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21-01258

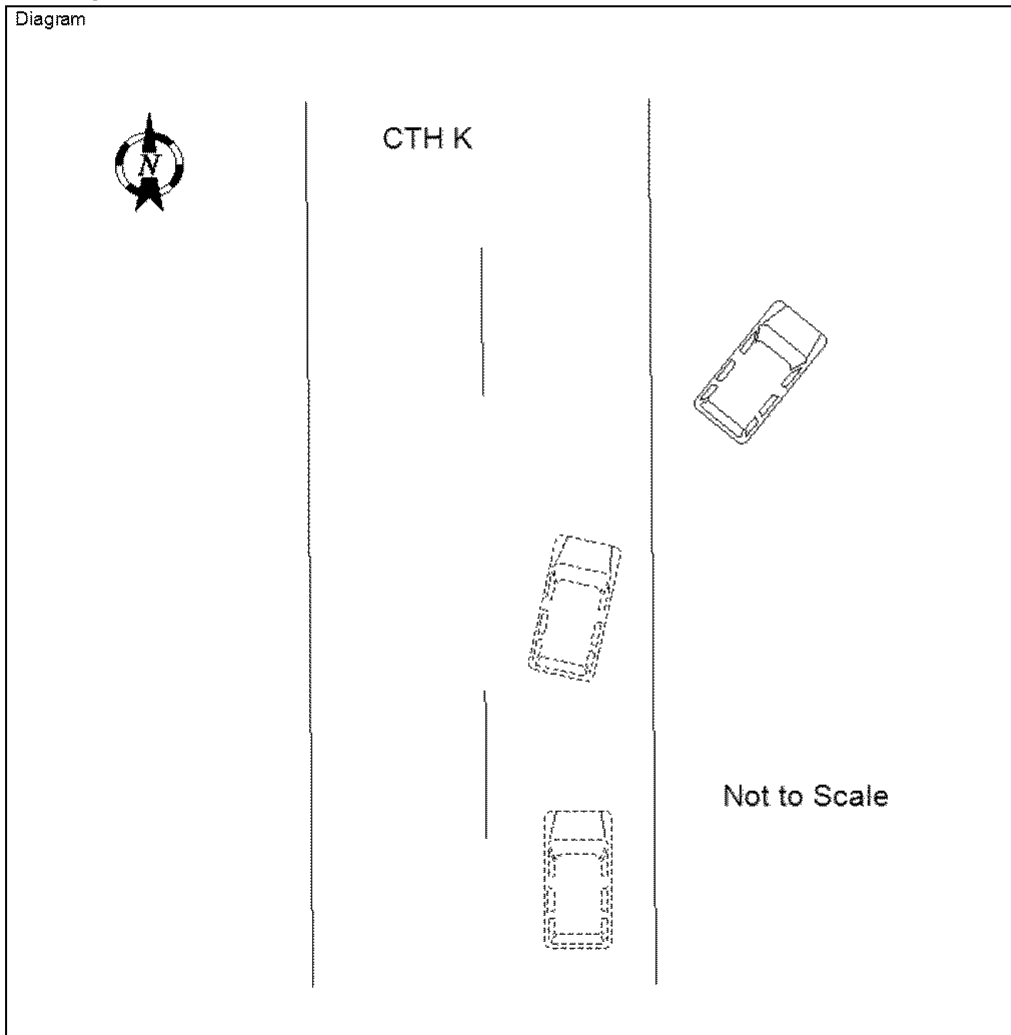
WISCONSIN MOTOR VEHICLE CRASH REPORT

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 21-01258		Investigating Officer/Deputy DEPUTY B. STODDARD	
Crash Date 02/12/2021		Crash Time 03:15 PM		Date Arrived 02/12/2021		Time Arrived 03:22 PM	
Date Notified 02/12/2021		Time Notified 03:15 PM		Total Units 01		Total Injured 00	Total Killed
<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 type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram 	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 NORTHBOUND ON CTH K. UNIT 1'S FRONT DRIVER SIDE TIRE/RIM CAME OFF VEHICLE. UNIT 1 ENTERED THE EAST DITCH AND CAME TO REST FACING NORTHEAST.

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Location

ON CTHK NB 507 FT S OF GILES RD IN THE TOWN OF WINFIELD IN SAUK COUNTY	Latitude 43.56400565	Longitude -90.000805062
	X Coordinate 257652.640625	Y Coordinate 4827825.5
	Structure Type	

Crash Scene

First Harmful Event OTHER NON-COLLISION	First Harmful Event Location ON ROADWAY	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAYLIGHT	
Road Surface Condition(s) WET	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLOUDY		
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 01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE		
	Vehicle Type (SPORT) UTILITY VEHICLE	Operating As Endorsements			
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel NORTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With OTHER NON-COLLISION	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				

Vehicle

UNIT 01 VEHICLE 01	License Plate Number AET9186	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
	Vehicle Identification Number 1FMYU93187KA91660	Make FORD	Year 2007	Model ESCAPE	
	Color	Body Style UT - SPORT UTILITY VEHICLE		Bus Use	
	Initial Contact Point 00 - NON-COLLISION	Vehicle Damage			
	Extent Of Damage MINOR DAMAGE	10 - LEFT SIDE FRONT			

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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By REEDSBURG SALVAGE	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		TIRES	
	Driver Actions NO CONTRIBUTING ACTION			
01 01	Owner Name STEPHANIE D COOK (608) 415-2878		Owner Address 850 PLUM ST # A102 REEDSBURG, WI 53959 , US	
	Sequence Of Events			
01 02 03 04	Event OTHER NON-COLLISION			
	Event			
	Event			
	Event			
UNIT	Policy Holder			
	Insurance Company PROGRESSIVE-CASUALTY-INS-CO		Individual STEPHANIE COOK	
UNIT INDIVIDUAL	Individual			
	Driver STEPHANIE D COOK (608) 415-2878		Citations Issued 0	Sex FEMALE
	Address 850 PLUM ST # A102 REEDSBURG, WI 53959 , US		Date of Birth [REDACTED]	Race WHITE
	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES			
01 001	Safety Equipment		On Duty Crash	
	Row 01 - FRONT ROW		Seat Position 07 - LEFT	
	Safety Equipment SHOULDER & LAP BELT		Helmet Use	
	Helmet Compliance		Eye Protection	
	Tint Compliance		Injury NO APPARENT 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				
		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	001			