



6TL097RB4B

20-00877

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

**Location**

|   |                                       |                                   |
|---|---------------------------------------|-----------------------------------|
| ON SCOTT LN<br>398 FT W<br>OF STH23 WB<br>IN THE TOWN OF DELTON<br>IN SAUK COUNTY | Latitude<br><b>43.579511708</b>       | Longitude<br><b>-89.824808949</b> |
|   | X Coordinate<br><b>271925.40625</b>   | Y Coordinate<br><b>4829049.5</b>  |
|   | Structure Type<br><b>NO STRUCTURE</b> |                                   |

**Crash Scene**

|  |   |   |
|--|---|---|
| First Harmful Event<br><b>DITCH</b>                                    | First Harmful Event Location<br><b>SHOULDER LEFT</b>                                |   |
| Manner of Collision<br><b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b> | Light Condition<br><b>DARK/UNLIT</b>  |   |
| Road Surface Condition(s)<br><b>SNOW, SLUSH</b>                        | Roadway Factor(s)<br><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</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<br><b>0</b> |
|             | Insurance?<br><b>YES</b>                           | Direction Of Travel<br><b>WESTBOUND</b>               | <input type="checkbox"/> <b>Pre CrashTire Mark</b> | Speed Limit<br><b>35</b>                             | Total Lanes<br><b>2</b>        |
|             | Most Harmful Event: Collision With<br><b>DITCH</b> | Special Function<br><b>NO SPECIAL FUNCTION</b>        |  | Emergency Motor Vehicle Use<br><b>NOT APPLICABLE</b> |                                |
|             | Traffic Way<br><b>TWO-WAY, NOT DIVIDED</b>         | Traffic Control<br><b>NO CONTROL</b>                  |  | Traffic Control Inoperative/Missing<br><b>NO</b>     |                                |
|             | 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>                   |   |  |  |                                |

**Vehicle**

|             |                |           |   |                                       |                     |   |
|-------------|----------------|-----------|---|---------------------------------------|---------------------|---|
| <b>UNIT</b> | <b>VEHICLE</b> | <b>01</b> | License Plate Number<br><b>AAK5585</b>                    | Plate Type<br><b>AUT - AUTOMOBILE</b> | St<br><b>WI</b>     | Country of Issuance<br><b>UNITED STATES</b> |
|             |                |           | Vehicle Identification Number<br><b>1G1JC1247Y7405785</b> | Make<br><b>CHEVROLET</b>              | Year<br><b>2000</b> | Model<br><b>CAVALIER</b>                    |
|             |                |           | Color   | Body Style<br><b>CP - COUPE</b>       | Bus Use             |   |
|             |                |           | Initial Contact Point<br><b>00 - NON-COLLISION</b>        | Vehicle Damage                        |                     |   |
|             |                |           | Extent Of Damage<br><b>NO DAMAGE</b>                      | <b>00 - NO DAMAGE</b>                 |                     |   |

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|   |  |  |  |                      |
|---|--|--|--|----------------------|
| UNIT<br>VEHICLE                               | Towed Due To Damage<br><b>NOT TOWED</b>                                  |  | Vehicle Removed By<br><b>CRAIGS TOWING</b>                                     |                      |
|   | What Driver Was Doing<br><b>U TURN</b>                                   |  | Vehicle Factors  |                      |
|   | Driver Prior Action Other  |  | <b>NOT APPLICABLE</b>  |                      |
|   | Driver Actions<br><b>NO CONTRIBUTING ACTION</b>                          |  |  |                      |
| 01  | Owner Name<br><b>TRISTA KAY HOPP<br/>(715) 540-6586</b>                  |  | Owner Address<br><b>1241 WASHINGTON ST<br/>WISCONSIN RAPIDS, WI 54494 , US</b> |                      |
|   | <b>Sequence Of Events</b>  |  |  |                      |
| 01<br>02<br>03<br>04                          | Event<br><b>DITCH</b>  |  |  |                      |
|   | Event  |  |  |                      |
|   | Event  |  |  |                      |
|   | Event  |  |  |                      |
| UNIT  | <b>Policy Holder</b>   |  |  |                      |
|   | Insurance Company<br><b>PROGRESSIVE-CLASSIC-INS-CO</b>                   |  | Individual<br><b>TRISTA HOPP</b>   |                      |
| UNIT<br>INDIVIDUAL                            | <b>Individual</b>  |  |  |                      |
|   | Driver<br><b>TRISTA KAY HOPP<br/>(715) 540-6586</b>                      |  | Citations Issued<br><b>0</b>   | Sex<br><b>FEMALE</b> |
|   | Address<br><b>1241 WASHINGTON ST<br/>WISCONSIN RAPIDS, WI 54494 , US</b> |  | Date of Birth  | Race<br><b>WHITE</b> |
|   | Driver License Number  |  | <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>                                 |                      |
| 01<br>001                                     | <b>Safety Equipment</b>  |  | On Duty Crash  |                      |
|   | Row<br><b>01 - FRONT ROW</b>   |  | Seat Position<br><b>07 - LEFT</b>  |                      |
|   | Helmet Use   |  | Safety Equipment<br><b>SHOULDER &amp; LAP BELT</b>                             |                      |
|   | Eye Protection   |  | Helmet Compliance  |                      |
|   | Injury<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>                             |                      |
| Medical Transport<br><b>NOT TRANSPORTED</b>   |  | Trapped/Extricated<br><b>NOT TRAPPED</b>                       |  |                      |
| Hospital                                      |  | EMS Agency Identifier  | EMS Run #  |                      |
| 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> |  |  |  |                      |

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|             |                     |                           |  |                                    |                                 |  |
|-------------|---------------------|---------------------------|--|------------------------------------|---------------------------------|--|
| <b>UNIT</b> | <b>Non Motorist</b> | Striking Unit #           | Location                                       |                                    |                                 |  |
|             |                     | Prior Action              |  |                                    |                                 |  |
|             | <b>INDIVIDUAL</b>   | Action                    |  |                                    |                                 |  |
|             |                     | Action Other              |  |                                    | To/From School                  |  |
|             |                     | <b>Drug &amp; Alcohol</b> |  | Suspected Alcohol Use<br><b>NO</b> | Suspected Drug Use<br><b>NO</b> |  |
|             | <b>01</b>           | <b>001</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> |                                    |                                 |  |