24-12443

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override 6TL0DQPGGK	Primary Crash Document # Crash Time 01:30 AM		24-12443DEfDate ArrivedTime			estigating Officer/Deputy EPUTY B. SONN		
5	Crash Date 11/08/2024					Time Arrived 01:41 AM			
	Date Notified 11/08/2024	Time Notified 01:30 AM		Total Units 01		Total Injured 00	-		
ן <i>כ</i>	On Emergency	t and Run 🔽 Lane Close		ure Work Zone		Trailer o	or Towed	Reporting Threshold	
׀ ב כ	Government Property	Active So	chool Zone	School NO	Bus Related	Tags			
	✓ Reportable	Crash Type DT4000 (STA	NDARD CRASH	H)		Amende	d	Secondary Crash	
	Description	-					Reconstructio		
	E2994 County Road B, Lone F	Rock, WI 5355	V	scale, p	ositions are approx		Photos By 9104 Additional Info PHOTOS, E BODY CAM	ormation DASH CAMERA VIDEO, IERA VIDEO	
	✓ I, a sworn law enforceme DRIVER 1 STATED SHE WAS TRAV MPH ZONE. DRIVER 1 STATED A D	ELING EASTBO	UND CTH B TOWA	RD PLAIN,	WI. DRIVER 1 STATED	SHE WAS TRAVELI	NG APPROXI	MATELY 65 MPH IN A 55	

MPH ZONE. DRIVER 1 STATED A DEER RAN INTO THE ROADWAY FROM THE OPPOSITE DITCH LINE. DRIVER 1 SAID SHE STARTED TO GO INTO THE EASTBOUND DITCH, OVER CORRECTED, AND WENT ACROSS THE ROAD INTO THE WESTBOUND DITCH, ULTIMATELY STRIKING THE POWER POLE. DRIVER 1 SHOWED NO SIGNS OF IMPAIRMENT. ALLIANT ENERGY ADDRESSED THE POWER LINES AND POLE. NACHREINERS TOWING REMOVED THE VEHICLE WHICH HAD DISABLING DAMAGE FROM THE COLLISION WITH THE POWER POLE. DRIVER 1 STATED SHE MIGHT HAVE BUMPED HER HEAD, WAS ASSESSED BY PLAIN EMBRIDARY AND DECLINED TRANSPORT. DRIVER 1 ISSUE A CITATION FOR FAILURE TO MAINTAIN CONTROL AND WRITTEN WARNING FOR SPEEDING.

ADDING PROPERTY OWNER

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ON CTHB 1277 FT W OF DANE HILL RD IN THE TOWN OF BEAR (
1277 FT W OF DANE HILL RD										
								Longitude -90.167447748		
IN THE TOWN OF BEAR				43.2514 X Coordin	dinate Y			linate		
	CREEK						479361			
IN SAUK COUNTY					Structure Type					
				Olidolare	Type					
Crash Scene										
First Harmful Event					First Harmful Event Location					
UTILITY POLE				OUTSIDE RIGHT-OF-WAY (TRAFFICWAY)						
Manner of Collision	Light Condition									
00 - NO COLLISION W/VE	HICLE IN TRANSPORT		DARK/UNLIT							
Road Surface Condition(s)				Roadway	Factor(s)					
DRY										
Environment Factor(s)										
ANIMAL (S) IN ROADWAY	۲			NONE	NONE					
Weather Condition(s)										
CLEAR										
Animal Type					Relation To Trafficway TRAFFICWAY - ON ROAD					
Crash Classification - Location	l				Crash Classification - Jurisdiction					
PUBLIC PROPERTY					NO SPECIAL JURISDICTION					
Tribal Land								Special Study		
Within Interchange Area	Junction Location		Intersection Type							
NO NON-JUNCTION			NOT AN INTERSECTION							
Closure Type	O N		Reasons for Closure							
CLOSURE-ONE DIRECTION	-		LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS, OTHER							
Date Initial Lane/Rd Closed	Time Initial Lane/Rd Clos	sed	LAW ENFOR	CEMENT, I	EMENT, TOW TROCK, FIRE/EMS, OTHER					
11/08/2024 Date All Lanes Open	02:01 AM Time All Lanes Open		Date Scene Clear		red Time		e Scene Cleared			
11/08/2024	03:03 AM		11/08/2024	areu			:04 AM			
Unit Summary	05.05 AM		11/08/2024		0.	5.04 AW				
Unit Status		Vehic	le Operating As	Classification	ı	Unit Type				
			D CLASS				OBILE			
Vehicle Type				Operating As Endorsements						
(SPORT) UTILITY VEHICL										
Total Occs	Train/Bus # Recorded	Total	# Citations Issue	ed	Total Tra	ilers	Total Haz	Mat Types		
1		1			0		0			
Insurance?	Direction Of Travel		Pre CrashTi	re	Speed Li	mit	Total Lanes			
YES	EASTBOUND	\checkmark	Mark		55		2			
			Special Function			Emergency Motor Ve				
			O SPECIAL FUNCTION							
				affic Control O CONTROL		Traffic Control Inoperative/Missing		tive/Missing		
Traffic Way					NO Road Gra		ada			
TWO-WAY, NOT DIVIDED			Road Curvature STRAIGHT			Road Grade				
TWO-WAY, NOT DIVIDED Surface Type										
TWO-WAY, NOT DIVIDED Surface Type CONCRETE						LEVEL				
TWO-WAY, NOT DIVIDED Surface Type						LEVEL				

