

6TL0CBQ6NR  
21-00125

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

6TL0CBQ6NR

|  |                                      |   |                                    |   |  |  |                    |
|--|--------------------------------------|---|------------------------------------|---|--|--|--------------------|
| Document Number Override                       |                                      | Primary Crash Document#                     |                                    | Agency Crash Number<br>21-00125           |  | Investigating Officer/Deputy<br>DEPUTY B. ZIBELL |                    |
| Crash Date<br>01/04/2021                       |                                      | Crash Time<br>05:54 PM                      |                                    | Date Arrived<br>01/04/2021                |  | Time Arrived<br>10:57 PM                         |                    |
| Date Notified<br>01/04/2021                    |                                      | Time Notified<br>06:39 PM                   |                                    | Total Units<br>01                         |  | Total Injured<br>00                              | Total Killed<br>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<br>NO                  |  | Tags   |                    |
| <input checked="" type="checkbox"/> Reportable |                                      | Crash Type<br>DT4000 (STANDARD CRASH)       |                                    | <input type="checkbox"/> Amended          |  | <input type="checkbox"/> Secondary Crash         |                    |

Description

|                |  |
|----------------|--|
| <p>Diagram</p> | Reconstruction By                      |
|                | Photos By<br>ZIBELL                    |
|                | Additional Information<br>NONE, PHOTOS |

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

UNIT 1 TRAVELING WESTBOUND. ROADWAY COVERED IN SNOW AND WAS SNOWING. UNIT 1 SLIDE ACROSS CENTER LINE AND CAME TO A REST IN THE SOUTH SIDE DITCH.

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Location

|   |                                |                            |
|---|--------------------------------|----------------------------|
| ON CUMMINGS RD<br>0.53 MI E<br>OF LITTLE BEAR SPUR<br>IN THE TOWN OF BEAR CREEK<br>IN SAUK COUNTY | Latitude<br>43.272623211       | Longitude<br>-90.126712318 |
|   | X Coordinate<br>246268.703125  | Y Coordinate<br>4795838    |
|   | Structure Type<br>NO STRUCTURE |                            |

Crash Scene

|   |  |  |
|---|--|--|
| First Harmful Event<br>DITCH                                    | First Harmful Event Location<br>ON ROADWAY                     |  |
| Manner of Collision<br>00 - NO COLLISION W/VEHICLE IN TRANSPORT | Light Condition<br>DARK/UNLIT                                  |  |
| Road Surface Condition(s)<br>SNOW                               | Roadway Factor(s)<br><br>NONE                                  |  |
| Environment Factor(s)<br>WEATHER CONDITIONS                     |  |  |
| Weather Condition(s)<br>SNOW                                    |  |  |
| Animal Type   | Relation To Trafficway<br>TRAFFICWAY - ON ROAD                 |  |
| Crash Classification - Location<br>PUBLIC PROPERTY              | Crash Classification - Jurisdiction<br>NO SPECIAL JURISDICTION |  |
| Tribal Land   | Access Control<br>NO CONTROL                                   | Special Study                            |
| Within Interchange Area<br>NO                                   | Junction Location<br>NON-JUNCTION                              | Intersection Type<br>NOT AN INTERSECTION |

Unit Summary

|            |  |  |   |                     |                         |
|------------|--|--|---|---------------------|-------------------------|
| UNIT<br>01 | Unit Status<br>IN TRANSIT                  | Vehicle Operating As Classification<br>D CLASS | Unit Type<br>AUTOMOBILE                       |                     |                         |
|            | Vehicle Type<br>PASSENGER CAR              | Operating As Endorsements                      |   |                     |                         |
|            | Total Occs<br>1                            | Train/Bus # Recorded                           | Total # Citations Issued<br>0                 | Total Trailers<br>0 | Total HazMat Types<br>0 |
|            | Insurance?<br>YES                          | Direction Of Travel<br>WESTBOUND               | <input type="checkbox"/> Pre Crash Tire Mark  | Speed Limit<br>45   | Total Lanes<br>2        |
|            | Most Harmful Event: Collision With<br>TREE | Special Function<br>NO SPECIAL FUNCTION        | Emergency Motor Vehicle Use<br>NOT APPLICABLE |                     |                         |
|            | Traffic Way<br>TWO-WAY, NOT DIVIDED        | Traffic Control<br>NO CONTROL                  | Traffic Control Inoperative/Missing<br>NO     |                     |                         |
|            | Surface Type<br>BLACKTOP (BITUMINOUS)      | Road Curvature<br>CURVE RIGHT                  | Road Grade<br>LEVEL                           |                     |                         |
|            | Truck Bus or HazMat<br>NO                  |  |   |                     |                         |

