# 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 21-000	Crash Number 55		Investigating Officer/Deputy DEPUTY S. FINNEGAN			
Crash Date 01/02/2021	Crash Time 11:30 AM		Date Ar 01/02/2		Time Arrived	Time Arrived 12:22 PM			
Date Notified 01/02/2021	Time Notified 12:12 PM	I I		Total Units 01		Total Injured Total Kil		lled	
On Emergency Hi	t and Run	Lane Close		re Work Zone		Trailer or Towed		Reporting  Threshold	
Government Property	Active Sc	hool Zone	School <b>NO</b>	School Bus Related NO		Tags			
<b>▼</b> Reportable	Crash Type DT4000 (STA	NDARD CRASH	I)		Amend	ed		Secondary  Crash	
Description									
SKINNER	RD III	The state of the s	FENC	E OT DRAWN TO SCALE		Photo	ional Inform		
i, a sworn law enforceme	ent officer, agr	ee that I have no	ot added	l any CJIS data in th	is report.				
UNIT 1 WAS S/B ON CTH WD WHE OF WATCHING WHERE SHE WAS CULVERT.									

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	Location <b>—</b>									
	ON CTHWD SB				Latitude			Longitu	Longitude	
	229 FT N				43.585403351			-89.97	-89.977380505	
	OF SKINNER RD IN THE TOWN OF WINFIELD					X Coordinate			Y Coordinate	
	IN SAUK COUNTY				259629.7			483013	34	
			Structure NO STR							
	Crash Scene									
	First Harmful Event				FirstHarm	ful Event l	Location			
	FENCE				SHOULE	ER RIGH	łΤ			
	Manner of Collision				Light Con-	dition				
	00 - NO COLLISION W/VI	EHICLE IN TRANSPORT			DAYLIGHT					
	Road Surface Condition(s)  DRY				Roadway	Factor(s)				
	Environment Factor(s)									
	NONE				NONE					
					HOHL					
	Weather Condition(s)									
	CLOUDY									
	Animal Type				Relation T		•			
							ON ROAD			
	Crash Classification - Location PUBLIC PROPERTY	n			Crash Classification - Jurisdiction NO SPECIAL JURISDICTION					
	Tribal Land				Access Control				Special Study	
				1.	NO CONTROL					
	Within Interchange Area  NO	Junction Location NON-JUNCTION		Intersectio	n Type I <b>NTERSE</b>	CTION				
		NON-SONO FICH		INOT AIL						
	Unit Summary   Unit Status		Vehicle Ope	erating As Cl	assification		UnitType			
	IN TRANSIT		D CLASS		AUTOMOBILE					
_	Vehicle Type		I		Operating As Endorsements					
>	(SPORT) UTILITY VEHIC									
	Total Occs	Train/Bus#Recorded	Total#Citat	tions Issued			ilers	I	zMat Types	
	3	Direction Of Travel	1		0		0 imit Total Lane			
	Insurance?	SOUTHBOUND	Pre	CrashTire Mark	e Speed Lin		ımıt lotaiLan		es	
Ē	Most Harmful Event: Collision		SpecialFun				Emergency Motor Vehicle Use			
)	FENCE		NO SPEC	IAL FUNC	TION		NOT APPLICABLE			
	Traffic Way		Traffic Cont				Traffic Control Inoperative/Missing		tive/Missing	
	TWO-WAY, NOT DIVIDED	<u> </u>	NO CONT				NO Road Grade DOWNHILL			
	Surface Type  BLACKTOP (BITUMINOL	ie)	Road Curva							
	Truck Bus or HazMat		CORVEL	<b>-</b> f- )			DOWN			
	NO									
	Vehicle		en e en e en e en e en e en e e	ecceccec	ecceccec		*****	55555555		
	License Plate Number		Plate Type			St	Country of Issuance			
	IAP860	IAP860					UNITED S	UNITED STATES		
5	Vehicle Identification No.  1J4GL48K06W2441	Make JEEP			Year	Model				
	Color				2006		LBY			
	WHI - WHITE	1 .	Body Style 4D - 4DR							
			Vehicle Da				1			
	Initial Contact Point  04 - RIGHT SIDE RE  Extent Of Damage	AR								
5	Extent Of Damage	04 - RIGH	IT SIDE RI	REAR						
		IINOR DAMAGE								

