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19-15612

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 19-15612	Investigating Officer/Deputy DEPUTY S. FINNEGAN	
Crash Date 12/22/2019		Crash Time 02:55 PM	Date Arrived 12/22/2019	Time Arrived 03:07 PM	
Date Notified 12/22/2019		Time Notified 02:58 PM	Total Units 01	Total Injured 01	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input 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 NO		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram 	Reconstruction By
	Photos By
	Additional Information NONE

I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

UNIT 1 WAS E/B ON USH 14 WHEN DRIVER STATED HE FELL ASLEEP AND WHEN HE WOKE UP HE WAS GOING OFF THE ROADWAY. HE STATED HE SWERVED TO THE RIGHT IN BETWEEN A COUPLE SIGNS AND INTO THE GRASS AREA WHERE HE THEN WENT OVER A DRIVEWAY AND INTO THE DITCH AGAIN. HE CAME TO REST IN THE PECKS MARKET PARKING LOT.

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Location

ON USH14 EB 0.57 MI W OF DONALD RD IN THE TOWN OF SPRING GREEN IN SAUK COUNTY	Latitude 43.190806059	Longitude -90.157810587
	X Coordinate 243401.546875	Y Coordinate 4786846
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event DITCH	First Harmful Event Location OUTSIDE RIGHT-OF-WAY (TRAFFICWAY)	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAYLIGHT	
Road Surface Condition(s) DRY	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLEAR		
Animal Type	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION

Unit Summary

UNIT 01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE		
	Vehicle Type (SPORT) UTILITY VEHICLE			Operating As Endorsements		
	Total Occs 2	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2	
	Most Harmful Event: Collision With DITCH		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO	
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature STRAIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

UNIT 01	Vehicle					
	VEHICLE 01	License Plate Number 210ZMK	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
		Vehicle Identification Number 5FN9F4H9XFB049891	Make HONDA	Year 2015	Model PILOT TOUR	
		Color BRZ - BRONZE	Body Style UT - SPORT UTILITY VEHICLE		Bus Use	
		Initial Contact Point 12 - FRONT	Vehicle Damage			
Extent Of Damage FUNCTIONAL DAMAGE	04 - RIGHT SIDE REAR, 12 - FRONT, 14 - UNDERCARRIAGE					

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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions RAN OFF ROADWAY, FAILED TO KEEP IN DESIGNATED LANE, OPERATED MOTOR VEHICLE IN INATTENTIVE, CARELESS OR ERRATIC MANNER			
01	Owner Name PIXEL BOX VISUAL DISIGN LTD (262) 227-4975		Owner Address 14750 W CAPITOL DR BROOKFIELD, WI 53005 2351, US	
	Sequence Of Events			
01	01	Event RUN OFF ROADWAY RIGHT		
	02	Event DITCH		
	03	Event		
	04	Event		
UNIT	Policy Holder			
	Insurance Company HANOVER-INS-CO,-THE		Organization/Company PIXEL BOX VISUAL DISIGN LTD	
UNIT INDIVIDUAL	Individual			
	Driver MATTHEW J NIES (262) 227-4975		Citations Issued 0	Sex MALE
	Address 2430 BROOKSPRINGS DR BROOKFIELD, WI 53005 , US		Date of Birth	Race WHITE
			Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES	
01	Safety Equipment		On Duty Crash	
	Row 01 - FRONT ROW		Seat Position 07 - LEFT	
			Safety Equipment SHOULDER & LAP BELT	
	Helmet Use		Helmet Compliance	
	Eye Protection		Tint Compliance	
	Injury		Injury Severity NO APPARENT INJURY	Airbag NON DEPLOYED
	Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED
Medical Transport NOT TRANSPORTED		EMS Agency Identifier	EMS Run #	
Hospital		Date of Death	Time of Death	
Distracted By		Distracted By Source OTHER DISTRACTION (ANIMAL, FOOD, GROOMING)		
		Distracted By Action OTHER ACTION (LOOKING AWAY FROM TASK ETC)		

WISCONSIN MOTOR VEHICLE
CRASH REPORT

UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
01	001	Action Other					
		To/From School					
		Drug & Alcohol		Suspected Alcohol Use NO	Suspected Drug Use NO		
		Alcohol Test Given TEST NOT GIVEN		Alcohol Test Type		Alcohol Test Results	
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	
		Drug Type					
		Individual Condition APPEARED NORMAL					
		Individual					
		Passenger SANDRA JEAN NIES (262) 227-1860			Citations Issued 0		Sex FEMALE
		Address 2430 BROOKSPRINGS DR BROOKFIELD, WI 53005 , US			Date of Birth STATE: WISCONSIN COUNTRY: UNITED STATES		
Driver License Number		Race WHITE					
01	002	Safety Equipment		On Duty Crash			
		Safety Equipment SHOULDER & LAP BELT					
		Row 01 - FRONT ROW	Seat Position 09 - RIGHT				
		Helmet Use			Helmet Compliance		
		Eye Protection			Tint Compliance		
		Injury		Injury Severity SUSPECTED MINOR INJURY		Airbag DEPLOYED-CURTAIN	
		Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED	
Medical Transport NOT TRANSPORTED			EMS Agency Identifier		EMS Run #		
Hospital			Date of Death		Time of Death		
Distracted By		Distracted By Source					
Distracted By Action							
Non Motorist		Striking Unit #		Location			

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CRASH REPORT

UNIT	INDIVIDUAL		
	Prior Action		
	Action		
	Action Other		To/From School
	Drug & Alcohol	Suspected Alcohol Use NO	Suspected Drug Use NO
	Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	Alcohol Test Results
	Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results
	Drug Type		
	Individual Condition APPEARED NORMAL		
	01	002	