

6TL0CX0QD7

24-07997

# 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 <b>24-07997</b>	Investigating Officer/Deputy <b>DEPUTY K. MCCARTY</b>	
Crash Date <b>07/21/2024</b>		Crash Time <b>07:36 PM</b>	Date Arrived <b>07/21/2024</b>	Time Arrived <b>07:45 PM</b>	
Date Notified <b>07/21/2024</b>		Time Notified <b>07:38 PM</b>	Total Units <b>01</b>	Total Injured <b>01</b>	Total Killed <b>00</b>
<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 <b>NO</b>		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type <b>DT4000 (STANDARD CRASH)</b>		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

## Description

Diagram 	Reconstruction By
	Photos By <b>NEUBAUER 9140</b>
	Additional Information <b>PHOTOS</b>

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

UNIT 1 WAS TRAVELING NB ON HY 113 NEAR S5371. UNIT 1 DRIVER WAS UNSURE EXACTLY HOW SHE LOST CONTROL OF VEHICLE BUT WAS NEGOTIATING A SMALL CURVE IN ROAD WHEN SHE LOST CONTROL. ROADS WERE SLICK FROM A LIGHT RAIN. DRIVER THAT WAS IN FRONT OF HER RECALLED SEEING UNIT 1 LOSE CONTROL, CROSS CENTERLINE, ENTER DITCH, FLIP TWICE, AND THE CAR CAME TO A REST ON ITS TIRES. UNIT 1 DRIVER WAS WEARING SEAT-BELT AND STATED SHE WAS GOING SPEED LIMIT OF 45 MPH. UNIT 1 DRIVER TRANSPORTED TO HOSPITAL FOR SUSPECTED MINOR HEAD INJURY. CRAIG'S REMOVED VEHICLE WHICH WAS DISABLED.

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## Location

ON STH113 NB 942 FT S OF CTHW NB IN THE TOWN OF GREENFIELD IN SAUK COUNTY	Latitude <b>43.450441225</b>	Longitude <b>-89.713331702</b>
	X Coordinate <b>280458.625</b>	Y Coordinate <b>4814414</b>
	Structure Type	

## Crash Scene

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

## Unit Summary

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

UNIT 01 VEHICLE	<b>Vehicle</b>				
	License Plate Number <b>244128</b>		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>PP11006285</b>		Make <b>HONDA</b>	Year <b>1991</b>	Model <b>PC</b>
	Color <b>YEL - YELLOW</b>		Body Style <b>CV - CONVERTIBLE</b>		Bus Use
	Initial Contact Point <b>03 - RIGHT SIDE MIDDLE</b>		Vehicle Damage		
Extent Of Damage <b>DISABLING DAMAGE</b>		<b>15 - ALL AREAS</b>			



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UNIT VEHICLE	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>		Vehicle Removed By <b>CRAIGS TOWING</b>	
	What Driver Was Doing <b>NEGOTIATING CURVE</b>		Vehicle Factors	
	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>UNKNOWN</b>			
01	Owner Name <b>JUSTIN REES</b>		Owner Address <b>1302 GEM CT WISCONSIN DELLS, WI 53965 , US</b>	
	<b>Sequence Of Events</b>			
01	01	Event <b>RUN OFF ROADWAY LEFT</b>		
	02	Event <b>DITCH</b>		
	03	Event		
	04	Event		
UNIT	<b>Policy Holder</b>			
	Insurance Company <b>STATE-FARM-GENERAL-INS-CO</b>		Individual <b>JUSTIN REES</b>	
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>KEEGAN REES</b>		Citations Issued <b>0</b>	Sex <b>FEMALE</b>
	Address <b>1302 GEM CT WISCONSIN DELLS, WI 53965 , US</b>		Date of Birth	Race <b>WHITE</b>
	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>			
01	<b>Safety Equipment</b>		On Duty Crash	
	Row <b>01 - FRONT ROW</b>		Seat Position <b>07 - LEFT</b>	
	Helmet Use		Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
	Eye Protection		Helmet Compliance	
	Tint Compliance		Airbag <b>NON DEPLOYED</b>	
	<b>Injury</b>		Injury Severity <b>SUSPECTED MINOR INJURY</b>	
001	Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	
	Trapped/Extricated <b>NOT TRAPPED</b>			
	Medical Transport <b>EMS GROUND</b>		EMS Agency Identifier <b>6000368</b>	EMS Run # <b>2407211943BDAS</b>
	Hospital <b>ST CLARE HOSP</b>		Date of Death	Time of Death
	<b>Distracted By</b>		Distracted By Source <b>UNKNOWN</b>	
Distracted By Action <b>UNKNOWN</b>				

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