19-13818

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash [Document #	ment # Agency Crash Nu 19-13818		nber					
Z	Crash Date	Crash Time		Date Arrived		DEPUTY K. WASILEWSKI Time Arrived					
0	11/06/2019 Date Notified	08:38 AM Time Notified		11/06/2019		08:53 AM	Гт	otal Killeo	4		
ב פ	11/06/2019	08:38 AM		Total Units 01			Total Injured Total I 00 00				
	On Emergency	and Run	Lane Closu			k Zone		or To	wed	Reporting Threshold	
	Government Property		hool Zone	School I NO	Bus Relate	d	Tags				
	Reportable	Crash Type DT4000 (STA	NDARD CRASH	H)			Amende	ed		Secondary Crash	
	Description										
	Diagram							Recor	nstruction	Ву	
								<u> </u>			
								Photo	s By		
							-	Additio	onal Inforr	nation	
								NON	E		
	✓ I, a sworn law enforceme										
	VEHICLE HEADING SOUTHBOUN VEHICLE DAMAGE.	ND ON OL <u>D BLU</u>	FF TRAIL. VEHICL	E SLIDE	INTO THE	DITCH ON THE	WEST SIDE C	DF ROA	ADWA <u>Y. I</u>	NO INJURIES. NO	_
l	_ocation										_
	ON OLD BLUFF TRL 0.52 MI N					Latitude			Longitud		
	OF CTHPF					43.300515 X Coordinate			-89.778 Y Coord		
	IN THE TOWN OF PRAIRIE D IN SAUK COUNTY	U SAC				274597.51			479793		
						Structure Type					

19-13818

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Crash Scene

	First Harmful Event					First Harmful Event Location					
	DIT	DITCH					ON ROADWAY				
	Manı	Manner of Collision					Light Condition				
		NO COLLISION W/VEHICLE IN TRANSPORT					DAYLIGHT				
	Road Surface Condition(s)					Roadway Factor(s)					
	SNOW, SLUSH										
	Envir	onment Factor(s)				POADS				NOW SLUSH	
	WE/					ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)					
	Wea	ther Condition(s)									
	SNC	SNOW									
	Animal Type					Relation To Trafficway TRAFFICWAY - ON ROAD					
		h Classification - Location						Jurisdiction			
	_							ISDICTION		Special Study	
	TIDa					Access Co NO CON				Special Study	
	Withi	n Interchange Area	Junction Location		Intersectio	n Type					
	NO		NON-JUNCTION		NOT AN	INTERSE	CTION				
	Unit	Summary 💻									
		Status			erating As C	lassification		Unit Type	:		
	IN TRANSIT			D CLASS	D CLASS		AUTOMOBI				
01		cle Type SENGER CAR				Operating As Endorsements			nents		
		Occs	Train/Bus # Recorded	Total # Cita	Total # Citations Issued		Total Trailers T		Total HazMat Types		
	2	0003		0			0		0		
	Insurance? Direction Of Travel		Pre	Pre CrashTire		Speed Limit		Total Lanes			
F	YES SOUTHBOUND				Mark		55			2	
UNIT	Most	Harmful Event: Collision		Special Function NO SPECIAL FUNCTION			Emergency Motor Vehicle Use NOT APPLICABLE				
	Traffic Way				Traffic Control			Traffic Control Inoperative/Missing			
	TWO-WAY, NOT DIVIDED				NO CONTROL			NO			
	Surface Type				Road Curvature		Road Grade		<u>}</u>		
	BLACKTOP (BITUMINOUS)			STRAIGH	STRAIGHT			LEVEL			
	Truck	< Bus or HazMat									
		/ehicle									
		License Plate Number		Plate Type)		St	Country of Is	suance		
		651UNF		AUT - AL	AUT - AUTOMOBILE		.E WI UN		UNITED STATES		
~	-	Vehicle Identification Number		Make	Make		Year	Model			
6	0						2015	EQUINOX			
		Color RED - RED		Body Style 4D - 4DR	Body Style			Bus Use NOT A BUS			
	ш				Vehicle Damage						
F	C										
UNIT	EHICL	Extent Of Damage		NO DAM	AGE						
-	Ν										
	Towed Due To Damage Ve				Vehicle Removed By						
		NOT TOWED			TS TOWIN	G					
		What Driver Was Doing		Vehicle Fa	ictors						
	GOING STRAIGHT										
		Driver Prior Action Other			AFFLIVADLE						

