

6TL0DKRB27  
24-09739

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>24-09739</b>	Investigating Officer/Deputy <b>DEPUTY R. BARNES</b>	
Crash Date <b>08/31/2024</b>		Crash Time <b>09:16 PM</b>	Date Arrived <b>08/31/2024</b>	Time Arrived <b>09:21 PM</b>	
Date Notified <b>08/31/2024</b>		Time Notified <b>09:16 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 checked="" 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

<p>Diagram</p>	Reconstruction By
	Photos By <b>K. NUELLER</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 EAST ON HIGHWAY 12. AS THE OPERATOR OF UNIT 1 WAS TRAVELING SOUTH AND THE HIGHWAY CHANGED FROM HAVING A TRAFFIC BARRIER TO A MEDIAN WITH GRASS, THE OPERATOR BECAME CONFUSED ABOUT A TURN LANE, THINKING IT WAS A NEW LANE OF TRAVEL. WHEN THE OPERATOR OF UNIT 1 REALIZED THE LEFT TURN LANE WAS NOT A LANE OF TRAVEL, SHE OVER CORRECTED CAUSING HER TO LOSE CONTROL OF THE VEHICLE. THE VEHICLE OVER TURNED AND THE PASSENGER SUFFERED A CUT ON HIS WRIST.

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Location

ON USH12 EB 444 FT S OF LEHMAN RD IN THE TOWN OF SUMPTER IN SAUK COUNTY	Latitude <b>43.422566314</b>	Longitude <b>-89.773513891</b>
	X Coordinate <b>275485.84375</b>	Y Coordinate <b>4811478.5</b>
	Structure Type	

Crash Scene

First Harmful Event <b>OVERTURN/ROLLOVER</b>		First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>		Light Condition <b>DARK/UNLIT</b>	
Road Surface Condition(s) <b>DRY</b>		Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>			
Weather Condition(s) <b>CLEAR</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>	
Closure Type <b>LANE CLOSURE</b>		Reasons for Closure	
Date Initial Lane/Rd Closed <b>08/31/2024</b>	Time Initial Lane/Rd Closed <b>09:16 PM</b>	<b>LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS</b>	
Date All Lanes Open <b>08/31/2024</b>	Time All Lanes Open <b>10:09 PM</b>	Date Scene Cleared <b>08/31/2024</b>	Time Scene Cleared <b>10:09 PM</b>

Unit Summary

<b>UNIT</b>	Unit Status <b>IN TRANSIT</b>	Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>		
	Vehicle Type <b>(SPORT) UTILITY VEHICLE</b>			Operating As Endorsements		
	Total Occs <b>2</b>	Train/Bus # Recorded	Total # Citations Issued <b>1</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>YES</b>	Direction Of Travel <b>EASTBOUND</b>	<input type="checkbox"/> Pre CrashTire Mark	Speed Limit <b>55</b>	Total Lanes <b>4</b>	
	Most Harmful Event: Collision With <b>OVERTURN/ROLLOVER</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>DIVIDED HWY W/O TRAFFIC BARRIER</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>CURVE RIGHT</b>		Road Grade <b>HILLCREST</b>	
	Truck Bus or HazMat <b>NO</b>					
	<b>01</b>	<b>Vehicle</b>				
		License Plate Number <b>UX7083</b>		Plate Type <b>LTK - LIGHT TRUCK</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
<b>01</b>	Vehicle Identification Number <b>1FMZU77K64UA53422</b>		Make <b>FORD</b>	Year <b>2004</b>	Model <b>SPORTRAC</b>	

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UNIT VEHICLE	Color <b>BLK - BLACK</b>	Body Style <b>PK - PICKUP</b>	Bus Use
	Initial Contact Point <b>00 - NON-COLLISION</b>	Vehicle Damage	
	Extent Of Damage <b>DISABLING DAMAGE</b>	<b>15 - ALL AREAS</b>	
	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>		
UNIT VEHICLE	Driver Actions <b>FAILURE TO CONTROL, RAN OFF ROADWAY, FAILED TO KEEP IN DESIGNATED LANE</b>		
	Owner Name <b>GEORGIA HEFFELFINGER (608) 293-3201</b>	Owner Address <b>2144 17TH AVE MONROE, WI 53566 , US</b>	
UNIT	<b>Sequence Of Events</b>		
	01	Event <b>MOTOR VEH IN TRANSPORT</b>	
	02	Event	
	03	Event	
	04	Event	
UNIT	<b>Policy Holder</b>		
	Insurance Company <b>PROGRESSIVE-CASUALTY-INS-CO</b>	Individual <b>GEORGIA HEFFELFINGER</b>	
UNIT INDIVIDUAL	<b>Individual</b>		
	Driver <b>GEORGIA HEFFELFINGER (608) 293-3201</b>	Citations Issued <b>1</b>	Sex <b>FEMALE</b>
		Date of Birth	Race <b>WHITE</b>
	Address <b>2144 17TH AVE MONROE, WI 53566 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
UNIT	<b>Safety Equipment</b>		
	On Duty Crash	Safety Equipment	
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>SHOULDER &amp; LAP BELT</b>
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
UNIT	<b>Injury</b>	Injury Severity <b>NO APPARENT INJURY</b>	Airbag <b>NON DEPLOYED</b>
	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>
	Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier

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UNIT INDIVIDUAL	Hospital		Date of Death		Time of Death	
	<b>Distracted By</b>		Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>			
	Distracted By Action <b>NOT DISTRACTED</b>					
	<b>Non Motorist</b>		Striking Unit #		Location	
	Prior Action					
	Action					
	Action Other					To/From School
	<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	
01 001	Drug Type					
	Individual Condition <b>APPEARED NORMAL</b>					
	<b>Individual</b>					
	Passenger <b>MICHAEL HEFFELFINGER</b>			Citations Issued <b>0</b>	Sex <b>MALE</b>	
				Date of Birth	Race <b>WHITE</b>	
	Address <b>2144 17TH AVE MONROE, WI 53566 , US</b>			Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
	<b>Safety Equipment</b>		On Duty Crash		Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
	Row <b>01 - FRONT ROW</b>	Seat Position <b>09 - RIGHT</b>				
	Helmet Use			Helmet Compliance		
	Eye Protection			Tint Compliance		
01 002	<b>Injury</b>		Injury Severity <b>SUSPECTED MINOR INJURY</b>		Airbag <b>NON DEPLOYED</b>	
	Ejected <b>NOT EJECTED</b>		Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>		Trapped/Extricated <b>NOT TRAPPED</b>	
	Medical Transport <b>NOT TRANSPORTED</b>			EMS Agency Identifier		EMS Run #
	Hospital		Date of Death		Time of Death	

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<b>UNIT</b>	<b>Distracted By</b>		Distracted By Source		
	Distracted By Action				
	<b>Non Motorist</b>		Striking Unit #	Location	
	Prior Action				
	Action				
	Action Other			To/From School	
	<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				
<b>01</b>	<b>002</b>	Individual Condition			
		<b>APPEARED NORMAL</b>			
<b>01</b>	<b>Violations</b>				
	UTC Number <b>BI589648</b>	Issue To? <b>001</b>	Statute Number <b>346.13(1)</b>	Description <b>UNSAFE LANE DEVIATION</b>	