# 6TL0D0GSG8

21-00055

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		Towed Due To Damage		Ve	ehicle Removed By						
		NOT TOWED		s	TEVES AUTO SERVICE						
		What Driver Was Doing		Ve	Vehicle Factors						
		NEGOTIATING CURVE		N-	NOT APPLICABLE						
		Driver Prior Action Other		let.	OT AFFLICABLE						
TINO	VEHICLE	Driver Actions FAILURE TO CONTROL, R	AN OFF F	ROADWAY, OPERA	ATED MOTOR VEHICLE IN INA	TTENTIVE, CARELESS	OR ERRATIC MANNER				
7	01	Owner Name AUDREY MICHELLE WALE (319) 334-8209	DEN		Owner Address 903 2ND AVE N/E OELWEIN, IA 50662 , US						
		Sequence Of Events									
	5	Event RUN OFF ROADWAY RIGH									
	8	Event FENCE									
	03	Event									
	8	Event									
		ndividual									
		Driver AUDREY MICHELLE WALDEN			Citations Issued	Sex					
	7	(319) 334-8209	ZN		1	FEMALE Race					
⊢	B				Date of Birth	WHITE					
Š	INDIVIDUAL	Address 903 2ND AVE N/E OELWEIN, IA 50662 , US			Driver License Number STATE: IOWA COUNTRY: UNITED STATES						
	Sai	ety Equipment On Duty	Crash		Safety Equipment						
		Row 01 - FRONT ROW	Seat Po 07 - LE		SHOULDER & LAP BELT						
		Helmet Use			Heimet Compliance Tint Compliance						
		Eye Protection									
2	8	Injury Se Injury NO APF	erity ARENT II	NJURY	Airbag NON DEPLOYED						
		Ejected	Ejection Pa			Trapped/Extricated					
		Medical Transport NOT TRANSPORTED			EMS Agency Identifier	EMS Run#					
	Hospital				Date of Death Time of Death						
		Distracte	d By Source	<u> </u>							
		Distracted By PASSEI Distracted By Action	iGER/OT	HER NON-MOTOF	RIST						
		TALKING/LISTENING		le e							
		Non Motorist  Striking Unit # Location									

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ı												
		Prior Action										
 		Action										
	j.											
l.	NDIVIDUAL											
N N	₽											
>	ā											
	É											
								_				
		Action Other						To/From School				
		Suspect	ed Alcohol L	Jse	Suspected Drug Use							
	1	Drug & Alcohol NO		I Alashal Taat Tura	NO		I Alaskal Tank Daniska					
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	•		Alcohol Test Results					
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results						
2	8	Drug Type										
	0											
		Individual Condition										
		APPEARED NORMAL										
		ndividual										
		Passenger ELIJAH D WALDEN (319) 334-8209			Citations Issued		Sex					
	₹				0 Date of Birth		MALE Race					
⊨	3				Date of Bill		WHITE					
E S	INDIVIDUA	Address 903 2ND AVE N/E OELWEIN, IA 50662 , US			Driver License Number							
	2											
		On Duty	Crash		Safety Equipment							
	Sai	ety Equipment			Outory Equipment							
		Row 02 - SECOND ROW	Seat Po		CHILD RESTRAINT SYSTEM - FORWARD FACING							
		HelmetUse			Helmet Compliance							
		Eye Protection			Tint Compliance							
2	8	Injury Severity Injury NO APPARENT INJURY			Airbag NON DEPLOYED							
		Ejected NOT EJECTED	Ejection Pa	ith CTED/NOT APPL	ICAB! E		Trapped/Extricated					
		Medical Transport	**O1 E0E	CIEDMOIAME	EMS Agency Identifier		NOT TRAPPED  EMS Run#					
		NOT TRANSPORTED										
		Hospital		Date of Death Time of Death								
		Distracted By Distracte	d By Source	<del>)</del>	•		1					
		Distracted By Action										
			14.14.44	T :								
		Non Motorist	JUIC#	Location								
		Prior Action		•								

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TINO	INDIVIDUAL	Action							
		Action Other						To/From School	
	ı	Drug & Alcohol NO	ected Alcoho	lUse	Suspected Drug Use			1	
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type	)		Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN		Drug TestType		Drug Test Results	3		
5	005	Drug Type							
		Individual Condition							
		APPEARED NORMAL							
		Individual Passenger LYDIA A WALDEN (319) 334-8209  Address 903 2ND AVE N/E OELWEIN, IA 50662 , US			Citations Issued		Sex FEMALE		
_	MAL				Date of Birth		Race WHITE		
<b>LIND</b>	INDIVIDUAL				Driver License Number				
	Sai	et <b>y Equipment</b>	ty Crash		Safety Equipment				
		Row 02 - SECOND ROW	Seat 9	osition EFT	SHOULDER & LAP I	BELT			
		Helmet Use	<b>_</b>		Helmet Compliance				
		Eye Protection			Tint Compliance				
6	83	Injuny <sub>NO A</sub>	Severity PPARENT		Airbag NON DEPLOYED		1		
		Ejected NOT EJECTED	Ejection F	Path ECTED/NOT APPL			Trapped/Extricated NOT TRAPPED		
		Medical Transport NOT TRANSPORTED			EMS Agency Identifier		EMS Run#		
		Hospital			Date of Death		Time of Death		
		Distracted By	cted By Sou	rce					
		Distracted By Action							
		Non Motorist	g Unit#	Location					
		Prior Action							

Crash Date 01/02/2021 Crash Time 11:30 AM

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	Action						
UNIT							
	Action Other						To/From School
	Drug & Alcohol	Suspected Alco NO	ohol Use	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	,	
01	Đrug Type						
	Individual Condition  APPEARED NORM	<b>/</b> AL					
	Violations	<u>NAMANANANANANA</u>	*************	**************	*********	*************	
04	UTC Number BG023608	Issue To?	Statute Number 346.89(1)	Description INATTENTIVE DRIV	ING		