6TL0F1BQ89 24-11625

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

						055			
	Document Number Override	Primary Crash [3	ncy Crash Number 11625	Investigating Offi	g Officer/Deputy D. KROLIKOWSKI			
0	Crash Date 10/19/2024	Crash Time 06:40 AM		Arrived 19/2024	Time Arrived 06:44 AM				
מבו במ	Date Notified 10/19/2024	Time Notified 06:40 AM	Tota 01	I Units	Total Injured Total Kill		lled		
5	On Emergency	Hit and Run	Lane Closure	Work Zone	Trailer or Towed		Reporting Threshold		
	Government Property	Active Sc	hool Zone Sch	pol Bus Related	Tags				
,	▼ Reportable	Crash Type DT4000 (STA	NDARD CRASH)		Amended	Secondary Crash			
	Diagram				Ph D	otos By KROLIKO ditional Info	wski		
	I, a sworn law enforce VEHICLE WAS TRAVELING WE ROAD OVERSTEER OCCURRE	EST ON HWY 12 AT A	HIGH RATE OF SPEED V	HEN THE VEHICLE LEFT	THE ROADWAY TO IT'S	S LEFT. UPO	ON RETURNING TO THE		

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Crash Time 06:40 AM

L	.oc	ation								
		USH12 WB		Latitude			Longitu	ıde		
	0.36 MI S OF STH33 WB IN THE TOWN OF BARABOO IN SAUK COUNTY						43.505652602		-89.78	1397859
							X Coordinate		Y Coor	
							275156 4820727.5			
						Structure Type NO STRUCTURE				
C	ra	sh Scene								
П	First	Harmful Event				First Harm	nful Event Lo	ocation		
	DIT	CH				ON ROADWAY				
Ī	Man	ner of Collision				Light Con				
			HICLE IN TRANSPORT			DARK/UNLIT				
	Road DR Y	d Surface Condition(s)			Roadway Factor(s)					
		ronment Factor(s)				_				
	NOI				NONE					
L		ther Condition(s)								
		EAR								
		nal Type				Relation T	o Trafficwa	ı		
ľ		ы . у ро					CWAY - OI			
		h Classification - Location	1				ssification -			
	_	BLIC PROPERTY				NO SPECIAL JURISDICTION Access Control Special Study				
	Tribal Land				NO CONTROL					
	With NO	in Interchange Area	Junction Location NON-JUNCTION		Intersection NOT AN	on Type INTERSE	CTION			
L	Ini	t Summary =								
		Status		Vehicle Ope	erating As C	lassification	1	Unit Type		
	IN T	RANSIT		D CLASS		AUTOMOBILE				
. [Vehicle Type				Operating As E			s Endorse	ements	
		SENGER CAR								
	Total Occs Train/Bus # Recorde		Train/Bus # Recorded	Total # Citations Issued 2				Total HazMat Types 0		
		rance?	Direction Of Travel	Pre CrashTi		ire Speed Lir		imit Total Lanes		nes
١,	YES WESTBOUND			✓	Mark 65		65	4		
	Most Harmful Event: Collision With				Special Function Emergency Motor Vehicle NO SPECIAL FUNCTION NOT APPLICABLE					
- 1 '	OVERTORIN/ROLLOVER					TION				
		ic Way DED HWY W/O TRAF		Traffic Control Traffic Control NO CONTROL NO				ol Inopera	ative/Missing	
		ace Type	FIC BARRIER		Road Curvature STRAIGHT			_	Road Grade	
		NCRETE						LEVEL		
F	Truc	k Bus or HazMat								
+	NO,	Vehicle								
	License Plate Number Plate Type)		St	Country of Is	suance		
	Vehicle Identification Number JM1BM1W3XE1110656 Color RED - RED Initial Contact Point			, ,	AUT - AUTOMOBILE		IL	UNITED STATES		
				Make			Year	Model		
				MAZDA Pody Style			2014	3 Pue Hee		
					Body Style SD - SEDAN			Bus Use		
					Vehicle Damage					7 0 5 10 11
	힌 00 - NON-COLLISION						7 8 9 10 11 6 12			
	00 - NON-COLLISION Extent Of Damage DISABLING DAMAGE			15 - ALL	AREAS	5 4 3 2 1				3

