factor(s)					
	DRY	′								
	Envi	ronment Factor(s)								
	МОИ	NE				NONE	NONE			
ŀ	Wea	ther Condition(s)								
	CLE	AR								
•	Anim	nal Type					o Trafficwa	•		
Ì		h Classification - Location						Jurisdiction		
		BLIC PROPERTY						ISDICTION		Ta
	Triba	al Land			Access Control NO CONTROL			Special Study		
		ŭ	Junction Location		Intersection					
	NO	t_	NON-JUNCTION		NOT AN	INTERSECTION				
		Summary ===								
		Jnit Status HIT AND RUN			erating As C	lassification		Unit Type		
		cle Type		D CLASS	D CLASS			AUTOMOBILE Operating As Endorsements		ments
6		SENGER CAR				operating to Endotosine inc				
	Total Occs Train/Bus # Recorded			Total # Citations Issued					Mat Types	
	1 Discretize Of Travel		0			0 Speed Lim		0 Total Lane	20	
ᅵ	Insurance? Direction Of Travel UNKNOWN SOUTHBOUND			Pre CrashTire Mark		35	2		2 5	
LNO		: Harmful Event: Collision W			Special Function		00	Emergency Motor Vehicle Use		cle Use
⊃	PARKED MOTOR VEHICLE		NO SPEC	NO SPECIAL FUNCTION				LICABLE		
	Traffic Way TWO-WAY, NOT DIVIDED Surface Type Traffic Control NO CONTROL Road Curvature						Traffic Control Inoperative/Missing NO			
							Road Grade			
	BLACKTOP (BITUMINOUS)				STRAIGHT			LEVEL		
	Truck Bus or HazMat									
	NO									
	,	Vehicle								
		License Plate Number UNKNOWN		Plate Type	ı		St	Country of Is	suance	
_		Vehicle Identification Num	ber	Make			Year	Model		
5	02									
		Color		Body Style				Bus Use		
.	Initial Contact Point Vehicle Damage									
E N	∃C	Extent Of Damage			_					
7	VEHICLE	Extent Of Damage								
	Towed Due To Damage Vehicle Removed By									
	NOT TOWED What Driver Was Doing Vehicle Factors									
		UNKNOWN		voilide i a	0.010					
	Driver Prior Action Other			UNKNOV	UNKNOWN					

WISCONSIN MOTOR VEHICLE CRASH REPORT

		Driver Actions								
		UNKNOWN								
_	۳									
F	<u>C</u>									
UNIT	VEHICLE									
	VE									
		Owner Name			Owner Address					
5	02				, ,					
		2 2/5	•							
		Sequence Of Eve	ents							
	01	Event PARKED MOTOR VEHICLE								
	0	T ARRED MOTOR VE	IIIOLL							
	02	Event								
	0									
,	~	Event								
	03									
		Event								
	04	****								
		Individual								
		Driver			Citations Issued	Sex				
	_	UNKNOWN			0					
	JA				Date of Birth	Race				
-	٦									
L	<u> </u>	Address			Driver License Number					
-										
	Z	, ,								
		I O	n Duty Crash		Safety Equipment					
	Saf	afety Equipment								
					DECTE A INIT LIGE LINUX IONALI					
		Seat Position 1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY			RESTRAINT USE UNKNOWN					
			FT SIDE (DRIVE	R/MOTORCY	Helmet Compliance					
		Helmet Use								
		Eye Protection			Tint Compliance					
_	Ξ,	In.	jury Severity		Airbag					
6	00	Injury _N	O APPARENT II	NJURY	NOT APPLICABLE					
		Ejected	Ejection Pa	th		Trapped/Extricated				
		NOT APPLICABLE	NOT EJE	CTED/NOT APPL	ICABLE	NOT APPLICABLE				
		Medical Transport	<u> </u>		EMS Agency Identifier	EMS Run #				
		NOT TRANSPORTE	D							
		Hospital			Date of Death	Time of Death				
		l Di	istracted By Source	<u> </u>		<u> </u>				
		Distracted By								
		Distracted By Action								
		ווסוומטופים Dy Action								
				Li e						
		Non Motorist	triking Unit #	Location						
		Prior Action								

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		Action								
	JAL									
UNIT	NDIVIDUAL									
ر	ΔN									
	_									
		Action Other								To/From School
		Suspected Alcohol Use Suspected Drug Use								
		Drug & Alcohol Alcohol Test Given		Alcohol Test Ty	/ne			Alcohol Test	t Results	
	TEST NOT GIVEN			Alcohol rest results						
		Drug Test Given TEST NOT GIVEN		Drug Test Type	9	Drug	Test Results	i		
10	90	Drug Type				•				
		Individual Condition								
		NOT OBSERVED								
		Summary -						_		
		Status GALLY PARKED			Vehicle Operating As Class D CLASS	ssificatior	1	Unit Type AUTOMOBILE		
02	Vehicle Type						Operating As Endorsements			
	•	ORT) UTILITY VEHICLE	corded	Total # Citations Issued Total Traile			ers	Total HazN	Mat Types	
	0			0	0		0 Total Lanes			
_	Insurance? Direction Of Travel YES		avei	Pre CrashTire Mark		Speed Lim	nit	2		
S	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT			Special Function NO SPECIAL FUNCTION			NOT APPI	LICABLE		
		Traffic Way FWO-WAY, NOT DIVIDED			Traffic Control NO CONTROL			Traffic Control Inoperative/Missing NO		
		Surface Type			Road Curvature STRAIGHT			Road Grade LEVEL		
	Truc	ruck Bus or HazMat								
	NO,	Vehicle								
		License Plate Number			Plate Type		St	Country of Is		
		ACL3392 Vehicle Identification Number			AUT - AUTOMOBILE Make		WI Year	UNITED STATES Model		
02	2			MAZDA		2015	CX-5			
					Body Style UT - SPORT UTILITY VEHICLE			Bus Use NOT A BUS		
L	Щ				Vehicle Damage					
UNIT	/EHIC				7LEFT REAR CORNER, 10LEFT SIDE FRONT					
	Towed Due To Damage				Vehicle Removed By					
		NOT TOWED What Driver Was Doing			OPERATOR Vehicle Factors					
	LEGALLY PARKED Driver Prior Action Other				NOT APPLICABLE					
		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2								

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LIND	VEHICLE	Driver Actions NO CONTRIBUTING ACTION				
02	70	Owner Name JUDY M GOLLAWAY (608) 577-3636	Owner Address 350 MAIN STREET LOGANVILLE, WI 53943, US			
l⊨	Policy Holder					
LNO		Insurance Company	Individual			
ر ا		USAA-CASUALTY-INS-CO	JUDY GOLLAWAY			