WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Occument Number Override Crash Date 08/23/2024		Primary Crash Document # Crash Time 99:99		Agency Crash Number 24-09373 Date Arrived 08/23/2024		Investigating Officer/Deputy DEPUTY J. HUNTER			
53							Time Arrived 05:42 PM			
6 I L0D5D229	Date Notified 08/23/2024		Time Notified 05:26 PM		Total Ui	nits	Total Injured		otal Kille	d
	On Emergency	Hit	t and Run	Lane Closi	ure	Work Zone	Trailer	or To	wed	Reporting Threshold
	Government Property		Active Sc	hool Zone	School NO	Bus Related	Tags			
	▼ Reportable		Crash Type DT4000 (STA	NDARD CRASH	l)		Amend	led		Secondary Crash
	Description =						•			
	Diagram		1				Not to scale		s By UTY J. H	HUNTER 9196
	Irish Valley Rd	Uris	o Valley Rd	HY C at Iri	sh Valley	Rd.		Addition	onal Infor	mation
	✓ I, a sworn law enf									
	ON 8/23/24, PASSERSBY F NEGOTIATE THE CURVE, THE REGISTERED OWNED DRIVER FLED THE CRASH	WENT O	FF THE ROAD AN IT 1 WAS FOUND	ID INTO A FIELD O RUNNING THROU	F BEANS, GH A DIFF	AND ROLLED OVER. THE FERENT FIELD. R/O OF U	HERE WAS NO OO JNIT 1 STATED H	CCUPAN E WAS	NTS FRO	M THE CRASH ON SCENE. SENGER, AND THE