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		License Plate Number	Pla	te Type	St	Country of Issuance					
		AXL6942	AU	т	UNITED STATES						
2	-	Vehicle Identification Number	Ma	ke	Year	Model					
	0	5FNYF8H28MB037861		ND	2021	PASSPORT					
		Color		dy Style		Bus Use					
				- SPORT UTILITY V nicle Damage	'EHICLE						
⊢	Ш	Initial Contact Point 01 - RIGHT FRONT CORNER		0		7 8 9 10 11					
UNIT	₽	Extent Of Damage		01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 03 - RIGHT SIDE MIDDLE, 04 - RIGHT SIDE							
	VEHICL			REAR, 12 - FRONT 5 4 3 2 1							
	-	Towed Due To Damage	Ve	Vehicle Removed By							
		TOWED DUE TO DISABLING DAMAGE		NACHREINERS							
		What Driver Was Doing	Vel	Vehicle Factors							
		OTHER									
		Driver Prior Action Other	NC	OT APPLICABLE							
		SWERVING TO AVOID NON DOM ANIMAL									
		Driver Actions 101,107,108,116,119									
⊢⊢	Ë										
UNIT	¥										
	VEHICLE										
	-										
		Owner Name		Owner Address							
2	2	BRIELLA HOLLANDS (608) 475-2025		1285 N CHURCH S		115					
0	0	(000) 473-2023		RICHLAND CENTER, WI 53581 , US							
		Sequence Of Events									
	0	UTILITY POLE									
	02	Event									
	03	Event									
	õ										
	8	Event									
		Policy Holder									
UNIT		Insurance Company		INDIVIDUAL							
5		PROGRESSIVE-NORTHWESTERN-INS-CO		BRIELLA HOLLANDS							
		Individual									
		DRIVER		Citations Issued	Sex						
	_	BRIELLA HOLLANDS		1	FEMALE						
	INDIVIDUAL	(608) 475-2025	(Date of Birth	Race						
⊨	ē				WHITE						
UNIT	2	Address 1285 N CHURCH ST		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES							
	Z	RICHLAND CENTER, WI 53581 , US	:								
				Safety Equipment							
		On Duty Crash	5								
	Sa	fety Equipment									
		Row Seat Position	:	SHOULDER & LAP BELT Helmet Compliance Tint Compliance							
		01 - FRONT ROW 07 - LEFT	I.								
		Helmet Use	'								
		Eye Protection									
5	001	Injury Severity		Airbag							
	õ	Injury NO APPARENT INJURY	1	DEPLOYED-SIDE							

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		Ejected	Eje	ection Pat	h			Trapped/Extricated		
		NOT EJECTED	N	OT EJEC	TED/NOT APPL	ICABLE		NOT TRAPPED		
		Medical Transport	I			EMS Agency Identifier		EMS Run #		
		NOT TRANSPO	RTED							
		Hospital				Date of Death		Time of Death		
		Distracted E	Distracted E	By Source						
	I									
		Distracted By Actio								
		Non Motori	Striking Uni	it #	Location					
		Prior Action								
		Action								
	INDIVIDUAL									
	D									
5	Σ									
	=									
	Action Other To/From School									
	Ľ	Drug & Alcoh	Suspected A	Alcohol Us	Se	Suspected Drug Use				
		Alcohol Test Giver			Alcohol Test Type	•		Alcohol Test Results		
		Drug Test Given TEST NOT GIVI	EN		Drug Test Type		Drug Test Results	3		
~	5	Drug Type								
2	001									
		Individual Conditio	n							
		APPEARED NO	KNIAL							
		Violations								
		UTC Number	Issue To?		ute Number	Description				
	01	BJ679051	001	346	.57(2)	FAILURE TO KEEP		R CONTROL		
- i	Pro	perty Owner	r 💻	•						
	ORG	ANIZATION/COMF				Address				
ء 01	ALL	LIANT ENERGY				4902 N BILTMORE MADISON, WI 53707 1077, US				
PROP OWNER										
	Fixe	d Objects St	ruck							
	_	•	Struck Object					Structure Number	Damage Tag Number	
	01	01	UTILITY POL	.E						