WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	•		Agency Crash Number 19-14814		Investigating Officer/Deputy DEPUTY E. KNULL			
Z Z	Crash Date 12/01/2019	Crash Time 04:15 PM		Date Arrived 12/01/2019		Time Arrived 04:21 PM			
B4X4	Date Notified 12/01/2019	Time Notified 04:15 PM		Total Units 01		Total Injured 02 Total Killed 00			
0 <u>B</u>	On Emergency Hit and Run		Lane Closure Work Zone		☐ Work Zone	Trailer or 1	Towed		Reporting Threshold
eTL	Government Active So		hool Zone School Bus Related NO		Tags				
	Reportable Crash Type DT4000 (STA		NDARD CRASH)		Amended			Secondary Crash	

Description Diagram SCALE 112 N REEDSBURG RD

Reconstruction By

Photos By

Additional Information **NONE**

OPERATOR NB ON USH 12 LOST CONTROL ON ICE COVERED OVERPASS TO N REEDSBURG RD. VEHICLE SPUN OUT AND WENT INTO THE EAST SIDE DITCH AND ROLLED TWICE AND ENDED ON ITS WHEELS FACING SOUTHEAST. BOTH OCCUPANTS SUSTAINED SUSPECTED MINOR INJURY AND WERE CHECKED OUT BY DELLS DELTON EMS BUT REFUSED TRANSPORT. VEHICLE WAS REMOVED BY MIKES TOWING AS IT SUSTAINED DISABLING DAMAGE

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ON USH12 WB 47 FT N OF N REEDSBURG RD IN THE TOWN OF DELTON IN SAUK COUNTY

Latitude Longitude -89.786995054 43.532551999 Y Coordinate X Coordinate 274803.65625 4823730.5 Structure Type NO STRUCTURE

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Crash Scene

1	First	st Harmful Event				First Harmful Event Location					
	DIT	тсн					SHOULDER RIGHT				
	Manr	anner of Collision					Light Condition				
	NO (O COLLISION W/VEHICLE IN TRANSPORT					DAYLIGHT				
	Road	Road Surface Condition(s)					Factor(s)				
	ICE	ICE									
	Envir	Environment Factor(s)					UDEACE	CONDITION	LOWET 16	N SNOW STUBL	
	WE	EATHER CONDITIONS				ROAD SURFACE CONDITION (WET, ICY, SNOW, SLUSH, ETC)					
	Weat	Neather Condition(s) SNOW									
	Anim	al Type			Relation To Trafficway TRAFFICWAY - NOT ON ROAD						
		h Classification - Location						Jurisdiction ISDICTION			
		I Land				Access Control Special Study					
						NO CONTROL					
	Withi	n Interchange Area	Junction Location NON-JUNCTION		Intersection	n Type INTERSE	CTION				
		Summary ==	NON-BONG HON		INOT AN	IIII	011014				
ď		Status —		Vehicle Ope	erating As C	assification		Unit Type			
	-	RANSIT		D CLASS	· -		TRUCK				
_	Vehic	cle Type						Operating A	s Endorser	ments	
9	UTIL	LITY TRUCK/PICKUP	TRUCK								
	Total Occs Train/Bus # Recorded		Total # Citat	Total # Citations Issued		Total Trailers To		Total Haz	Total HazMat Types		
	2		0	0		0		0			
	Insurance? Direction Of Travel			Pre CrashTire		Speed Limit		Total Lanes			
LIND	YES NORTHBOUND			Special Function		65	4 Emergency Motor Vehicle Use		ala I laa		
בֿ	Most Harmful Event: Collision With OVERTURN/ROLLOVER			NO SPEC		TION		NOT APPLICABLE			
	Traffic Way				Traffic Control			Traffic Cont	rol Inoperat	tive/Missing	
	DIVIDED HWY W/O TRAFFIC BARRIER			NO CONT Road Curva				NO Road Grade			
		Surface Type CONCRETE						LEVEL	;		
		Truck Bus or HazMat			STRAIGHT			LLVLL			
	NO										
	1	Vehicle									
	License Plate Number			Plate Type		St	Country of Is				
		LH4419		LTK - LIGHT TRUCK		K	WI	UNITED ST	TATES		
2	01	Vehicle Identification Number			Make CHEVROLET		Year	Model	0		
)	1GCDT138668302032 Color	-	Body Style		2006		COLORADO Bus Use			
		ONG - ORANGE		PK - PICI	PK - PICKUP			NOT A BUS			
_	I.E	Initial Contact Point NON-COLLISION		Vehicle Da	ımage						
LIND	H	Extent Of Damage		ALL ARE	AS						
_	NON-COLLISION Extent Of Damage DISABLING DAMAGE			ALL AREAS							
		Towed Due To Damage Vehicle Removed By									
		What Driver Was Doing	ABLING DAMAGE	Vehicle Fa							
		What Driver Was Doing GOING STRAIGHT		venicie Fa	CIUIS						
		Driver Prior Action Other		NOT APP	PLICABLE	<u> </u>					
				•							

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Crash Date 12/01/2019

Crash Time 04:15 PM

UNIT	VEHICLE	Driver Actions SPEED TOO FAST/COND								
ס	VEF									
01	01	Owner Name GRACE KATHRYN REII (414) 265-9241	MER		Owner Address 14290 GREEN BAY RD MEQUON, WI 53097 , US					
		Sequence Of Events	S							
	01	Event DITCH								
	02	Event OVERTURN/ROLLOVER								
	03	Event								
	04	Event								
_		Policy Holder								
L		Insurance Company			Individual					
		STATE-FARM-GENERAL-INS-CO		GRACE REIMER						
		Individual Driver GRACE KATHRYN REIMER		Citations Issued	Sex					
	_			0	FEMALE					
_	NDIVIDUAL	(414) 265-9241		Date of Birth	Race WHITE					
L N		Address 14290 GREEN BAY RD MEQUON, WI 53097 , US		Driver License Number						
	N			STATE: WISCONSIN COUNTRY: UNITED STATES						
		On Duty Crash			Safety Equipment					
	Saf	fety Equipment								
		Seat Position 1FRONT SEAT-LEFT SIDE (DRIVER/MOTORCY		R/MOTORCY	SHOULDER & LAP BELT					
		Helmet Use		Helmet Compliance						
		Eye Protection			Tint Compliance					
_	_	Injury	Severity		Airbag					
6	00	Injury _{SUSI}	PECTED MII	NOR INJURY	NON DEPLOYED					
		Ejected	Ejection Pa	ath		Trapped/Extricated				
		NOT EJECTED Medical Transport	NOTEJE	CTED/NOT APP	EMS Agency Identifier	NOT TRAPPED EMS Run #				
		NOT TRANSPORTED								
		Hospital		Date of Death	Time of Death					
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)									
		NOT DISTRACTED								
		Non Motorist Strikir	ng Unit #	Location						
		Prior Action								

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To/From School			
Race WHITE			
Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
NOT TRAPPED			
EMS Run #			

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LIND	1						
\supset	\leq						
	INDIVIDUAL						
	_						
		Action Other					To/From School
		Suspected Alcohol U	Se.	Suspected Drug Use			
	L	Drug & Alcohol NO		NO			
		Alcohol Test Given	Alcohol Test Type			Alcohol Test Results	
		TEST NOT GIVEN					
		Drug Test Given	Drug Test Type		Drug Test Results		
		TEST NOT GIVEN					
_	2	Drug Type	•		•		
2	002						
		Individual Condition					
		ADDEADED NODMAL					
		APPEARED NORMAL					