WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash Document #		Agency Crash Number 20-05729		Investigating Officer/Deputy DEPUTY K. MUELLER		
3	Crash Date 06/15/2020	Crash Time 11:50 AM			Arrived 5/2020	Time Arrived 12:05 PM		
61L0D7W13	Date Notified 06/15/2020				Units	Total Injured Total Kille		əd
	On Emergency	tand Run ☐ Lane Close☐ Active School Zone		School Bus Related NO		Trailer or Towed Report Three		Reporting Threshold
	Government Property							
	✓ Reportable	Crash Type DT4000 (STA	Crash Type DT4000 (STANDARD CRASH)			Amended		Secondary Crash
	Description ————————————————————————————————————							n By
	NOT TO SCALE				ed any CJIS data in th	Ad	otos By	rmation
	UNIT 1 WAS DRIVING NORTH ON AN EMBANKMENT, STRUCK A FI					O MISS A DEER. UNI	T 1 WENT C	OFF THE ROADWAY, DOWN

Location

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

Crash Date 06/15/2020

Crash Time 11:50 AM

49 OI IN	ON STH130 NB 491 FT S OF CROAL HOLLOW RD IN THE TOWN OF BEAR CREEK IN SAUK COUNTY						Latitude		7860483 inate				
Cr	rash Scene												
Fii	irst Harmful Event					First Harm	iful Event L	ocation					
Ma	anner of Collision					Light Cond	dition						
	0 - NO COLLISION W		LE IN TRANSPORT			DAYLIGHT							
	oad Surface Condition(s))				Roadway Factor(s)							
DI	DRY												
Er	nvironment Factor(s)												
Al	NIMAL (S) IN ROAD	WAY				NONE							
W	eather Condition(s)												
CI	LEAR												
Ar	nimal Type					Relation To Trafficway TRAFFICWAY - ON ROAD							
	EER												
	rash Classification - Loca UBLIC PROPERTY	ation				Crash Classification - Jurisdiction							
	ribal Land						NO SPECIAL JURISDICTION Access Control Special Study			Special Study			
						NO CONTROL			openia: etady				
W	ithin Interchange Area	Junc	ction Location	Intersection Type									
N	0	NON	N-JUNCTION		NOT AN	INTERSE	CTION						
Ur	nit Summary							_					
	•									2 . 31.			
Ur	nit Status				rating As CI	lassification		7.	DII E				
Ur IN	nit Status N TRANSIT			Vehicle Ope D CLASS	erating As Cl	assification		Unit Type AUTOMOI Operating A		ments			
Ur IN Ve	nit Status				erating As Cl	assification		AUTOMOI		nents			
Ur IN Ve P/ To	nit Status N TRANSIT ehicle Type ASSENGER CAR otal Occs	Tra	ain/Bus # Recorded	D CLASS Total # Citat			Total Trail	AUTOMOI Operating A	s Endorser Total Haz	ments Mat Types			
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Uring Very Prince of the control of	nit Status N TRANSIT ehicle Type ASSENGER CAR otal Occs surance? ES ost Harmful Event: Collis ITCH raffic Way WO-WAY, NOT DIVIE urface Type LACKTOP (BITUMIN ruck Bus or HazMat O Vehicle License Plate Numbe AEF5677 Vehicle Identification 1G8AJ52F33Z133 Color GRN - GREEN Initial Contact Point	Dir No sion With	rection Of Travel	Total # Citat 0 Pre 0 Special Funn NO SPECI Traffic Contr NO CONTI Road Curvat CURVE LE Plate Type AUT - AU Make SATURN Body Style 4D - 4DR Vehicle Dai 01 - RIGH	ions Issued CrashTire Mark ction IAL FUNC rol ROL ture EFT TOMOBIL mage	TION	Total Trail 0 Speed Lin 55 St WI Year 2003	AUTOMOI Operating A lers Init Emergency NOT APPI Traffic Conti NO Road Grade HILLCRES Country of Is: UNITED ST Model ION LEVEL Bus Use	Total Haz 0 Total Lane 2 Motor Vehi LICABLE rol Inoperat	Mat Types es icle Use itive/Missing - LEFT SIDE FRONT,			

