

6TL0BNZM2R
21-07419

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 21-07419		Investigating Officer/Deputy DEPUTY A. BREUNIG	
Crash Date 08/07/2021		Crash Time 02:45 PM		Date Arrived 08/07/2021		Time Arrived 03:10 PM	
Date Notified 08/07/2021		Time Notified 03:10 PM		Total Units 01		Total Injured 00	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 type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

Description

<p>Diagram</p> <p>NIT TO SCALE</p>	Reconstruction By
	Photos By A BREUNIG
	Additional Information PHOTOS

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

UNIT 1 WAS TRAVELING EASTBOUND ON CTH W. UNIT 1 WAS NEGOTIATING A DOWNHILL CURVE TO THE LEFT. THE ROAD SURFACE WAS WET. UNIT 1 LOST CONTROL AND BEGAN TO SPIN AROUND. UNIT 1 CROSSED THE CENTER LINE AND ENTERED THE DITCH BACKWARDS. UNIT 1 TRAVELED UP AN EMBANKMENT AND CAME TO REST.

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Location

ON CTHW EB 0.31 MI W OF MAPLE HILL RD IN THE TOWN OF FREEDOM IN SAUK COUNTY	Latitude 43.415630627	Longitude -89.953529134
	X Coordinate 260885.6875	Y Coordinate 4811209.5
	Structure Type	

Crash Scene

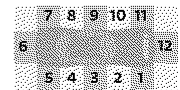
First Harmful Event DITCH	First Harmful Event Location ON ROADWAY	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAYLIGHT	
Road Surface Condition(s) WET	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) RAIN		
Animal Type	Relation To Trafficway TRAFFICWAY - 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 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2
	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 LEFT		Road Grade DOWNHILL	
	Truck Bus or HazMat NO				

Vehicle

UNIT	VEHICLE	License Plate Number 854WMX	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
		Vehicle Identification Number 1B4GP25B52B635848	Make DODGE	Year 2002	Model CARAVAN SE
		Color PLE - PURPLE	Body Style VN - VAN		Bus Use
		Initial Contact Point 05 - RIGHT REAR CORNER	Vehicle Damage		
		Extent Of Damage MINOR DAMAGE	11 - LEFT FRONT CORNER		



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UNIT VEHICLE	Towed Due To Damage NOT TOWED	Vehicle Removed By BILLS TOWING		
	What Driver Was Doing NEGOTIATING CURVE	Vehicle Factors		
	Driver Prior Action Other	NOT APPLICABLE		
	Driver Actions SPEED TOO FAST/COND			
01 01	Owner Name SARA YVONNE WALLS (608) 669-3771	Owner Address 455 MAIN ST LOGANVILLE, WI 53943 , US		
	Sequence Of Events			
01 01	01	Event CROSS CENTERLINE		
	02	Event RUN OFF ROADWAY LEFT		
	03	Event DITCH		
	04	Event		
UNIT	Policy Holder			
	Insurance Company WISCONSIN-MUTUAL-INS-CO	Individual SARA WALLS		
UNIT INDIVIDUAL	Individual			
	Driver SHELDON JAMES WALLS (608) 415-8611	Citations Issued 0	Sex MALE	
		Date of Birth [REDACTED]	Race WHITE	
	Address 455 MAIN ST LOGANVILLE, WI 53943 , US	Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES		
01 001	Safety Equipment		On Duty Crash	
			Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	Injury	Injury Severity 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 NOT APPLICABLE (NOT DISTRACTED)		
Distracted By Action NOT DISTRACTED				

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UNIT	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					