

6TL0F3SSGL
24-05568

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

6TL0F3SSGL

Document Number Override		Primary Crash Document #	Agency Crash Number 24-05568	Investigating Officer/Deputy DEPUTY A. KING	
Crash Date 05/30/2024		Crash Time 03:44 PM	Date Arrived 05/30/2024	Time Arrived 03:57 PM	
Date Notified 05/30/2024		Time Notified 03:45 PM	Total Units 02	Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input checked="" 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 checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram	Reconstruction By
<p>Not to scale</p>	Photos By
	Additional Information NONE

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

OPERATOR OF U2 STATED U1 WAS STATIONARY ON BERKLEY BLVD FACING WEST WAITING TO CROSS/TURN ONTO WEST PINE ST. U2 SAID THERE WAS A VEHICLE NORTHBOUND JUST AHEAD OF HER BEGIN TURNING ONTO BERKLEY BLVD. OPERATOR OF U2 STATED U1 PULLED OUT IN FRONT OF HER TO CROSS WEST PINE. OPERATOR OF U2 STATED SHE TRIED TO STOP BUT WAS UNABLE TO AND STRUCK U1. OPERATOR OF U2 STATED U1 CONTINUED ON DRIVING AND DESCRIBED IT AS A RED SMALL TRUCK. I ARRIVED AND CANVASSED THE AREA BUT WAS UNABLE TO LOCATE U1. OPERATOR OF U2 STATED SHE WAS NOT INJURED AND BELIEVED HER VEHICLE WAS STILL DRIVEABLE. OPERATOR DENIED EMS AND REMOVED THE VEHICLE FROM THE SCENE.

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Location

ON BERKLEY BLVD 46 FT E OF CTHBD WB IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY	Latitude 43.477087514	Longitude -89.768668103
	X Coordinate 276079.5	Y Coordinate 4817521
	Structure Type	

Crash Scene

First Harmful Event MOTOR VEH IN TRANSPORT	First Harmful Event Location ON ROADWAY	
Manner of Collision 01 - ANGLE	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLEAR		
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 INTERSECTION	Intersection Type FOUR-WAY INTERSECTION

Unit Summary

UNIT	Unit Status HIT AND RUN	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? UNKNOWN	Direction Of Travel WESTBOUND	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit 30	Total Lanes 2
	Most Harmful Event: Collision With MOTOR VEH IN TRANSPORT	Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way DIVIDED HWY W/O TRAFFIC BARRIER	Traffic Control STOP SIGN		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)	Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO				

UNIT	Vehicle				
	01	License Plate Number	Plate Type	St	Country of Issuance
		Vehicle Identification Number	Make	Year	Model
		Color	Body Style		Bus Use
	VEHICLE	Initial Contact Point 99 - UNKNOWN	Vehicle Damage		
		Extent Of Damage VEHICLE NOT AT SCENE	16 - VEHICLE NOT AT SCENE		



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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
	What Driver Was Doing LEFT TURN		Vehicle Factors	
	Driver Prior Action Other		UNKNOWN	
	Driver Actions UNKNOWN			
01 01	Owner Name		Owner Address , ,	
	Sequence Of Events			
01 02 03 04	Event MOTOR VEH IN TRANSPORT			
	Event			
	Event			
	Event			
UNIT INDIVIDUAL	Individual			
	Driver		Citations Issued 0	Sex
	Address , ,		Date of Birth	Race
			Driver License Number	
01 001	Safety Equipment		On Duty Crash	
			Safety Equipment	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	RESTRAINT USE UNKNOWN	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	Injury		Injury Severity NO APPARENT INJURY	Airbag NOT APPLICABLE
	Ejected NOT APPLICABLE		Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT APPLICABLE
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #
Hospital		Date of Death	Time of Death	
Distracted By		Distracted By Source		
Distracted By Action				
Non Motorist		Striking Unit #	Location	

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UNIT	INDIVIDUAL	Prior Action	
		Action	
		Action Other	
		To/From School	
		Drug & Alcohol	
		Suspected Alcohol Use	
		Suspected Drug Use	
		Alcohol Test Given	
		Alcohol Test Type	
		Alcohol Test Results	
01	001	TEST NOT GIVEN	
		Drug Test Given	
		Drug Test Type	
		Drug Test Results	
		Drug Test NOT GIVEN	
Drug Type			
Individual Condition			
NOT OBSERVED			

Unit Summary

UNIT	02	Unit Status		Vehicle Operating As Classification		Unit Type	
		IN TRANSIT		D CLASS		AUTOMOBILE	
		Vehicle Type		Operating As Endorsements			
		PASSENGER CAR					
		Total Occs	Train/Bus # Recorded	Total # Citations Issued	Total Trailers	Total HazMat Types	
		1		0	0	0	
		Insurance?	Direction Of Travel	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit	Total Lanes	
		YES	WESTBOUND		30	4	
		Most Harmful Event: Collision With		Special Function		Emergency Motor Vehicle Use	
		MOTOR VEH IN TRANSPORT		NO SPECIAL FUNCTION		NOT APPLICABLE	
Traffic Way		Traffic Control		Traffic Control Inoperative/Missing			
DIVIDED HWY W/O TRAFFIC BARRIER		NO CONTROL		NO			
Surface Type		Road Curvature		Road Grade			
BLACKTOP (BITUMINOUS)		STRAIGHT		LEVEL			
Truck Bus or HazMat							
NO							

Vehicle

UNIT	VEHICLE	02	02	License Plate Number		Plate Type	St	Country of Issuance
				MME0WW		AUT - AUTOMOBILE	WI	UNITED STATES
				Vehicle Identification Number		Make	Year	Model
				KL8CD6SA8GC574809		CHEVROLET	2016	SPARK 1LT
				Color		Body Style		Bus Use
				BLU - BLUE		4H - HATCHBACK 4 DOOR		
				Initial Contact Point		Vehicle Damage		
				12 - FRONT		12 - FRONT		
Extent Of Damage		Vehicle Removed By						
MINOR DAMAGE		OWNER						
Towed Due To Damage		What Driver Was Doing						
NOT TOWED		GOING STRAIGHT						

WISCONSIN MOTOR VEHICLE CRASH REPORT

UNIT VEHICLE	Vehicle Factors		
	Driver Prior Action Other	NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION		
	Owner Name SHARON WALLACE (608) 393-5350	Owner Address 349 WARREN AVE REEDSBURG, WI 53959 , US	
UNIT 02	Sequence Of Events		
	01	Event MOTOR VEH IN TRANSPORT	
	02	Event	
	03	Event	
UNIT 04	04	Event	
	Policy Holder		
	Insurance Company AMERICAN-FAMILY-MUTUAL-INS-CO	Individual SHARON WALLACE	
	Individual		
UNIT INDIVIDUAL	Driver SHARON WALLACE (608) 393-5350	Citations Issued 0	Sex FEMALE
	Date of Birth		Race WHITE
	Address 349 WARREN AVE REEDSBURG, WI 53959 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES
	Safety Equipment		
UNIT 02	On Duty Crash		Safety Equipment
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
UNIT 002	Injury		Airbag
	Injury Severity NO APPARENT INJURY		NON DEPLOYED
	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
	Medical Transport NOT TRANSPORTED		EMS Agency Identifier
Hospital		Date of Death	Time of Death
UNIT 002	Distracted By		
	Distracted By Source NOT APPLICABLE (NOT DISTRACTED)		
	Distracted By Action NOT DISTRACTED		
UNIT 002	Non Motorist		
	Striking Unit #	Location	

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UNIT	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			
	02	002		