

6TLOBTWRB7  
19-13814

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<br><b>19-13814</b> | Investigating Officer/Deputy<br><b>CAPTAIN J. HODGES</b> |  |
| Crash Date<br><b>11/06/2019</b>              |  | Crash Time<br><b>07:50 AM</b>         | Date Arrived<br><b>11/06/2019</b>      | Time Arrived<br><b>08:10 AM</b>                          |  |
| Date Notified<br><b>11/06/2019</b>           |  | Time Notified<br><b>07:50 AM</b>      | Total Units<br><b>01</b>               | Total Injured<br><b>00</b>                               | Total Killed<br><b>00</b>                    |
| <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<br><b>NO</b>        | Tags   |  |
| <input type="checkbox"/> Reportable          | Crash Type<br><b>DT4000 (STANDARD CRASH)</b> |                                       | <input type="checkbox"/> Amended       | <input type="checkbox"/> Secondary Crash                 |  |

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

UNIT 1 WAS SB USH 12 TRAVELING ON SNOW COVERED ROADWAY. UNIT 1 LOST CONTROL AND RAN OFF ROADWAY INTO RIGHT DITCH. UNIT 1 WAS PULLED OUT OF THE DITCH BY EVERETT'S AUTO BODY. NO INJURIES AND NO DAMAGE. TIRE TREAD DEPTH WAS A FACTOR.

Location

|  |                                     |                                   |
|--|-------------------------------------|-----------------------------------|
| <b>ON USH12 EB<br/>0.57 MI S<br/>OF USH12 EB<br/>IN THE TOWN OF SUMPTER<br/>IN SAUK COUNTY</b> | Latitude<br><b>43.331964532</b>     | Longitude<br><b>-89.759038551</b> |
|  | X Coordinate<br><b>276324.59375</b> | Y Coordinate<br><b>4801377</b>    |
|  | Structure Type                      |                                   |

Crash Scene

|   |   |   |
|---|---|---|
| First Harmful Event<br><b>OTHER NON-COLLISION</b>                 | First Harmful Event Location<br><b>SHOULDER RIGHT</b>                           |   |
| Manner of Collision<br><b>NO COLLISION W/VEHICLE IN TRANSPORT</b> | Light Condition<br><b>DAYLIGHT</b>  |   |
| Road Surface Condition(s)<br><b>SNOW</b>                          | Roadway Factor(s)<br><b>ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)</b> |   |
| Environment Factor(s)<br><b>WEATHER CONDITIONS</b>                |   |   |
| Weather Condition(s)<br><b>SNOW</b>                               |   |   |
| Animal Type   | Relation To Trafficway<br><b>TRAFFICWAY - ON ROAD</b>                           |   |
| Crash Classification - Location<br><b>PUBLIC PROPERTY</b>         | Crash Classification - Jurisdiction<br><b>NO SPECIAL JURISDICTION</b>           |   |
| Tribal Land   | Access Control<br><b>NO CONTROL</b>   | Special Study                                   |
| Within Interchange Area<br><b>NO</b>                              | Junction Location<br><b>NON-JUNCTION</b>  | Intersection Type<br><b>NOT AN INTERSECTION</b> |

Unit Summary

|                |  |   |   |  |                         |  |
|----------------|--|---|---|--|-------------------------|--|
| <b>UNIT 01</b> | Unit Status<br><b>IN TRANSIT</b>                                 | Vehicle Operating As Classification<br><b>D CLASS</b> | Unit Type<br><b>AUTOMOBILE</b>                          |  |                         |  |
|                | Vehicle Type<br><b>PASSENGER CAR</b>                             |   | Operating As Endorsements                               |  |                         |  |
|                | Total Occs<br><b>1</b>   | Train/Bus # Recorded                                  | Total # Citations Issued<br><b>0</b>                    | Total Trailers<br><b>0</b>                           | Total HazMat Types      |  |
|                | Insurance?<br><b>YES</b>   | Direction Of Travel<br><b>SOUTHBOUND</b>              | <input checked="" type="checkbox"/> Pre Crash Tire Mark | Speed Limit<br><b>55</b>                             | Total Lanes<br><b>4</b> |  |
|                | Most Harmful Event: Collision With<br><b>OTHER NON-COLLISION</b> |   | Special Function<br><b>NO SPECIAL FUNCTION</b>          | Emergency Motor Vehicle Use<br><b>NOT APPLICABLE</b> |                         |  |
|                | Traffic Way<br><b>DIVIDED HWY W/TRAFFIC BARRIER</b>              |   | Traffic Control<br><b>NO CONTROL</b>                    | Traffic Control Inoperative/Missing<br><b>NO</b>     |                         |  |