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

		Towed Due To Damage	INO DAMAGE		nicle Removed By				
		TOWED DUE TO DISABL	ING DAMAGE		NESON SERVICE				
		What Driver Was Doing NEGOTIATING CURVE		ver	nicle Factors				
		Driver Prior Action Other		- NC	OT APPLICABLE				
		Driver Frior Action Other		'''	7.7.1.1.2.07.3.2.2				
		Driver Actions							
	ш	FAILURE TO CONTROL							
╘	占								
UNIT	VEHICLE								
	7								
		Owner Name	1		Owner Address				
01	2	SHYANNE RAINE ALLEN (608) 579-0002			26656 STATE HWY 130 HILLPOINT, WI 53937, US				
0	0	(400) 6.0 0002							
	,	Sequence Of Events Event							
	6	EMBANKMENT							
		Event							
	02	DOWNHILL RUNAWAY							
	~	Event							
	03	FENCE							
	4	Event							
	9	DITCH							
_	ı	Policy Holder							
UNIT		Insurance Company			Individual				
)		PROGRESSIVE-CASUALTY-INS-CO			SHYANNE ALLEN				
	1	Individual							
		Driver			Citations Issued	Sex			
	ب	SHYANNE RAINE ALLEN (608) 579-0002)	FEMALE			
	A				Date of Birth	Race			
	INDIVIDUAL								
UNIT	\leq	Address 26656 STATE HWY 130 HILLPOINT, WI 53937, US			Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES				
	Z								
		On Dut	/ Crash		Safety Equipment				
	Sai	On Dut	/ Crash		Safety Equipment				
	Sat	fety Equipment Row	/ Crash		Safety Equipment SHOULDER & LAP BELT				
	Sat	fety Equipment							
	Sat	fety Equipment Row	Seat Position						
	Sat	Row 01 - FRONT ROW Helmet Use	Seat Position	\$	SHOULDER & LAP BELT Helmet Compliance				
	Sat	Row 01 - FRONT ROW	Seat Position	\$	SHOULDER & LAP BELT				
		Row 01 - FRONT ROW Helmet Use Eye Protection	Seat Position 07 - LEFT	: 	Helmet Compliance				
01	Sat	Row 01 - FRONT ROW Helmet Use Eye Protection	Seat Position 07 - LEFT	; 	Helmet Compliance Fint Compliance				
01		Row 01 - FRONT ROW Helmet Use Eye Protection	Seat Position 07 - LEFT	; 	Helmet Compliance	Trapped/Extricated			
10		Row 01 - FRONT ROW Helmet Use Eye Protection Injury S	Seat Position 07 - LEFT everity PARENT INJURY	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Helmet Compliance Fint Compliance Airbag NON DEPLOYED	Trapped/Extricated NOT TRAPPED			
01		Row 01 - FRONT ROW Helmet Use Eye Protection Injury NO AF Ejected NOT EJECTED Medical Transport	Seat Position 07 - LEFT everity PPARENT INJURY Ejection Path	S S S S S S S S S S S S S S S S S S S	Helmet Compliance Fint Compliance Airbag NON DEPLOYED				
01		Row 01 - FRONT ROW Helmet Use Eye Protection Injury NO AF Ejected NOT EJECTED Medical Transport NOT TRANSPORTED	Seat Position 07 - LEFT everity PPARENT INJURY Ejection Path	;	Helmet Compliance Fint Compliance Airbag NON DEPLOYED CABLE EMS Agency Identifier	NOT TRAPPED EMS Run #			
01		Row 01 - FRONT ROW Helmet Use Eye Protection Injury NO AF Ejected NOT EJECTED Medical Transport	Seat Position 07 - LEFT everity PPARENT INJURY Ejection Path	;	SHOULDER & LAP BELT Helmet Compliance Fint Compliance Airbag NON DEPLOYED CABLE	NOT TRAPPED			
01		Row 01 - FRONT ROW Helmet Use Eye Protection Injury NO AF Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital	Seat Position 07 - LEFT everity PARENT INJURY Ejection Path NOT EJECTED/NOT	;	Helmet Compliance Fint Compliance Airbag NON DEPLOYED CABLE EMS Agency Identifier	NOT TRAPPED EMS Run #			
01		Row 01 - FRONT ROW Helmet Use Eye Protection Injury NO AF Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital	Seat Position 07 - LEFT everity PPARENT INJURY Ejection Path NOT EJECTED/NOT /	;	Helmet Compliance Fint Compliance Airbag NON DEPLOYED CABLE EMS Agency Identifier	NOT TRAPPED EMS Run #			
01		Row 01 - FRONT ROW Helmet Use Eye Protection Injury NO AF Ejected NOT EJECTED Medical Transport NOT TRANSPORTED Hospital	Seat Position 07 - LEFT everity PPARENT INJURY Ejection Path NOT EJECTED/NOT /	;	Helmet Compliance Fint Compliance Airbag NON DEPLOYED CABLE EMS Agency Identifier	NOT TRAPPED EMS Run #			

Crash Date **06/15/2020**Crash Time **11:50 AM**

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

		Non Motor	Striking Unit #	Location						
		Prior Action		1						
İ		Action								
	JAL									
L	INDIVIDUAL									
_	IND									
		A stinus Others						To /France Cale and		
		Action Other						To/From School		
	Ĺ	Orug & Alcoh	Suspected Alcohol U NO	se	Suspected Drug Use NO					
	Alcohol Test Given Alcohol Test Ty			Alcohol Test Type			Alcohol Test Results			
	Drug Test Given Drug Test Ty TEST NOT GIVEN		Drug Test Type		Drug Test Results					
2	001	Drug Type								
		Individual Condition	on							
		APPEARED NORMAL								
		operty Owner								
PROP OWNER 01	Indiv JER (608	idual RY G KAST 8) 896-4733			Address S7898 STATE ROAD 1 HILLPOINT, WI 53937	130 , US				
	Fixe	d Objects St	ruck							
	5	Striking Unit 01	Struck Object FENCE				Structure Number	Damage Tag Number		