Location

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Crash Time 99:99

	ON	ERSECTION CTHC SB IRISH VALLEY RD			Latitude 43.322139063 X Coordinate		Longitude -89.953988322 Y Coordinate		3988322		
		THE TOWN OF HONEY (SAUK COUNTY	CREEK		260480 .				4800827		
						Structure Type NO STRUCTURE					
(Cra	sh Scene			•						
	First	t Harmful Event			First Har	mful Event	Location				
	DIT				ON RO	ADWAY					
		ner of Collision			=	Light Condition					
		NO COLLISION W/VEH	IICLE IN TRANSPORT			DAYLIGHT					
		d Surface Condition(s)			Roadway	/ Factor(s)					
	DR	Y									
	Envi	ironment Factor(s)									
	NOI	NE			NONE						
	Wea	ather Condition(s)									
		EAR									
	Anın	nal Type				To Trafficv	vay ON ROAD				
	Cras	sh Classification - Location			Crash Cla	assification	- Jurisdiction				
	_	BLIC PROPERTY			NO SPE	ECIAL JU	RISDICTION				
	Triba	al Land				Access Control Special Study NO CONTROL			Special Study		
	With	nin Interchange Area J	Junction Location	Int	Intersection Type						
	NO	ı	NTERSECTION	Y-	INTERSECTION	N					
	Uni	t Summary									
	Unit Status			Vahiala Oparati	Vehicle Operating As Classification		Unit Type				
	Offic	Clatus			ny As Classificatio	11	1				
	ніт	AND RUN		D CLASS	ng As Classificatio	11	AUTOMO				
ا ال	HIT Vehi	AND RUN icle Type			ng As Classificatio		1		ements		
0.1	HIT Vehi PAS	AND RUN icle Type SSENGER CAR	I Train/Rus # Recorded	D CLASS			AUTOMO Operating A	As Endorse			
0.1	HIT Vehi PAS Tota	AND RUN icle Type	Train/Bus # Recorded	D CLASS Total # Citation:		Total Tr	AUTOMO Operating A	As Endorse	ements zMat Types		
0.1	HIT Vehi PAS Tota 2	AND RUN icle Type SSENGER CAR	Train/Bus # Recorded Direction Of Travel	D CLASS Total # Citation:	s Issued		AUTOMO Operating A	As Endorse	zMat Types		
l 0.1	HIT Vehi PAS Tota 2 Insu	AND RUN icle Type SSENGER CAR al Occs		D CLASS Total # Citation:	s Issued	Total Tr	AUTOMO Operating A	As Endorse Total Haz	zMat Types		
0.1	HIT Vehi PAS Tota 2 Insu UNI	AND RUN icle Type SSENGER CAR al Occs rance?	Direction Of Travel SOUTHBOUND	Total # Citation: 1 Pre Cra Ma Special Function	s Issued sshTire irk	Total Tr 0 Speed L	AUTOMO Operating A ailers Limit Emergency	Total Haz Total Lar Total Lar Motor Ver	zMat Types nes nicle Use		
ONI 01	HIT Vehi PAS Tota 2 Insu UNI Mos OTH	AND RUN icle Type SSENGER CAR al Occs rance? KNOWN t Harmful Event: Collision W HER NON-COLLISION	Direction Of Travel SOUTHBOUND	Total # Citations 1 Pre Cra Ma Special Functio NO SPECIAL	s Issued sshTire irk	Total Tr 0 Speed L	AUTOMO Operating A allers Limit Emergency NOT APP	As Endorse Total Ha: 0 Total Lar 2 Motor Ver	zMat Types nes nicle Use		
LO LINO	HIT Vehi PAS Tota 2 Insu UNI Mos OTI	AND RUN icle Type SSENGER CAR al Occs rance? KNOWN t Harmful Event: Collision W HER NON-COLLISION fic Way	Direction Of Travel SOUTHBOUND	Total # Citations 1 Pre Cra Ma Special Functio NO SPECIAL Traffic Control	s Issued shTire irk n . FUNCTION	Total Tr 0 Speed L	AUTOMO Operating A ailers imit Emergency NOT APP Traffic Con	As Endorse Total Ha: 0 Total Lar 2 Motor Ver	zMat Types nes nicle Use		
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LO CINIO OT	HIT Vehi PAS Tota 2 Insu UNI Mos OTI Traff TWO Surf: BLA Truc	AND RUN icle Type SSENGER CAR al Occs rance? KNOWN It Harmful Event: Collision W HER NON-COLLISION fic Way O-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOUS) Ek Bus or HazMat Vehicle License Plate Number AWX5803	Direction Of Travel SOUTHBOUND iith	Total # Citation: 1 Pre Cra Ma Special Functio NO SPECIAL Traffic Control NO CONTRO Road Curvature CURVE LEFT Plate Type AUT - AUTO	s Issued sshTire urk n . FUNCTION	Total Tr 0 Speed L 55	AUTOMO Operating A ailers Emergency NOT APP Traffic Con NO Road Grad LEVEL Country of Is UNITED S	Total Ha: 0 Total Lar 2 Motor Ver PLICABLE trol Inopera	zMat Types nes nicle Use		
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UNII U1 U1	HIT Vehi PAS Tota 2 Insu UNIH Mos OTH Traff TWO Surfa BLA Truc NO	AND RUN icle Type SSENGER CAR al Occs rance? KNOWN It Harmful Event: Collision W HER NON-COLLISION fic Way O-WAY, NOT DIVIDED ace Type ACKTOP (BITUMINOUS) Ick Bus or HazMat Vehicle License Plate Number AWX5803 Vehicle Identification Numb 1FAHP2E84DG149958 Color GRY - GRAY Initial Contact Point 00 - NON-COLLISION Extent Of Damage	Direction Of Travel SOUTHBOUND ith	Total # Citations 1 Pre Cra Ma Special Function NO SPECIAL Traffic Control NO CONTRO Road Curvature CURVE LEFT Plate Type AUT - AUTO Make FORD Body Style SD - SEDAN	s Issued sshTire urk FUNCTION L MOBILE	Total Tr 0 Speed L 55	AUTOMO Operating A ailers Emergency NOT APP Traffic Con NO Road Grad LEVEL Country of Is UNITED S Model TAURUS	Total Ha: 0 Total Lar 2 Motor Ver PLICABLE trol Inopera	zMat Types nes nicle Use ative/Missing		
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Crash Date 08/23/2024

