

6TL0D0GSFH

20-05133

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 20-05133	Investigating Officer/Deputy DEPUTY S. FINNEGAN	
Crash Date 06/01/2020		Crash Time 02:06 PM	Date Arrived 06/01/2020	Time Arrived 02:18 PM	
Date Notified 06/01/2020		Time Notified 02:07 PM	Total Units 01	Total Injured 02	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

<p>Diagram</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 W/B ON USH 14 WHEN DRIVER STATED A GUST OF WIND PUSHED HIM TOWARDS THE CENTER LINE SO HE STEERED THE WHEEL TOWARDS THE DITCH AND WENT TOO FAR. THE PASSENGER SIDE FRONT TIRE CAUGHT THE LIP OF THE BLACKTOP AND PULLED HIM INTO THE DITCH. HE COULD NOT RECOVER BEFORE HITTING A DRIVEWAY WHICH SENT HIM AIRBORNE INTO THE DITCH ALSO ON THE NORTH SIDE AND THE JEEP ROLLED OVER COMING TO REST ON ITS SIDE.

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Location

ON USH14 WB 173 FT S OF RAINBOW RD IN THE TOWN OF SPRING GREEN IN SAUK COUNTY	Latitude 43.179172632	Longitude -90.055342317
	X Coordinate 251681.265625	Y Coordinate 4785244.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event OVERTURN/ROLLOVER	First Harmful Event Location SHOULDER RIGHT	
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 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 NON-JUNCTION	Intersection Type NOT AN 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 2	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel WESTBOUND	<input checked="" type="checkbox"/> Pre CrashTire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With OVERTURN/ROLLOVER	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	VEHICLE	Vehicle			
		License Plate Number 863UXX	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1C4BJWEGXFL691303	Make JEEP	Year 2015	Model WRANGLER U
		Color SIL - SILVER (ALUMINUM)	Body Style UT - SPORT UTILITY VEHICLE		Bus Use
		Initial Contact Point 11 - LEFT FRONT CORNER	Vehicle Damage 15 - ALL AREAS		
		Extent Of Damage DISABLING DAMAGE			

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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 FAILURE TO CONTROL, SWERVED OR AVOIDED DUE TO WIND, SLIPPERY SURFACE, MOTOR VEHICLE, OBJECT, NON-MOTORIST IN ROADWAY, ETC.				
01	01	Owner Name EMILY J PHETTEPLACE (608) 739-2716		Owner Address 562 E SEMINARY ST RICHLAND CENTER, WI 53581 , US	
		Sequence Of Events			
UNIT INDIVIDUAL	01	01	Event RUN OFF ROADWAY RIGHT		
		02	Event OVERTURN/ROLLOVER		
		03	Event		
		04	Event		
UNIT	Policy Holder				
	Insurance Company GEICO-CASUALTY-CO		Individual SCOTT PHETTEPLACE		
UNIT	INDIVIDUAL	Individual			
		Driver SCOTT ARTHUR PHETTEPLACE (608) 739-2716		Citations Issued 0	Sex MALE
		Address 562 E SEMINARY ST RICHLAND CENTER, WI 53581 , 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		Injury Severity SUSPECTED MINOR 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			
Distracted By Action UNKNOWN					

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
01	001	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 APPEARED NORMAL					
		Individual					
		Passenger BAILEY T PHETTEPLACE (608) 739-2716			Citations Issued 0		Sex MALE
		Address 562 E SEMINARY ST RICHLAND CENTER, WI 53581 , US			Date of Birth		Race WHITE
		Driver License Number					
01	002	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	
		Injury		Injury Severity SUSPECTED MINOR 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					
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 APPEARED NORMAL			
	01	002		