19-13818

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	ш	Driver Actions FAILURE TO CONTRO	L							
UNIT	VEHICL									
Ξ	VEH									
		Owner Name			Owner Address					
5	01	NICHOLAS B STUDNICKA (608) 604-5136		32511 CTHB LONE ROCK, WI 53556, US						
	•									
	ļ	Sequence Of Even	ts							
	01	DITCH								
	02	Event								
	03	Event					_			
	04	Event					_			
_		Policy Holder								
UNIT	1	Insurance Company			Individual					
		NORTHWESTERN-NATIONAL-INS-CO-OF-MILWA			NICHOLAS STUDNICKA					
		Individual Driver KATHY KEILER (608) 546-6761			Citations Issued	Sex				
	Ļ				0	FEMALE				
⊢	NDIVIDUAL				Date of Birth	Race WHITE				
	DIVI	Address E4568A SPRING GREEN, WI 53955 , US			Driver License Number STATE: WISCONSIN					
	Z									
		- On I	Duty Crash		Safety Equipment					
	Saf	ety Equipment			SHOULDER & LAP BELT					
		Seat Position								
		1FRONT SEAT-LEFT Helmet Use	SIDE (DRIVI		Helmet Compliance					
		Fire Destantion			Tist Osmaliana					
		Eye Protection			Tint Compliance					
2	001	Injury NO	y Severity APPARENT	INJURY	Airbag NON DEPLOYED					
	1	Ejected	Ejection P	ath		Trapped/Extricated				
		NOT EJECTED Medical Transport	NOTEJE	CTED/NOT APPL	EMS Agency Identifier	EMS Run #				
		NOT TRANSPORTED								
		Hospital			Date of Death	Time of Death				
		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)								
		Distracted By Action NOT DISTRACTED								
			ing Unit #	Location						
		Prior Action								

19-13818

WISCONSIN MOTOR VEHICLE CRASH REPORT

UNIT	INDIVIDUAL	Action							
		Action Other					To/From School		
	r I	Drug & Alcohol NO	ed Alcohol Use	Suspected Drug Use					
	[Alcohol Test Given	Alcohol Test Type	_		Alcohol Test Results			
		TEST NOT GIVEN							
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results				
2	001	Drug Type							
		Individual Condition							
		APPEARED NORMAL							
	l	ndividual							
	_	Passenger KATHY KEILER		Citations Issued		Sex FEMALE			
∟	DUAI	(608) 546-6761		Date of Birth	Date of Birth Race WHITE				
UNIT	INDIVIDUAL	Address E4568A SPRING GREEN, WI 53955	5,US	Driver License Number STATE: WISCONSIN	N				
	Saf	On Duty	Crash	Safety Equipment					
		Seat Position		SHOULDER & LAP	BELT				
		3FRONT SEAT-RIGHT SI Helmet Use	DE (TRAIN ENGINEER	Helmet Compliance					
				Tist Compliance					
		Eye Protection		Tint Compliance					
5	002	Injury Se Injury NO APE	verity PARENT INJURY	Airbag NON DEPLOYED					
	_	Ejected	Ejection Path			Trapped/Extricated			
		NOT EJECTED Medical Transport	NOT EJECTED/NOT APPI	EMS Agency Identifier		NOT TRAPPED EMS Run #			
		NOT TRANSPORTED							
		Hospital		Date of Death		Time of Death			
	Distracted By Source								
		Distracted By Action							
		Non Motorist	Jnit # Location						
		Prior Action	<u>.</u>						

19-13818

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UNIT	INDIVIDUAL	Action						
	,	Action Other Drug & Alcohol	Suspected Alcohol Us	se	Suspected Drug Use			To/From School
	-	Alcohol Test Given TEST NOT GIVEN Drug Test Given TEST NOT GIVEN		Alcohol Test Type Drug Test Type		Drug Test Results	Alcohol Test Results	
6	002	Drug Type						
		Individual Condition	MAL					