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Crash Time 06:40 AM

		Towed Due To Damage		Vel	nicle Removed By				
		TOWED DUE TO DISABL	ING DAMAGE		AIGS TOWING				
		What Driver Was Doing		Vel	nicle Factors				
		GOING STRAIGHT							
		Driver Prior Action Other		- NC	T APPLICABLE				
		Driver Actions							
	Щ	EXCEED SPEED LIMIT, O	OPERATED MOTOR VE	HICLE	IN AGGRESSIVE/R	ECKLESS MAN	NER		
╘	CL								
LNO	VEHICLE								
_	VE								
		Owner Name			Owner Address				
_	7	SABRINA BURNETT			26 164TH PL CALUMET CITY, IL 60409 6202, US				
6	01				CALUMET CITY, IL	. 60409 6202, US	•		
		Sequence Of Events							
	01	Event DITCH							
	0	рисп							
	02	Event OVERTURN/ROLLOVER							
	0	OVERTURIN/ROLLOVER							
	03	Event FENCE							
	0								
	04	Event							
⊢	ı	Policy Holder							
		Insurance Company			Individual				
ر		STATE-FARM-MUTUAL-AUTOMOBILE-INS-CO			SABRINA BURNETT				
	ı	Individual							
	_	Driver D ANDRE TEMPLETON (773) 571-4569			Citations Issued Sex				
					2	MALE			
	JA				Date of Birth	Race			
╘	INDIVIDUAL								
	<u>></u>	Address 442 MADISON AVE CALUMET CITY, IL 60409 , US On Duty Crash			Driver License Number				
_	Ä				STATE: ILLINOIS COUNTRY: UNITED STATES				
	Sat	fety Equipment			Safety Equipment				
					SHOULDER & LAP BELT				
		Row 01 - FRONT ROW	Seat Position 07 - LEFT		SHOULDER & LAP I	DELI			
		Helmet Use	Or - LLI I	Helmet Compliance					
		Tiennet GGC			Tromet compilation				
		Eye Protection			Tint Compliance				
		,							
_	Ξ	Injury Severity			Airbag				
2	90	Injury NO APPARENT INJURY Ejected Ejection Path NOT EJECTED NOT EJECTED/NOT APP			DEPLOYED-SIDE				
							Trapped/Extricated		
					LICABLE		NOT TRAPPED		
		Medical Transport		E	EMS Agency Identifier EMS Run		EMS Run #		
		NOT TRANSPORTED							
		Hospital			Date of Death		Time of Death		
			1.10.0						
		Distracted By NOT A	ted By Source	RACT	FD)				
		Distracted By Action	a i LIOADEE (NOT DIST						
		NOT DISTRACTED							

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		Non Motorist	Striking Unit #	Location					
		Prior Action		•					
		Action							
	무								
LIND	<u>D</u>								
5	INDIVIDUAL								
	Z								
		Action Other						To/From School	
	ı	Drug & Alcohol	Suspected Alcoh YES	nol Use	Suspected Drug Use YES				
		Alcohol Test Given TEST GIVEN		Alcohol Test Type BLOOD	,		Alcohol Test Results PENDING		
		Drug Test Given TEST GIVEN	Drug Test Type		Drug Test Results				
_	_	Drug Type		BLOOD	PENDING				
2	90	0 ,,							
		Individual Condition							
		UNDER THE INFL	UENCE OF ME	DICATIONS/DRUGS	S/ ALCOHOL				
	,	Violations							
	2	UTC Number BK260877	Issue To? 001	Statute Number 346.63(1)(a)	Description OPERATING WHILE UNDER THE INFLUENCE				
	05	UTC Number BK260878	Issue To?	Statute Number 346.57(2)	Description FAILURE TO KEEP	VEHICLE UNDER	R CONTROL		
•	Pro	perty Owner							
01	Government STATE OF WI DOT				Address 4822 MADISON YARDS WAY				
PROP OWNER	(608	3) 264-7447			MADISON, WI 53705 , US				
	Fixe	Fixed Objects Struck							
	2	J -	uck Object NCE				Structure Number	Damage Tag Number 338113	
•	Wit	ness							
	Indiv				Address W10957 BAYVIEW DR	!		Date of Birth	
WITN 01 ESS 01	(608	3) 434-2374			LODI, WI 53555 , US				
WIT									