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|   |   |   |  |
|---|---|---|--|
| Surface Type<br><b>BLACKTOP (BITUMINOUS)</b>                    |   | Road Curvature<br><b>STRAIGHT</b>                                       | Road Grade<br><b>LEVEL</b>                         |
| Truck Bus or HazMat<br><b>NO</b>                                |   |   |  |
| <b>Vehicle</b>  |   |   |  |
| 01<br>UNIT<br>VEHICLE   | License Plate Number<br><b>ADA8085</b>  | Plate Type<br><b>AUT - AUTOMOBILE</b>                                   | St<br><b>WI</b>                                    |
|   | Country of Issuance<br><b>UNITED STATES</b>                                   | Year<br><b>2020</b>   | Model<br><b>FOCUS</b>                              |
|   | Vehicle Identification Number<br><b>1FAHP35N09W105691</b>                     | Make<br><b>FORD</b>   | Body Style<br><b>SD - SEDAN</b>                    |
|   | Color<br><b>WHI - WHITE</b>   | Initial Contact Point<br><b>NON-COLLISION</b>                           | Bus Use<br><b>NOT A BUS</b>                        |
|   | Extent Of Damage<br><b>NO DAMAGE</b>  | Vehicle Damage<br><b>NO DAMAGE</b>                                      |  |
|   | Towed Due To Damage<br><b>NOT TOWED</b>                                       | Vehicle Removed By<br><b>ARNESON SERVICE</b>                            |  |
|   | What Driver Was Doing<br><b>GOING STRAIGHT</b>                                | Vehicle Factors<br><b>TIRES</b>   |  |
| Driver Prior Action Other                                       | Driver Actions<br><b>SPEED TOO FAST/COND</b>                                  |   |  |
| Owner Name<br><b>STACEY A ALBRIGHT<br/>(608) 395-5298</b>       | Owner Address<br><b>S8065 MAPLE PARK RD<br/>PRAIRIE DU SAC, WI 53578 , US</b> |   |  |
| <b>Sequence Of Events</b>                                       |   |   |  |
| 01  | Event<br><b>RUN OFF ROADWAY RIGHT</b>   |   |  |
| 02  | Event   |   |  |
| 03  | Event   |   |  |
| 04  | Event   |   |  |
| <b>Policy Holder</b>  |   |   |  |
| Insurance Company<br><b>PROGRESSIVE-ADVANCED-INSURANCE-CO</b>   |   | Individual<br><b>STACEY ALBRIGHT</b>                                    |  |
| <b>Individual</b>   |   |   |  |
| 01<br>UNIT<br>INDIVIDUAL  | Driver<br><b>AUTUMN A HELLENBRAND<br/>(608) 395-5298</b>                      | Citations Issued<br><b>0</b>  | Sex<br><b>FEMALE</b>                               |
|   | Date of Birth   | Race<br><b>WHITE</b>  |  |
|   | Address<br><b>S8065 MAPLE PARK RD<br/>PRAIRIE DU SAC, WI 53578 , US</b>       | Driver License Number<br><b>STATE: WISCONSIN COUNTRY: UNITED STATES</b> |  |
|   | <b>Safety Equipment</b>   |   | Safety Equipment<br><b>SHOULDER &amp; LAP BELT</b> |
| On Duty Crash   |   | Helmet Compliance   |  |
| Seat Position<br><b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b> |   | Helmet Use  |  |

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|------|------------|--|-----|--|-------------------------------|--|---------------|--|--|
| 01   | 001        | Eye Protection                                 |     | Tint Compliance  |                               |  |               |  |  |
|      |            | <b>Injury</b>                                  |     | Injury Severity<br><b>NO APPARENT INJURY</b>                   | Airbag<br><b>NON DEPLOYED</b> |  |               |  |  |
|      |            | Ejected<br><b>NOT EJECTED</b>                  |     | Ejection Path<br><b>NOT EJECTED/NOT APPLICABLE</b>             |                               | Trapped/Extricated<br><b>NOT TRAPPED</b> |               |  |  |
|      |            | Medical Transport<br><b>NOT TRANSPORTED</b>    |     |  | EMS Agency Identifier         |  | EMS Run #     |  |  |
|      |            | Hospital                                       |     |  | Date of Death                 |  | Time of Death |  |  |
|      |            | <b>Distracted By</b>                           |     | Distracted By Source<br><b>NOT APPLICABLE (NOT DISTRACTED)</b> |                               |  |               |  |  |
|      |            | Distracted By Action<br><b>NOT DISTRACTED</b>  |     |  |                               |  |               |  |  |
|      |            | <b>Non Motorist</b>                            |     | Striking Unit #  | Location                      |  |               |  |  |
|      |            | Prior Action                                   |     |  |                               |  |               |  |  |
|      |            | Action   |     |  |                               |  |               |  |  |
| UNIT | INDIVIDUAL | Action Other                                   |     |  |                               | To/From School                           |               |  |  |
|      |            | <b>Drug &amp; Alcohol</b>                      |     | Suspected Alcohol Use<br><b>NO</b>                             |                               | Suspected Drug Use<br><b>NO</b>          |               |  |  |
|      |            | Alcohol Test Given<br><b>TEST NOT GIVEN</b>    |     | Alcohol Test Type  |                               | Alcohol Test Results                     |               |  |  |
|      |            | Drug Test Given<br><b>TEST NOT GIVEN</b>       |     | Drug Test Type   |                               | Drug Test Results                        |               |  |  |
|      |            | Drug Type                                      |     |  |                               |  |               |  |  |
|      |            | Individual Condition<br><b>APPEARED NORMAL</b> |     |  |                               |  |               |  |  |
|      |            | 01   | 001 |  |                               |  |               |  |  |
|      |            |  |     |  |                               |  |               |  |  |
|      |            |  |     |  |                               |  |               |  |  |
|      |            |  |     |  |                               |  |               |  |  |