

6TL09H5JR8
20-02334

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

6TL09H5JR8

| | | | | | |
|--|--|---------------------------------------|--|--|--|
| Document Number Override | | Primary Crash Document # | Agency Crash Number 20-02234 | Investigating Officer/Deputy DEPUTY S. MESSNER | |
| Crash Date 02/28/2020 | | Crash Time 02:30 PM | Date Arrived 03/02/2020 | Time Arrived 12:00 PM | |
| Date Notified 03/02/2020 | | Time Notified 11:34 AM | Total Units 01 | Total Injured 00 | Total Killed 00 |
| <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 | Tags | |
| <input type="checkbox"/> Reportable | Crash Type DT4000 (STANDARD CRASH) | | <input type="checkbox"/> Amended | <input type="checkbox"/> Secondary Crash | |

Description

| | |
|---|---|
| <p>Diagram</p> <p>CTH B, west of Dane Hill Road</p> | Reconstruction By |
| | Photos By DEP. S. MESSNER |
| | Additional Information PHOTOS |

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

ON FRIDAY, FEBRUARY 28, AT APPROXIMATELY 2:30 PM, UNIT 1, BEARING WISCONSIN REGISTRATION PLATE # ABU4998, WAS BEING DRIVEN BY GEORGIA WEITHE, WESTBOUND ON CTH B, BEAR CREEK, SAUK COUNTY, WISCONSIN. UNIT 1 CROSSED THE CENTER LINE AND PROCEEDED OFF OF THE LEFT SIDE OF THE ROADWAY. UNIT 1 WENT INTO THE DITCH AND THROUGH A FENCE, OWNED BY JEFFREY SPRECHER. UNIT 1 CAME TO A REST. UNIT 1 WAS REMOVED BY GEORGE'S TOWING. THE DRIVER WAS PICKED UP BY HER HUSBAND, HARMUT WEITHE. MINOR DAMAGE OCCURRED TO UNIT 1 WHICH DID NOT ARISE TO THE THRESHOLD OF A REPORTABLE ACCIDENT, BUT AN UNKNOWN AMOUNT OF DAMAGE OCCURRED TO THE FENCE. THE DRIVER INFORMED DEPUTY S. MESSNER THAT SHE FELL ASLEEP WHILE DRIVING WHEN SHE WAS COMING BACK TO HER RESIDENCE. THE DRIVER ADVISED SHE WAS NOT INJURED FROM THE ACCIDENT.

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Location

| | | |
|--|---------------------------------------|-----------------------------------|
| ON CTHB 0.54 MI W OF BEAR VALLEY RD IN THE TOWN OF BEAR CREEK IN SAUK COUNTY | Latitude 43.251463496 | Longitude -90.173305457 |
| | X Coordinate 242398.15625 | Y Coordinate 4793630.5 |
| | Structure Type NO STRUCTURE | |

Crash Scene

| | | |
|--|--|---|
| First Harmful Event DITCH | First Harmful Event Location SHOULDER LEFT | |
| Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT | Light Condition DAYLIGHT | |
| Road Surface Condition(s) DRY | Roadway Factor(s) NONE | |
| Environment Factor(s) NONE | | |
| Weather Condition(s) CLEAR | | |
| Animal Type | Relation To Trafficway NON TRAFFICWAY - OTHER | |
| Crash Classification - Location PRIVATE PROPERTY | Crash Classification - Jurisdiction PRIVATE PROPERTY | |
| Tribal Land | Access Control NO CONTROL | Special Study |
| Within Interchange Area NO | Junction Location NON-JUNCTION | Intersection Type NOT AN INTERSECTION |

Unit Summary

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

| | | | | | | |
|---|----------------|--|--|---------------------------------------|---------------------|---|
| UNIT 01 | Vehicle | | | | | |
| | 01 | License Plate Number ABU4998 | | Plate Type AUT - AUTOMOBILE | St WI | Country of Issuance UNITED STATES |
| | | Vehicle Identification Number 2C4RDGBG5DR618523 | | Make DODGE | Year 2013 | Model GRAND CARA |
| | VEHICLE | Color BLK - BLACK | | Body Style VN - VAN | | Bus Use |
| | | Initial Contact Point 12 - FRONT | | Vehicle Damage | | |
| Extent Of Damage MINOR DAMAGE | | 01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT | | | | |

