

6TL0B8M7WX

20-07269

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

6TL0B8M7WX

Document Number Override		Primary Crash Document #		Agency Crash Number 20-07269		Investigating Officer/Deputy DEPUTY B. MEARS	
Crash Date 07/24/2020		Crash Time 05:35 PM		Date Arrived 07/24/2020		Time Arrived 05:39 PM	
Date Notified 07/24/2020		Time Notified 05:39 PM		Total Units 01		Total Injured 01	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		Reconstruction By	
		Photos By DEPUTY MEARS	
		Additional Information PHOTOS	

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

UNIT WAS NB ON CTH G NORTH OF CTH K NEGOTIATING A CURVE. WHEN UNIT CROSSED THE CENTER LINE AND TRAVELED OFF THE LEFT/WEST SIDE OF THE ROADWAY. UNIT CONTINUED NW ABOUT 150 FT WHERE IT THEN WENT ACROSS A DRIVEWAY AT S4309 CTH G. UNIT CONTINUE NW, INTO THE DITCH, THEN CONTINUED NW ON AN EMBANKMENT ON THE WEST SIDE OF THE ROADWAY FOR ABOUT 350 FEET, STRIKING SMALL TREES AND BRANCHES, UNIT WAS DRIVEN BACK OUT ONTO THE ROADWAY, I THE RT FRONT TIRE WAS DAMAGED AND LEFT 25 FEET OF BLACK MARKS ON THE ROAD WHEN IT WAS DRIVEN BACK INTO THE NORTHBOUND LANE. OPERATOR CONTINUED DRIVING IT NB FOR ABOUT 2 MILES WHERE THE TIRE BECAME TOO DAMAGED TO DRIVE ON. IT WAS NOT REPORTED, I CAME ACROSS IT RIGHT AFTER IT HAPPENED. THERE WAS ONLY A MINOT INJURY TO THE DRIVER. UNIT HAD FRONT END AND UNDER CARRIAGE DAMAGE. THE FRONT RIGHT TIRE WAS CHANGED AND OPERATOR WAS ABLE TO REMOVE IT. THE OPERATOR STATED SHE WAS ON HER PHONE LOOKING FOR SOME MUSIC. SHE WAS CITED FOR INNATENTIVE DRIVING.

6TLOB8M7WX

20-07269

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Location

ON CTHG NB 0.47 MI N OF CTHK EB IN THE TOWN OF IRONTON IN SAUK COUNTY	Latitude 43.488897295	Longitude -90.152903205
	X Coordinate 245051.984375	Y Coordinate 4819938.5
	Structure Type	

Crash Scene

First Harmful Event DITCH	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 PASSENGER CAR	Operating As Endorsements			
	Total Occs 03	Train/Bus # Recorded	Total # Citations Issued 01	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel NORTHBOUND	<input checked="" type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 02
	Most Harmful Event: Collision With DITCH	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 RIGHT		Road Grade DOWNHILL	
	Truck Bus or HazMat NO				

UNIT	Vehicle				
	01	License Plate Number AAT2084	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1FAHP2FW8BG146118	Make FORD	Year 2011	Model TAURUS
		Color GRY - GRAY	Body Style SD - SEDAN		Bus Use
	VEHICLE	Initial Contact Point 11 - LEFT FRONT CORNER	Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT, 14 - UNDERCARRIAGE		
Extent Of Damage FUNCTIONAL DAMAGE					

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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 SPEED TOO FAST/COND, FAILURE TO CONTROL, FAILED TO KEEP IN DESIGNATED LANE, OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER, OTHER CONTRIBUTING ACTION			
01	Owner Name BRANDIE MAY WELLER (608) 415-1095		Owner Address 360 WEST ST 14 LA VALLE, WI 53941 , US	
	Sequence Of Events			
01	01	Event RUN OFF ROADWAY LEFT		
	02	Event DITCH		
	03	Event EMBANKMENT		
	04	Event TREE		
UNIT	Policy Holder			
	Insurance Company PROGRESSIVE-CASUALTY-INS-CO		Individual BRANDIE WELLER	
UNIT INDIVIDUAL	Individual			
	Driver BRANDIE MAY WELLER (608) 415-1095		Citations Issued 01	Sex FEMALE
	Address 360 WEST ST 14 LA VALLE, WI 53941 , US		Date of Birth	Race WHITE
	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
01	Safety Equipment		On Duty Crash	
	Row 01 - FRONT ROW		Seat Position 07 - LEFT	
	Helmet Use		Safety Equipment SHOULDER & LAP BELT	
	Eye Protection		Helmet Compliance	
	Tint Compliance		Airbag DEPLOYED-SIDE	
	Injury		Injury Severity SUSPECTED MINOR INJURY	
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 Source HAND-HELD MOBILE PHONE		
Distracted By				
Distracted By Action MANUALLY OPERATING(TEXTING,DIALING,PLAYING GAME ETC)				

WISCONSIN MOTOR VEHICLE CRASH REPORT

UNIT	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 EMOTIONAL (DEPRESSED, ANGRY, DISTURBED, ETC)				
		Individual				
		Passenger EVINEVER L LEWIS (608) 415-1095		Citations Issued 0	Sex FEMALE	
		Address 360 WEST ST 14 LA VALLE, WI 53941 , US		Date of Birth BLACK		
		Driver License Number				
		01	002	Safety Equipment		On Duty Crash
Row 01 - FRONT ROW	Seat Position 09 - RIGHT			SHOULDER & LAP BELT		
Helmet Use				Helmet Compliance		
Eye Protection				Tint Compliance		
Injury				Injury Severity NO APPARENT INJURY	Airbag DEPLOYED-SIDE	
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			

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT	INDIVIDUAL	Prior Action		
		Action		
01	002	Action Other		To/From School
		Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use NO
01	003	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				
UNIT	INDIVIDUAL	Passenger ANDREW S JONES (608) 415-1095	Citations Issued 0	Sex MALE
		Address 360 WEST ST 14 LA VALLE, WI 53941 , US		Date of Birth
		Driver License Number		
01	003	Safety Equipment	On Duty Crash	Safety Equipment
		Row 02 - SECOND ROW	Seat Position 07 - LEFT	BOOSTER SEAT
		Helmet Use	Helmet Compliance	
		Eye Protection	Tint Compliance	
01	003	Injury	Injury Severity NO APPARENT INJURY	Airbag DEPLOYED-SIDE
		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
Prior Action				

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT	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	
	Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results	
	Drug Type				
	Individual Condition APPEARED NORMAL				
	Violations				
	01	003	UTC Number AD981067	Issue To? 001	Statute Number 346.89(1)