

6TL0BC3B3P  
19-14028

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 <b>19-14028</b>		Investigating Officer/Deputy <b>DEPUTY W. VERTEIN</b>	
Crash Date <b>11/11/2019</b>		Crash Time <b>08:13 AM</b>		Date Arrived <b>11/11/2019</b>		Time Arrived <b>08:43 AM</b>	
Date Notified <b>11/11/2019</b>		Time Notified <b>08:14 AM</b>		Total Units <b>01</b>		Total Injured <b>01</b>	Total Killed <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 checked="" type="checkbox"/> Government Property		<input type="checkbox"/> Active School Zone		School Bus Related <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

Description

Diagram		Reconstruction By	
		Photos By	
		Additional Information <b>NONE</b>	

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

ON THE DESCRIBED DATE, TIME, AND LOCATION, UNIT 1 WAS TRAVELING NORTHBOUND. DUE TO SPEED AND SLIPPERY ROAD CONDITIONS, THE OPERATOR LOST CONTROL. UNIT 1 SPUN AROUND AND ENTERED THE WESTERNMOST DITCH LINE WHERE IT LANDED ON ITS PASSENGER SIDE AND CAME TO REST. THE OPERATOR COMPLAINED OF HEAD AND SHOULDER PAIN AND WAS TRANSPORTED TO THE LOCAL HOSPITAL.

Location

<b>ON USH12 EB 1050 FT S OF SAUK PRAIRIE RD IN THE TOWN OF PRAIRIE DU SAC IN SAUK COUNTY</b>	Latitude <b>43.27886888</b>	Longitude <b>-89.759072572</b>
	X Coordinate <b>276126.9375</b>	Y Coordinate <b>4795480.5</b>
	Structure Type	

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## Crash Scene

First Harmful Event <b>DITCH</b>		First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>NO COLLISION W/VEHICLE IN TRANSPORT</b>		Light Condition <b>DAYLIGHT</b>	
Road Surface Condition(s) <b>WET, SNOW</b>		Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>WEATHER CONDITIONS</b>			
Weather Condition(s) <b>SNOW</b>			
Animal Type		Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>		Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land		Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>NON-JUNCTION</b>	Intersection Type <b>NOT AN INTERSECTION</b>	

## Unit Summary

<b>UNIT 01</b>	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>	
	Vehicle Type <b>PASSENGER CAR</b>				Operating As Endorsements	
	Total Occs <b>1</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>YES</b>	Direction Of Travel <b>NORTHBOUND</b>	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit <b>55</b>	Total Lanes <b>2</b>	
	Most Harmful Event: Collision With <b>OVERTURN/ROLLOVER</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>LEVEL</b>	
	Truck Bus or HazMat <b>NO</b>					

<b>UNIT 01</b>	<b>Vehicle</b>					
	License Plate Number <b>8209638</b>		Plate Type <b>GOV - U S GOVERNMENT</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>	
	Vehicle Identification Number <b>1GBBS10E7J2314940</b>		Make <b>CHEVROLET</b>	Year <b>1988</b>	Model <b>LLV</b>	
	Color <b>WHI - WHITE</b>		Body Style <b>UK - UNKNOWN</b>		Bus Use <b>NOT A BUS</b>	
	Initial Contact Point <b>3--RIGHT SIDE MIDDLE</b>		Vehicle Damage			
	Extent Of Damage <b>MINOR DAMAGE</b>		<b>1--RIGHT FRONT CORNER, 2--RIGHT SIDE FRONT, 6--REAR</b>			
	Towed Due To Damage <b>TOWED BUT NOT DUE TO DISABLING DAMAG</b>		Vehicle Removed By <b>EVERETTS TOWING</b>			
	What Driver Was Doing <b>GOING STRAIGHT</b>		Vehicle Factors			
Driver Prior Action Other		<b>NOT APPLICABLE</b>				

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UNIT	VEHICLE	Driver Actions <b>SPEED TOO FAST/COND, FAILURE TO CONTROL, RAN OFF ROADWAY, FAILED TO KEEP IN DESIGNATED LANE</b>			
		Owner Name <b>SAUK CITY POST OFFICE (608) 643-3217</b>	Owner Address <b>739 WATER ST SAUK CITY, WI 53583 , US</b>		
<b>Sequence Of Events</b>					
UNIT	01	Event <b>CROSS CENTERLINE</b>			
	02	Event <b>RUN OFF ROADWAY LEFT</b>			
	03	Event <b>OVERTURN/ROLLOVER</b>			
	04	Event			
<b>Policy Holder</b>					
UNIT	Insurance Company <b>SELF-INSURED</b>		Government <b>SAUK CITY POST OFFICE</b>		
	<b>Individual</b>				
UNIT	INDIVIDUAL	Driver <b>ASHLEY MARIE FISKE (608) 370-1731</b>	Citations Issued <b>0</b>	Sex <b>FEMALE</b>	
			Date of Birth	Race <b>WHITE</b>	
	Address <b>54 9TH ST #1 PRAIRIE DU SAC, WI 53578 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>			
<b>Safety Equipment</b>					
UNIT	001	On Duty Crash	Safety Equipment		
		Seat Position <b>1--FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY</b>	<b>LAP BELT ONLY</b>		
		Helmet Use	Helmet Compliance		
		Eye Protection	Tint Compliance		
		<b>Injury</b>	Injury Severity <b>POSSIBLE INJURY</b>	Airbag <b>NON DEPLOYED</b>	
		Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>	
Medical Transport <b>EMS GROUND</b>	EMS Agency Identifier <b>6000555</b>	EMS Run #			
Hospital <b>SAUK PRAIRIE HOSP</b>	Date of Death	Time of Death			
<b>Distracted By</b>					
Distracted By Source					
Distracted By Action <b>UNKNOWN</b>					
<b>Non Motorist</b>					
Striking Unit #		Location			
Prior Action					

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<b>UNIT</b>	<b>INDIVIDUAL</b>	Action					
		Action Other			To/From School		
		<b>Drug &amp; Alcohol</b>		Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>		
		Alcohol Test Given <b>TEST NOT GIVEN</b>		Alcohol Test Type	Alcohol Test Results		
		Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type	Drug Test Results		
		Drug Type					
		Individual Condition		<b>APPEARED NORMAL</b>			
		<b>01</b>	<b>001</b>				

**Property Owner**

<b>PROP OWNER</b>	<b>01</b>	Government <b>TOWNSHIP OF PRAIRIE DU SAC</b> (608) 544-2406	Address <b>E10098 CTH PF</b> <b>PRAIRIE DU SAC, WI 53578 , US</b>

**Fixed Objects Struck**

<b>01</b>	Striking Unit <b>01</b>	Struck Object <b>DITCH</b>	Structure Number	Damage Tag Number <b>NA</b>