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|--|---|---|--|--|
| UNIT VEHICLE | Towed Due To Damage TOWED DUE TO DISABLING DAMAGE | | Vehicle Removed By GEORGES AUTO BODY | |
| | What Driver Was Doing GOING STRAIGHT | | Vehicle Factors | |
| | Driver Prior Action Other | | NOT APPLICABLE | |
| | Driver Actions RAN OFF ROADWAY, OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER | | | |
| 01 | 01 | Owner Name GEORGIA MAE WEITHE (608) 583-3279 | | Owner Address 32724 STATE HWY 130 LONE ROCK, WI 53556 , US |
| | | Sequence Of Events | | |
| 01 | 01 | Event CROSS CENTERLINE | | |
| | | Event RUN OFF ROADWAY LEFT | | |
| | | Event DITCH | | |
| | | Event FENCE | | |
| UNIT | Policy Holder | | | |
| | Insurance Company WEST-BEND-MUTUAL-INS-CO | | Individual GEORGIA WEITHE | |
| UNIT | Individual | | | |
| | Driver GEORGIA MAE WEITHE (608) 583-3279 | | Citations Issued 1 | Sex FEMALE |
| | Address 32724 STATE HWY 130 LONE ROCK, WI 53556 , US | | Date of Birth | Race WHITE |
| | Driver License Number | | STATE: WISCONSIN COUNTRY: UNITED STATES | |
| 01 | 001 | Safety Equipment | | On Duty Crash |
| | | Safety Equipment SHOULDER & LAP BELT | | Row 01 - FRONT ROW |
| | | Seat Position 07 - LEFT | | Helmet Use |
| | | Helmet Compliance | | Eye Protection |
| | | Tint Compliance | | Injury Severity NO APPARENT INJURY |
| | | Airbag NON DEPLOYED | | Ejected NOT EJECTED |
| Ejection Path NOT EJECTED/NOT APPLICABLE | | Trapped/Extricated NOT TRAPPED | | |
| Medical Transport NOT TRANSPORTED | | EMS Agency Identifier | EMS Run # | |
| Hospital | | Date of Death | Time of Death | |
| Distracted By | | Distracted By Source OTHER DISTRACTION (ANIMAL, FOOD, GROOMING) | | |
| Distracted By Action OTHER ACTION (LOOKING AWAY FROM TASK ETC) | | | | |

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|-------------------------------|----------------------------|--|--|---|--------------------------------|--|
| UNIT | Non Motorist | Striking Unit # | Location | | | |
| | | Prior Action | | | | |
| | INDIVIDUAL | Action | | | | |
| | | Action Other | | | To/From School | |
| | | Drug & Alcohol | Suspected Alcohol Use NO | Suspected Drug Use NO | | |
| | | Alcohol Test Given TEST NOT GIVEN | Alcohol Test Type | | Alcohol Test Results | |
| | 01 | 001 | Drug Test Given TEST NOT GIVEN | Drug Test Type | Drug Test Results | |
| | | | Drug Type | | | |
| | | | Individual Condition APPEARED NORMAL | | | |
| | 01 | Violations | | | | |
| UTC Number BD757146 | | Issue To? 001 | Statute Number 346.89(1) | Description INATTENTIVE DRIVING | | |
| Property Owner | | | | | | |
| PROP OWNER | 01 | Individual JEFFREY A SPRECHER (608) 345-8274 | | Address E3133 MERCER RD SPRING GREEN, WI 53588 , US | | |
| | | Fixed Objects Struck | | | | |
| 01 | Striking Unit 01 | Struck Object FENCE | | Structure Number | Damage Tag Number NA | |