

6TL0BZLVN7

20-02526

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 20-02526	Investigating Officer/Deputy SERGEANT S. SCHRAM	
Crash Date 03/07/2020		Crash Time 04:47 AM	Date Arrived 03/07/2020	Time Arrived 05:13 AM	
Date Notified 03/07/2020		Time Notified 04:47 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 NO		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram <p style="text-align: center;">Not to Scale </p> <p>The diagram shows a Y-intersection. Dawn Road is on the left, and W. Hickory Rd is at the bottom. Unit 1 is shown as a vehicle icon at the intersection.</p>	Reconstruction By
	Photos By
	Additional Information NONE

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

UNIT 1 WAS TRAVELING EB ON DAWN ROAD APPROACHING THE INTERSECTION WITH WEST HICKORY ROAD. THE ROADWAY IN THIS AREA IS A STEEP DOWNHILL GRADE INTO A Y INTERSECTION. UNIT 1 SLID THROUGH THE INTERSECTION AND HIT THE EMBANKMENT CAUSING FUNCTIONAL DAMAGE TO THE FRONT END. UNIT 1 REMOVED FROM SCENE BY OPERATOR.

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Location

ON HICKORY RD 26 FT S OF DAWN RD IN THE TOWN OF FRANKLIN IN SAUK COUNTY	Latitude 43.336383445	Longitude -90.088204709
	X Coordinate 249655.796875	Y Coordinate 4802803
	Structure Type	

Crash Scene

First Harmful Event EMBANKMENT	First Harmful Event Location ROADSIDE	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DARK/UNLIT	
Road Surface Condition(s) SAND, GRAVEL	Roadway Factor(s) LOOSE GRAVEL	
Environment Factor(s) NONE		
Weather Condition(s) CLEAR		
Animal Type	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location INTERSECTION	Intersection Type Y-INTERSECTION

Unit Summary

UNIT	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type (SPORT) UTILITY VEHICLE	Operating As Endorsements			
	Total Occs 02	Train/Bus # Recorded	Total # Citations Issued 00	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 02
	Most Harmful Event: Collision With EMBANKMENT	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 CURVE LEFT		Road Grade DOWNHILL	
	Truck Bus or HazMat NO				

UNIT	VEHICLE	Vehicle			
		License Plate Number AFM1483	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1FMCU0F76KUB51079	Make FORD	Year 2019	Model ESCAPE
		Color SIL - SILVER (ALUMINUM)	Body Style UT - SPORT UTILITY VEHICLE		Bus Use
		Initial Contact Point 12 - FRONT	Vehicle Damage 01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT		
Extent Of Damage FUNCTIONAL DAMAGE					

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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions FAILURE TO CONTROL, RAN OFF ROADWAY			
01 01	Owner Name CRISTIN L DOROW (608) 434-7200		Owner Address 400 SOUTH MAIN STREET LOGANVILLE, WI 53943 , US	
	Sequence Of Events			
01 01	01	Event EMBANKMENT		
	02	Event		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company PROGRESSIVE-CLASSIC-INS-CO		Individual CRISTIN DOROW	
UNIT INDIVIDUAL	Individual			
	Driver CRISTIN L DOROW (608) 434-7200		Citations Issued 00	Sex FEMALE
	Address 400 SOUTH MAIN STREET LOGANVILLE, WI 53943 , US		Date of Birth [REDACTED]	Race WHITE
	Driver License Number [REDACTED]		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 Compliance	
	Helmet Use		Tint Compliance	
	Eye Protection		Airbag DEPLOYED-FRONT	
	Injury		Injury Severity NO APPARENT INJURY	Trapped/Extricated NOT TRAPPED
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		EMS Agency Identifier
Medical Transport NOT TRANSPORTED		Date of Death		EMS Run #
Hospital		Time of Death		
Distacted By		Distacted By Source NOT APPLICABLE (NOT DISTRACTED)		
Distacted By Action NOT DISTRACTED				

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UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
		Action Other				To/From School	
01	001	Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO		
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results		
		Drug Type					
		Individual Condition APPEARED NORMAL					
		Individual					
		Passenger ALLEN M DIXON (608) 432-9164			Citations Issued 00	Sex MALE	
		Address 400 SOUTH MAIN STREET LOGANVILLE, WI 53943 , US			Date of Birth [REDACTED]	Race WHITE	
		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
		Safety Equipment		On Duty Crash	Safety Equipment		
Row 01 - FRONT ROW	Seat Position 09 - RIGHT	SHOULDER & LAP BELT					
Helmet Use		Helmet Compliance					
Eye Protection		Tint Compliance					
01	002	Injury		Injury Severity NO APPARENT INJURY	Airbag DEPLOYED-FRONT		
		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			
		Distracted By Action					
Non Motorist		Striking Unit #	Location				

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UNIT	Prior Action		
	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
	Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results
	Drug Type		
	Individual Condition		
	UNDER THE INFLUENCE OF MEDICATIONS/DRUGS/ ALCOHOL		
	01	002	