

6TL09426SZ

19-12154

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 19-12154		Investigating Officer/Deputy DEPUTY A. KULAS	
Crash Date 09/29/2019		Crash Time 11:00 PM		Date Arrived 09/29/2019		Time Arrived 11:15 PM	
Date Notified 09/29/2019		Time Notified 11:09 PM		Total Units 01		Total Injured 01	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.

UNIT 1 WAS EAST BOUND ON HY 33. UNIT 1 SWERVED SHARPLY AND ENTERED THE SOUTH DITCH. UNIT 1 WENT DOWN A SHALLOW EMBANKMENT AND STRUCK A SMALL TREE. IT IS BELIEVED THE OPERATOR OF UNIT 1 SUFFERED A MEDICAL ISSUED BEFORE THE CRASH.

Location

ON STH33 EB 0.37 MI E OF SPRINGER RD IN THE TOWN OF LA VALLE IN SAUK COUNTY	Latitude 43.620082566	Longitude -90.155940098
	X Coordinate 245359.96875	Y Coordinate 4834518
	Structure Type NO STRUCTURE	

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Crash Scene

First Harmful Event TREE		First Harmful Event Location ON ROADWAY	
Manner of Collision NO COLLISION W/VEHICLE IN TRANSPORT		Light Condition DARK/UNLIT	
Road Surface Condition(s) WET		Roadway Factor(s) NONE	
Environment Factor(s) NONE			
Weather Condition(s) RAIN			
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 01	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? UNKNOWN	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With TREE		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					

UNIT 01	Vehicle					
	License Plate Number AAA7385		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number 3MZBN1U7XHM122068		Make MAZDA	Year 2017	Model 3	
	Color GRY - GRAY		Body Style SD - SEDAN		Bus Use NOT A BUS	
	Initial Contact Point 12--FRONT		Vehicle Damage			
	Extent Of Damage MINOR DAMAGE		12--FRONT			
	Towed Due To Damage TOWED BUT NOT DUE TO DISABLING DAMAG		Vehicle Removed By STEVES AUTO SERVICE			
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors			
Driver Prior Action Other		NOT APPLICABLE				

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UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTION	
		Owner Name EDWARD T REVELS (608) 553-4035	Owner Address E16411 DILLY ROAD HWY 82 HILLSBORO, WI 54634 , US
01	01	Sequence Of Events	
	01	Event TREE	
	02	Event	
	03	Event	
	04	Event	
UNIT	INDIVIDUAL	Individual	
		Driver NACOLE LYNN TOMAN (508) 553-3247	Citations Issued 0
		Date of Birth	Sex FEMALE
		Race WHITE	
		Address 106 N. EAST ST LA VALLE, WI 53941 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES
UNIT	001	Safety Equipment	On Duty Crash
		Seat Position 1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY	Safety Equipment SHOULDER & LAP BELT
		Helmet Use	Helmet Compliance
		Eye Protection	Tint Compliance
		Injury	Injury Severity SUSPECTED MINOR INJURY
			Airbag NON DEPLOYED
		Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE
			Trapped/Extricated TRAPPED/EXTRICATED
		Medical Transport EMS GROUND	EMS Agency Identifier 6001307
			EMS Run #
		Hospital HILLSBORO AREA 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	

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UNIT	INDIVIDUAL	Action				
		Action Other			To/From School	
	01	001	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			
			CONFUSED OR DISORIENTED (NON LUCID)			