

6TL0CX0Q88

21-05375

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, Investigating Officer/Deputy, Crash Date, Crash Time, Date Arrived, Time Arrived, Date Notified, Time Notified, Total Units, Total Injured, Total Killed, On Emergency, Hit and Run, Lane Closure, Work Zone, Trailer or Towed, Reporting Threshold, Government Property, Active School Zone, School Bus Related, Tags, Reportable, Crash Type, Amended, Secondary Crash

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

Location

ON N DEWEY AVE
114 FT S
OF GILES RD
IN THE TOWN OF WINFIELD
IN SAUK COUNTY
Latitude, Longitude, X Coordinate, Y Coordinate, Structure Type

Crash Scene

First Harmful Event, First Harmful Event Location, Manner of Collision, Light Condition, Road Surface Condition(s), Roadway Factor(s), Environment Factor(s), Weather Condition(s), Animal Type, Relation To Trafficway, Crash Classification - Location, Crash Classification - Jurisdiction, Tribal Land, Access Control, Special Study

Unit Summary

Unit Status, Vehicle Operating As Classification, Unit Type, Vehicle Type, Operating As Endorsements, Total Occs, Train/Bus # Recorded, Total # Citations Issued, Total Trailers, Total HazMat Types, Insurance?, Direction Of Travel, Pre Crash Tire Mark, Speed Limit, Total Lanes, Most Harmful Event: Collision With, Special Function, Emergency Motor Vehicle Use, Traffic Way, Traffic Control, Traffic Control Inoperative/Missing, Surface Type, Road Curvature, Road Grade

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Truck Bus or HazMat			
01 UNIT VEHICLE	Vehicle		
	License Plate Number AKM3926	Plate Type AUT - AUTOMOBILE	St WI
	Country of Issuance UNITED STATES	Vehicle Identification Number 4T1BK46K79U096813	Make TOYOTA
	Year 2009	Model CAMRY	Color GRY - GRAY
	Body Style SD - SEDAN	Bus Use	
	Initial Contact Point 12 - FRONT	Vehicle Damage	
	Extent Of Damage FUNCTIONAL DAMAGE	11 - LEFT FRONT CORNER, 12 - FRONT	
	Towed Due To Damage NOT TOWED	Vehicle Removed By OWNER	
	What Driver Was Doing	Vehicle Factors	
	Driver Prior Action Other		
01 UNIT VEHICLE	Driver Actions NO CONTRIBUTING ACTION		
	Owner Name	Owner Address	
01 UNIT VEHICLE	Policy Holder		
	Insurance Company PROGRESSIVE-ADVANCED-INSURANCE-CO	Individual BRIANNA ROBINSON	
01 UNIT INDIVIDUAL	Individual		
	Driver BRIANNA MARIE ROBINSON (608) 393-3496	Citations Issued 0	Sex FEMALE
		Date of Birth [REDACTED]	Race WHITE
	Address 1015 19TH ST REEDSBURG, WI 53959 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES	
01 UNIT INDIVIDUAL	Safety Equipment		On Duty Crash
	Safety Equipment		
	Row	Seat Position	SHOULDER & LAP BELT
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
01 UNIT INDIVIDUAL	Injury		Airbag
	Injury Severity NO APPARENT INJURY		
	Ejected	Ejection Path	Trapped/Extricated
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier
	Hospital		EMS Run#
Date of Death		Time of Death	

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UNIT INDIVIDUAL	Distracted By		Distracted By Source		
	Distracted By Action				
	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					