Vehicle

|                             |  |  |              |                                      |
|-----------------------------|--|--|--------------|--------------------------------------|
| UNIT<br>VEHICLE<br>01<br>01 | License Plate Number<br>190ZAH                     | Plate Type<br>AUT - AUTOMOBILE                         | St<br>WI     | Country of Issuance<br>UNITED STATES |
|                             | Vehicle Identification Number<br>2CNALDEC3B6229171 | Make<br>CHEVROLET                                      | Year<br>2011 | Model<br>EQUINOX                     |
|                             | Color<br>SIL - SILVER (ALUMINUM)                   | Body Style<br>UT - SPORT UTILITY VEHICLE               | Bus Use      |                                      |
|                             | Initial Contact Point<br>11 - LEFT FRONT CORNER    | Vehicle Damage   |              |                                      |
|                             | Extent Of Damage<br>DISABLING DAMAGE               | 08 - LEFT SIDE REAR, 09 - LEFT SIDE MIDDLE, 12 - FRONT |              |                                      |

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|   |   |  |   |  |  |
|---|---|--|---|--|--|
| UNIT VEHICLE                                  | Towed Due To Damage<br><b>TOWED DUE TO DISABLING DAMAGE</b>         |  | Vehicle Removed By<br><b>GEORGES AUTO BODY</b>                            |  |  |
|   | What Driver Was Doing<br><b>NEGOTIATING CURVE</b>                   |  | Vehicle Factors   |  |  |
|   | Driver Prior Action Other   |  | <b>BODY, DOORS, HEAD LAMPS, MIRRORS, STEERING, TIRES</b>                  |  |  |
|   | Driver Actions<br><b>NO CONTRIBUTING ACTION</b>                     |  |   |  |  |
| 01  | Owner Name<br><b>LAURA I NEEFE<br/>(608) 445-1075</b>               |  | Owner Address<br><b>E4111 CUMMINGS RD<br/>SPRING GREEN, WI 53588 , US</b> |  |  |
|   | <b>Sequence Of Events</b>   |  |   |  |  |
| 01  | 01  | Event<br><b>DITCH</b>  |   |  |  |
|   | 02  | Event<br><b>TREE</b>   |   |  |  |
|   | 03  | Event  |   |  |  |
|   | 04  | Event  |   |  |  |
| UNIT  | <b>Policy Holder</b>  |  |   |  |  |
|   | Insurance Company<br><b>AMERICAN-FAMILY-INS-CO</b>                  |  | Individual<br><b>LAURA NEEFE</b>  |  |  |
| UNIT INDIVIDUAL                               | <b>Individual</b>   |  |   |  |  |
|   | Driver<br><b>LAURA I NEEFE<br/>(608) 445-1075</b>                   |  | Citations Issued<br><b>0</b>  | Sex<br><b>FEMALE</b>                               |  |
|   | Address<br><b>E4111 CUMMINGS RD<br/>SPRING GREEN, WI 53588 , US</b> |  | Date of Birth<br>[REDACTED]   | Race<br><b>WHITE</b>                               |  |
|   |   |  | Driver License Number<br>[REDACTED]                                       | <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>     |  |
| 01  | <b>Safety Equipment</b>   |  | On Duty Crash   |  |  |
|   | Row<br><b>01 - FRONT ROW</b>  |  | Seat Position<br><b>07 - LEFT</b>   | Safety Equipment<br><b>SHOULDER &amp; LAP BELT</b> |  |
|   | Helmet Use  |  | Helmet Compliance   |  |  |
|   | Eye Protection  |  | Tint Compliance   |  |  |
|   | <b>Injury</b>   |  | Injury Severity<br><b>NO APPARENT INJURY</b>                              | Airbag<br><b>DEPLOYED-SIDE</b>                     |  |
|   | Ejected<br><b>NOT EJECTED</b>                                       |  | Ejection Path<br><b>NOT EJECTED/NOT APPLICABLE</b>                        |  | Trapped/Extricated<br><b>NOT TRAPPED</b> |
| Medical Transport<br><b>NOT TRANSPORTED</b>   |   | EMS Agency Identifier  |   | EMS Run #  |  |
| Hospital                                      |   | Date of Death  |   | Time of Death                                      |  |
| <b>Distracted By</b>                          |   | Distracted By Source<br><b>NOT APPLICABLE (NOT DISTRACTED)</b> |   |  |  |
| Distracted By Action<br><b>NOT DISTRACTED</b> |   |  |   |  |  |

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|   |  |  |                             |                          |                      |  |
|---|--|--|-----------------------------|--------------------------|----------------------|--|
| UNIT<br>INDIVIDUAL<br><br><br><br><br><br><br><br><br><br>01<br>001 | <b>Non Motorist</b>                            |  | Striking Unit #             | Location                 |                      |  |
|   | Prior Action                                   |  |                             |                          |                      |  |
|   | Action   |  |                             |                          |                      |  |
|   | Action Other                                   |  |                             |                          | To/From School       |  |
|   | <b>Drug &amp; Alcohol</b>                      |  | Suspected Alcohol Use<br>NO | Suspected Drug Use<br>NO |                      |  |
|   | Alcohol Test Given<br><b>TEST NOT GIVEN</b>    |  | Alcohol Test Type           |                          | Alcohol Test Results |  |
|   | Drug Test Given<br><b>TEST NOT GIVEN</b>       |  | Drug Test Type              |                          | Drug Test Results    |  |
|   | Drug Type                                      |  |                             |                          |                      |  |
|   | Individual Condition<br><b>APPEARED NORMAL</b> |  |                             |                          |                      |  |