WISCONSIN MOTOR VEHICLE CRASH REPORT

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

							(000) 000 4000	
	Document Number Override					g Officer/Deputy S. PARKHURST		
	Crash Date 10/19/2019	Crash Time 01:00 AM		Date Arrived 10/19/2019 Total Units		Time Arrived 01:27 AM		
5	Date Notified	Time Notified	Total Units			Total Kil	led	
;	10/19/2019	01:14 AM	01		Total Injured 00	00		
	On Emergency Hit	and Run Lane Cl		Work Zone		or Towed	Reporting Threshold	
,	Government Property	Active School Zone	School Bus F	Related	Tags			
	✓ Reportable	Crash Type DT4000 (STANDARD CRA	ASH)		Amende	ed	Secondary Crash	
I	Description						-	
	Old Hwy 12		_		-	Photos By Additional Inf		
	СТН Н							
				Not to scale				
ľ	↓ I, a sworn law enforceme	nt officer, agree that I have	e not added any	CJIS data in th	is report.			
	UNIT 1 WAS LOCATED UNOCCU				-			
L	ocation							
i	ON CTHH SB			Latitude		Longi	tude	
I	43 FT E			43.6265663	305		07010818	
	OF OLD 12 IN THE CITY OF WISCONSIN IN SAUK COUNTY	DELLS		X Coordinate 273539.187	75		ordinate 226.5	
				Structure Typ	ре			

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Crash Scene

l	First	First Harmful Event Fi					First Harmful Event Location				
	TRE	REE				ROADSIDE					
	Manr	lanner of Collision					Light Condition				
	NO (NO COLLISION W/VEHICLE IN TRANSPORT				DARK/LIGHTED					
	Road	Road Surface Condition(s)				Roadway	Factor(s)				
	DRY										
	Envir	onment Factor(s)									
	NON	IE				NONE					
	Weat	Weather Condition(s)									
	CLE	AR									
	Anim	al Type				Relation To Trafficway					
	_					TRAFFICWAY - NOT ON ROAD					
		h Classification - Location				Crash Classification - Jurisdiction NO SPECIAL JURISDICTION					
		Land							Special Study		
						NO CONTROL					
		Vithin Interchange Area Junction Location			Intersection Type NOT AN INTERSECTION						
	NO		NON-JUNCTION		NOT AN	INTERSE	CHON				
		Status		Vahiala One	roting As C	locaification		Link Ton			
	Unit Status Vehicle O HIT AND RUN D CLASS				cle Operating As Classification			Unit Type AUTOMOBILE			
		cle Type	12 02/100	DOLAGO				Operating As Endorsements			
2	PAS	SENGER CAR									
	Total	Occs	Train/Bus # Recorded							Mat Types	
	1			0			0		0 Total Lane		
_	Insurance? Direction Of Travel UNKNOWN EASTBOUND				Pre CrashTire Mark		Speed Lin	2		es	
LINO	_	Harmful Event: Collision V			Special Function			Emergency		cle Use	
⊃	TRE		NO SPEC	NO SPECIAL FUNCTION		NOT APPLICABLE					
		c Way D-WAY, NOT DIVIDED		Traffic Control NO CONTROL			Traffic Control Inoperative/Missing NO				
		ice Type		Road Curvature			Road Grade				
		CKTOP (BITUMINOUS		STRAIGHT			LEVEL				
	Truck Bus or HazMat										
	NO	10									
	1	/ehicle									
		License Plate Number		1	Plate Type		St	Country of Is			
		AEN3530			AUT - AUTOMOBILE		WI	UNITED STATES			
2	01	Vehicle Identification Number 1G1AL55F177408247		Make	CHEVROLET		Year 2007	Model COBALT LT			
		Color		Body Style			Bus Use				
		RED - RED		4D - 4DR NOT A BUS							
\vdash	;E	Initial Contact Point 12FRONT			Vehicle Damage						
LNO	밀	Extent Of Damage	12FROM	12FRONT							
٦	12FRONT Extent Of Damage DISABLING DAMAGE										
	Towed Due To Damage Vehicle Removed By					. D					
		TOWED DUE TO DISABLING DAMAGE PLATTS WRECK What Driver Was Doing Vehicle Factors					:K				
		UNKNOWN		. 5111010 1 41							
	Driver Prior Action Other UNK				INKNOWN						

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		Driver Actions							
	щ	UNKNOWN							
⊨I	귕								
NWOWN CEHICLE									
_	Z								
		Owner Name		Owner Address					
2	2	BARBARA J OMALLEY			N5899 SQUAW CREEK RD				
•	0			BLK RIVER FALLS, WI 54615 , US					
	9	Sequence Of Ev	rents						
	7	Event TREE							
	Event Event								
		Fire							
	03	Eveni	Event						
		Event							
	04	Event							
	l I	ام ماز، را مار							
	1	ndividual			Citations Issued	Leav			
		Driver			0	Sex			
	A I				Date of Birth	Race			
_	\mathbf{S}				Bate of Bitti	T. Carlo			
	INDIVIDUAL	Address			Driver License Number				
⊃	⊒∣								
	=	, ,							
	On Duty Crash				Safety Equipment				
	Sar	fety Equipment		RESTRAINT USE UNKNOWN					
		Seat Position							
		1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY							
		Helmet Use			Helmet Compliance				
		Eye Protection			Tint Compliance				
		Lye i lotection			Tint Compliance				
_	— I	Injury Severity			Airbag				
2	90		NO APPARENT II	NJURY	NOT APPLICABLE				
		Ejected	Ejection Pa	th		Trapped/Extricated			
		NOT APPLICABLE	LICABLE NOT EJECTED/NOT APF		LICABLE	NOT APPLICABLE			
		Medical Transport			EMS Agency Identifier	EMS Run #			
		NOT TRANSPORTED							
		Hospital			Date of Death	Time of Death			
		District 15 0							
		Distracted By	Distracted By Source)					
	Ī	Distracted By Action							
		,,							
	L		Striking Unit #	Location					
		Non Motorist							
		Prior Action							
		i de la companya de							

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Crash Date 10/19/2019

Crash Time 01:00 AM

LIND	INDIVIDUAL	Action					
		Action Other					To/From School
	L	Orug & Alcohol	cohol Use	Suspected Drug Use			
		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	001	Drug Type					
		Individual Condition					
		NOT OBSERVED					