Crash Time 99:99

		Towed Due To Damage		Vehicle Removed By						
		TOWED DUE TO DISABLING	OPERATOR							
		What Driver Was Doing	Vehicle Factors							
	Driver Prior Action Other			NOT APPLICABLE						
LINO	VEHICLE	Driver Actions SPEED TOO FAST/COND, FAILURE TO CONTROL, RAN OFF ROADWAY, FAILED TO KEEP IN DESIGNATED LANE, OPERATED MOTOR VEHICLE IN AGGRESSIVE/RECKLESS MANNER, OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER								
01	10	Owner Name SAMUEL GLAVIN (608) 547-8369		Owner Address N4077 SCHRADE RD. MONROE, WI 53566 , US						
		Sequence Of Events								
	01	Event DITCH								
	02	Event OVERTURN/ROLLOVER								
	03	Event								
	04	Event								
		ndividual								
		Driver	Citations Issued	Citations Issued Sex						
		UNKNOWN UNKNOWN	0							
_			Date of Birth	Race						
LINO	INDIVIDUAL	Address UNKNOWN UNKNOWN, ,	Driver License Number							
	Sat	On Duty Cr	ash	Safety Equipment						
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	RESTRAINT USE UNKNOWN						
		Helmet Use		Helmet Compliance						
		Eye Protection	Tint Compliance							
0	907	Injury Seve	rity RENT INJURY	Airbag NOT APPLICABLE						
		, ,	ection Path OT EJECTED/NOT APF	PLICABLE		Trapped/Extricated NOT APPLICABLE				
		Medical Transport NOT TRANSPORTED	EMS Agency Identifier		EMS Run #					
		Hospital	Date of Death		Time of Death					
		Distracted By UNKNOW	By Source /N							
		Distracted By Action UNKNOWN								
		Non Motorist Striking Uni	it# Location							

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		Prior Action								
UNIT	INDIVIDUAL	Action								
		Action Other							To/From School	
	L	Orug & Alcohol	Suspected .	Alcohol Us	e	Suspected Drug Use				
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type	1		Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Results			
01	001	Drug Type								
		Individual Condition								
		NOT OBSERVED								
	I	ndividual				Citations Issued Sex				
	Ļ	Passenger SAMUEL GLAVIN (608) 547-8369				Citations Issued 1 Date of Birth	MALE			
LINO	INDIVIDUAL						Race WHITE			
Š	INDI	Address N4077 SCHRADE RD MONROE, WI 53566 , US				Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES				
	Saf	On Duty Crash			Safety Equipment					
		Row 01 - FRONT ROW	Seat Position 09 - RIGHT			RESTRAINT USE UNKNOWN				
		Helmet Use				Helmet Compliance				
		Eye Protection				Tint Compliance				
5	002	Injury	Injury Severity NO APPARENT INJURY		JURY	Airbag NOT APPLICABLE				
		Ejected	Ej	ection Path	1	ICARI E		Trapped/Extricated		
		Medical Transport	NOT APPLICABLE NOT EJECTED/NOT APPL Medical Transport			EMS Agency Identifier		NOT APPLICABLE EMS Run #		
		NOT TRANSPORTED					T: (D !)			
		Hospital			Date of Death		Time of Death			
		Distracted By Source								
		Distracted By Action								
		Non Motorist	Striking Uni	t#	Location					
		Prior Action								

Crash Date **08/23/2024**Crash Time **99:99**

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		Action						
	٦							
⊨	700							
UNIT	N							
	INDIVIDUAL							
		Action Other						To/From School
	L	Orug & Alcohol	Suspected Alco	hol Use	Suspected Drug Use			
		Alcohol Test Given		Alcohol Test Type	1		Alcohol Test Results	
		TEST NOT GIVEN Drug Test Given		Drug Test Type		Drug Test Results		
		TEST NOT GIVEN		Diag rest type		Drug Test Nesults		
01	002	Drug Type						
	0							
		Individual Condition						
		NOT OBSERVED						
		Violations						
		UTC Number	Issue To?	Statute Number	Description			
	01	BG110309	002	346.70(1)	FAILURE OF OCCU	PANT TO NOTIF	Y POLICE OF ACCID	ENT