WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Document Number Overrid	le Primary Crash	25-00		SERGEAN ⁻	ting Officer/Deputy ANT E. KNULL			
Crash Date 01/22/2025	Crash Time 02:33 PM		Date Arrived 01/22/2025		Time Arrived 02:33 PM			
01/22/2025 Date Notified 01/22/2025 On Emergency Government Property	Time Notified 02:33 PM	Total 01	Jnits	Total Injured 00	Total Kille	∍d		
On Emergency	Hit and Run	Lane Closure	Work Zone	Trailer	or Towed	Reporting Threshold		
Government Property		chool Zone School	l Bus Related	Tags				
✓ Reportable	Crash Type DT4000 (STA	ANDARD CRASH)		Amende	ed	Secondary Crash		
Description Diagram				ı	Reconstructio	_		
	STH	136	STH 23	OT TO CALE	Photos By Additional Info	ormation		
		ee that I have not adde						
UNIT 1 NEGOTIATING ROU REPORTED. OPERATOR A WORKS UNLIMITED	JND ABOUT EB AND DUE DMITTED TO NOT HAVIN	TO SNOWY/SLIPPERY RO IG INSURANCE. CITATION	AD STRUCK THE CŪRĒ ISSUED FOR OPERATE	CAUSING DISABLIN WITHOUT INSURAN	IG DAMAGE TO ICE. VEHICLE	O VEHICLE. NO INJURIES REMOVED BY AUTO		

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L	.oc	ation 								
		STH136 EB				Latitude			Longitu	ıde
	34 FT S					43.53239	93185		-89.95	4799338
	OF STH23 EB IN THE TOWN OF REEDSBURG					X Coordinate		Y Coor	dinate	
	IN THE TOWN OF REEDSBURG									81
							Type UCTURE			
C	ra	sh Scene								
_	-	Harmful Event				First Harm	nful Event L	ocation		
- 1	CUF	RB				ROADSI	DE			
h	Manı	ner of Collision				Light Cond	dition			
- 1	00 -	NO COLLISION W/VE	EHICLE IN TRANSPORT			DAYLIG	HT			
Ī	Road	Surface Condition(s)				Roadway	Factor(s)			
ŀ	WE	Γ, SNOW								
h	Envir	ronment Factor(s)								
,	WE	ATHER CONDITIONS				ROAD S	URFACE	CONDITION	(WET, I	CY, SNOW, SLUSH,
-	Wea	ther Condition(s)				1 '				
	SNC	` '								
H	Anim	al Type				Relation To Trafficway				
		2.					CWAY - O	-		
-	Cras	h Classification - Location	ı			Crash Cla	ssification -	Jurisdiction		
	PUBLIC PROPERTY					NO SPECIAL JURISDICTION				
	Tribal Land					Access Control Special Study NO CONTROL				
		n Interchange Area	Junction Location			ection Type				
L	NO		INTERSECTION		ROUND	ABOUT				
		Summary =								
		Status				Classification Unit Type				
	N TRANSIT D CLASS				AUTOMOBILE Operating As Endorsements					
- 1		/ehicle Type PASSENGER CAR						Operating A	S LIIUUIS	ements
L		Occs	Train/Bus # Recorded	Total # Cita	tions Issued		I Total Trai	lers	Total Ha	zMat Types
	1			1 Pre CrashTire		0 Fire Speed Lin		Speed Limit Total Lanes		,,
h	Insur	ance?	Direction Of Travel							nes
	NO	O EASTBOUND					45			2
١.		Harmful Event: Collision	With		Special Function NO SPECIAL FUNCTION Traffic Control NO CONTROL Road Curvature		•	Emergency Motor Vehicle Use NOT APPLICABLE		
Ľ	CUF									
		ic Way							Traffic Control Inoperative/Missing NO Road Grade	
		D-WAY, NOT DIVIDED	,							
	Surface Type CONCRETE				CURVE LEFT			DOWNHILL		
		k Bus or HazMat		JONALE		DOWN		DOMINIE		
	NO									
	'	Vehicle								
		License Plate Number		Plate Type St			Country of Issuance			
		AYR5100		AUT WI			UNITED STATES			
	01	Vehicle Identification Nu 2G4WD56295122535	Make	Make BUIC		Year	Model LACROSSE			
	J	Color	Body Style							
		RED - RED	SD - SED		Bus Use					
	ш			Vehicle Da				I		
		00 - NON-COLLISIO		-	7 8 9 10 11					
	ပ		• •							
	/EHICL	Extent Of Damage DISABLING DAMAG		01 - RIG	HT FRON	CORNE	₹			6

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		Towed Due To Damage TOWED DUE TO DISABLE	NG DAMAGE	Vel	hicle Removed By				
		What Driver Was Doing		Vel	hicle Factors				
		NEGOTIATING CURVE	9						
		Driver Prior Action Other		NC	OT APPLICABLE				
LINO	VEHICLE	Driver Actions SPEED TOO FAST/COND		•					
01	01	Owner Name LINDSEY GIECK (608) 588-4183			Owner Address 255 E RICHLAND ST LONE ROCK, WI 53556 , US				
		Sequence Of Events							
	01	Event CURB							
	02	Event							
	03	Event							
	04	Event							
	i	Individual							
		DRIVER LINDSEY GIECK			Citations Issued Sex				
	INDIVIDUAL				1	FEMALE			
⊨					Date of Birth	Race WHITE			
L N	<u>></u>				Driver License Number				
	Z	LONE ROCK, WI 53556 ,	;	STATE: WISCONSIN COUNTRY: UNITED STATES					
	Sat	On Duty fety Equipment	Crash	;	Safety Equipment				
		Row Seat Position 01 - FRONT ROW 07 - LEFT			SHOULDER & LAP BELT				
		Helmet Use	•	!	Helmet Compliance				
		Eye Protection			Tint Compliance				
2	001	Injury Se	=		Airbag				
	0	Ejected NO API	PARENT INJU	RY	NON DEPLOYED		Trapped/Extricated		
		NOT EJECTED NOT EJECTED/NOT APPL			ICABLE		NOT TRAPPED		
					EMS Agency Identifier		EMS Run #		
	NOT TRANSPORTED Hospital			Date of Death		Time of Death			
		Distracted By NOT AF	d By Source PPLICABLE (N	OT DISTRACT	ΓED)				
		Distracted By Action NOT DISTRACTED	1-: LH 1-1						
		Non Motorist	Unit # Loc	cation					

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		Prior Action						
		Action						
	_							
١.	¥							
LNO	Ē							
5	INDIVIDUAL							
	Ξ							
		Action Other						To/From School
		Drug & Alcohol	Suspected Alco	hol Use	Suspected Drug Use			
		_	NO					
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type			Alcohol Test Results	
		Drug Test Given		Drug Test Type		Drug Test Results		
		TEST NOT GIVEN		3 71		Drug root roound		
10	001	Drug Type		<u> </u>				
•	0							
		Individual Condition						
		APPEARED NORM	Λ ΔΙ					
		AIT LAKED NOKI						
	1	Violations						
	2	UTC Number	Issue To? 001	Statute Number 344.62(1)	Description OPERATE MOTOR \	/EHICLE W/O IN	SURANCE	
	0	BK261941	001	· · · · • = (· /	5. 2.0 (12 mo 10)((