6TL0DQPGH1

24-13876

WISCONSIN MOTOR VEHICLE CRASH REPORT

	Document Number Override	Primary Crash Document #		Agency Crash NumberInvestigating24-13876DEPUTY B			Officer/Deputy B. SONN		
H	Crash Date 12/20/2024	Crash Time 04:02 AM		Date Arrived 12/20/2024		Time Arrived 04:21 AM			
S L C	Date Notified 12/20/2024	Time Notified 04:02 AM	Total U 01	Inits	Total Injured 00	Total Kille 00	Total Killed 00		
6 I LUDQPGH1	On Emergency	and Run	Closure	Work Zone	Trailer	or Towed	Reporting Threshold		
	Government Property	Active School Zone	School	Bus Related	Tags				
9	Reportable	Crash Type DT4000 (STANDARD C	RASH)		Amend	ed	Secondary Crash		
l	Description Diagram						•		
						Photos By Additional Info			
	SLIC	DE OFF	ave not adde	d any C.IIS data in t	his renort	DASH CAMI	ERA VIDEO, BODY DEO		
	SLIDE OFF, NO INJURIES, PULLED								

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L	oc	ation 🛛 🗖									
		CTHP EB			Longit	Longitude					
	232 FT W						43.590557865			-89.838249571	
	OF HERWIG RD IN THE TOWN OF DELLONA IN SAUK COUNTY						X Coordinate		Y Coordinate		
							270882.09375 4830313				
			Structure	Туре							
C	ra	sh Scene									
F	irst	Harmful Event				First Harm	nful Event Lo	ocation			
1	ЭΠΟ	СН				ON ROA	DWAY				
Ν	Man	ner of Collision				Light Con	dition				
0)0 -	NO COLLISION W/VE	HICLE IN TRANSPORT			DARK/U	NLIT				
F	Road	Surface Condition(s)				Roadway	Factor(s)				
5	SNC	OW, ICE									
E	Envii	ronment Factor(s)									
١	NE	ATHER CONDITIONS				NONE					
1	Nea	ther Condition(s)				1					
	SNC										
	Anim	al Type				Relation T	o Trafficwa	1			
ľ		·)F -					CWAY - OI				
(Cras	h Classification - Location	1				ssification -				
F	PUBLIC PROPERTY					NO SPECIAL JURISDICTION					
٦	Tribal Land				Access Control Special Study NO CONTROL						
1	Nith	in Interchange Area	Junction Location		Intersectio						
	NO	0	NON-JUNCTION			INTERSE	CTION				
Ū	ni	t Summary									
		Status		Vehicle Op	erating As C	lassification	1	Unit Type			
1	ΝТ	RANSIT		D CLASS		AUTOMOBILE					
	Vehicle Type					Operating As Endorsements					
F	PASSENGER CAR										
٦	Total Occs Train/Bus # Recorded				Total # Citations Issued Tota			ers	Total Ha	HazMat Types	
	1		0	0			0		0		
	Insurance? Direction Of Travel			Pre	CrashTire					nes	
	YES EASTBOUND				Mark 55 2				hiala Llaa		
		Harmful Event: Collision		O SPECIAL FUNCTION Emergency Motor Vehicle Use NOT APPLICABLE							
	DITCH NO SPECIAL FUN Traffic Way Traffic Control									ative/Missing	
	rwo-way, NOT DIVIDED NO CONTROL					NO				·····	
	Surface Type Roa			Road Curva				Road Grade			
0				STRAIGH	STRAIGHT			UPHILL			
	Fruc	k Bus or HazMat		I							
ľ	NO										
		Vehicle					St.	Country of !-			
		License Plate Number APV5016		Plate Type St AUT WI			Country of Issuance UNITED STATES				
		Vehicle Identification Nur		AU I Make		Year Model					
	5 3FA6P0K9XGR400343 Color BLK - BLACK				FORD Body Style		2016	Model FUSION Bus Use			
					SD - SEDAN						
	Initial Contact Point		Vehicle Da								
i	00 - NON-COLLISION Extent Of Damage NO DAMAGE									7 8 9 10 11	
				00 - NO	00 - NO DAMAGE						
					5 4 3 2 1						

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		Towed Due To Damage		Veh	icle Removed By				
		NOT TOWED		ow	OWNER				
		What Driver Was Doing		Veh					
		GOING STRAIGHT							
		Driver Prior Action Other		NO	T APPLICABLE				
		Driver Actions							
	ш	SPEED TOO FAST/COND							
⊢	2								
UNIT	¥								
>	VEHICLE								
	>								
		Owner Name		1	Owner Address				
		KEMESHA BURRY			2127 WISCONSIN I	DELLS PKWY			
3	0				WISCONSIN DELL		S		
-									
		Sequence Of Events							
	0	Event DITCH							
	•	Event							
	02								
	03	Event							
		Event							
	04								
F	1	Policy Holder							
UNIT		Insurance Company			NDIVIDUAL				
		PROGRESSIVE-UNIVERSA	L-INSURANCE-COMP						
		Individual							
		DRIVER KEMESHA BURRY			itations Issued	Sex			
					itations issued	FEMALE			
	AL				Date of Birth Race				
F	INDIVIDUAL								
UNIT	Σ	Address			Driver License Number				
	ð	2127 WISCONSIN DELLS P		STATE: NEW YORK COUNTRY: UNITED STATES					
	=	WISCONSIN DELLS, WI 53	965,US	3	TATE: NEW YORK	COUNTRY: UNI	IED STATES		
	0	On Duty C	Crash	S	afety Equipment				
	Sal	fety Equipment							
		Row Seat Position		SHOULDER & LAP BELT					
		01 - FRONT ROW	07 - LEFT						
		Helmet Use		Helmet Compliance					
		Fue Desta stice							
		Eye Protection		Tint Compliance					
	—	Injury Severity			Airbag				
5 6 Injury Albag NO APPARENT INJURY NON DEPLOYED									
	-		jection Path			Trapped/Extricated			
		NOT EJECTED NOT EJECTED/NOT APPI			LICABLE		NOT TRAPPED		
	Medical Transport NOT TRANSPORTED			EMS Agency Identifier			EMS Run #		
					5 ,				
		Hospital			ate of Death		Time of Death		
		Distracted By NOT AP	By Source	АСТ	ED)				
		Distracted By Action	,		,				
	NOT DISTRACTED								

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		Non Motorist	Striking Unit #	Location					
		Prior Action							
UNIT	INDIVIDUAL	Action							
		Action Other						To/From School	
	L	Drug & Alcohol	Suspected Alcohol U NO	se	Suspected Drug Use			l	
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results		
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results			
0	001	Drug Type		I					
		Individual Condition							
		APPEARED NORM	IAL						