6TL09JDKXV 19-15648

WISCONSIN MOTOR VEHICLE CRASH REPORT

Document Number Override	Primary Crash	Primary Crash Document # Crash Time 08:52 AM Time Notified 08:54 AM		Agency Crash Number 19-15648 Date Arrived 12/23/2019 Total Units 01		Investigating Officer/Deputy DEPUTY B. SCHLOUGH			
Crash Date 12/23/2019						Time Arrived 09:10 AM			
Date Notified 12/23/2019 On Emergency Government Property						Total Kille	ed		
On Emergency	Hit and Run	✓ Lane Clos		☐ Work Zone		or Towed	Reporting Threshold		
Government Property		chool Zone	School NO	Bus Related	Tags				
✓ Reportable	Crash Type DT4000 (STA	ANDARD CRASI	H)		Amend	ed	Secondary Crash		
Description Diagram						Reconstruction			
	U	Photos By							
		CTH O				Additional Information NONE			
DRAWING NOT TO	I SCALE								
UNIT 1 WAS TRAVELING E/B C						LINIT 1 THEN	LOST CONTROL ON A ICY		
PATCH CAUSING UNIT 1 TO G	O INTO A CLOCKWIS	SE SKID. UNIT 1 TH	HEN LEFT						

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ı	OC.	ation ——									
_		CTHO EB					Latitude			Longitud	10
	_	TW	43.278687469			_	3368654				
		CHURCH RD				-					
	_	HE TOWN OF TROY		X Coordina			Y Coord				
	IN S	AUK COUNTY		269286.0625 4795689.5			39.5				
				Structure 7	Туре						
C	:ra	sh Scene									
	-	Harmful Event						f F .			
								Iful Event Lo			
		RTURN/ROLLOVER		SHOULDER RIGHT							
		ner of Collision	Light Cond								
	00 - NO COLLISION W/VEHICLE IN TRANSPORT							HT			
	Road	Surface Condition(s)					Roadway	Factor(s)			
	ICE										
L											
	⊏⊓VIľ	onment Factor(s)									
	NON	IE					NONE				
H	West	her Condition(s)									
		()									
	CLE	AR									
H	Anim	al Type					Relation T	o Trafficway	/		
		÷ •						CWAY - O			
H	Crael	n Classification - Location						ssification -			
		LIC PROPERTY							ISDICTION		
		Land							ISDICTION		Chaoial Study
	Пиа	Lanu					Access Control Special Study				
L						r	NO CONTROL				
		n Interchange Area	Junction Location				Intersection Type				
	NO		NON-JUNCTION			NOT AN	NINTERSECTION				
	Closure Type Reasons for Clos						sure				
	FUL	L CLOSURE									
	Date	Initial Lane/Rd Closed	Time Initial Lane/Rd Close	ed	LAW	ENFORC	DRCEMENT, TOW TRUCK, FIRE/EMS				
	12/2	3/2019	09:10 AM								
	Date	All Lanes Open	Time All Lanes Open		Date S	Scene Clear	red Time		ne Scene Cleared		
	12/2	3/2019	09:40 AM		12/23/2019			09:45 AM			
ī	Init	Summary									
		Status		Vohi	cla Onc	rating As C	lassification		Linit Tuna		
	-				LASS	rating As C	addinoution		Unit Type AUTOMOBILE		
		RANSIT		DC	LASS				Operating As Endorsements		
- 1		cle Type							Operating As Endorsements		ments
L		SENGER CAR									
		Occs	Train/Bus # Recorded		I # Citat	ions Issued		Total Trail	ers		Mat Types
	2			0	0		0		0		
		ance?	Direction Of Travel		Pre	CrashTire	e Speed Lir				es
: l	YES		EASTBOUND			Mark	55		2		
	Most	Harmful Event: Collision \	Vith		cial Fun				Emergency		
,	OVERTURN/ROLLOVER NC					NO SPECIAL FUNCTION		TION		LICABLE	
r	Traffic Way Tra					rol			Traffic Control Inoperative/Missing		
-	TWO-WAY, NOT DIVIDED NO					NO CONTROL			NO		
	Surface Type Roa				Road Curvature			Road Grade			
					CURVE RIGHT				LEVEL		
		uck Bus or HazMat							I		
	NO	C Duo Oi i idanidi									
_		, , , ,									
	1	/ehicle									
	License Plate Number				Plate Type		St Country of Issuance				
	AGJ1168			AU	AUT - AUTOMOBILE		.E	WI	VI UNITED STATES		
_	_	Vehicle Identification Nur	mber	Mal	Make			Year	Model		
5	5 1G8ZH52891Z249209					SATURN		2001 SL1			
							i				

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		Color		Body Style	Bus Use							
		BLU - BLUE Initial Contact Point		4D - 4DR Vehicle Damage								
⊢	쁫	03 - RIGHT SIDE MIDDLE		venicie Damage								
UNIT	VEHICL	Extent Of Damage		15 - ALL AREAS								
	M	DISABLING DAMAGE										
		Towed Due To Damage TOWED DUE TO DISABLING		Vehicle Removed By EVERETTS TOWING								
		What Driver Was Doing		Vehicle Factors								
		NEGOTIATING CURVE										
		Driver Prior Action Other		NOT APPLICABLE								
		Driver Actions										
	ш	SPEED TOO FAST/COND, FAILURE TO CONTROL										
╘	VEHICL											
UNIT	표											
	>											
		Owner Name		Owner Address								
01	5	ARIANNA RAIN MEIXELSPE (608) 495-2952	ERGER	E6817 OSCHNER RD PLAIN, WI 53577 , US								
0	0	(000) 493-2932										
	,	Sequence Of Events										
		Event										
	5	OVERTURN/ROLLOVER										
	05	Event										
	03	Event	ent									
	04	Event										
⊢ Policy Holder												
UNIT		Insurance Company Individual ADJANNA MEIVEL SPERCER										
ا ر		PROGRESSIVE-CASUALTY	-INS-CO	ARIANNA MEIXELSPERGER								
	ı	Individual Driver		Citations Issued	Cov							
		ARIANNA RAIN MEIXELSPE	ERGER	0	Sex FEMALE							
	DUAI	(608) 495-2952		Date of Birth	Race							
╘	₫				WHITE							
N	INDIN	Address E6817 OSCHNER RD		Driver License Number								
	Z	PLAIN, WI 53577 , US		STATE: WISCONSIN COUNTRY: UNITED STATES								
	Sat	On Duty Ci fety Equipment	rash	Safety Equipment								
		Row	Seat Position	SHOULDER & LAP BELT								
		01 - FRONT ROW	07 - LEFT									
		Helmet Use		Helmet Compliance								
		Eye Protection		Tint Compliance								
		Laine Con-	ait.									
01	90		TED MINOR INJURY	NON DEPLOYED								
		_ · ·	ection Path OT EJECTED/NOT APPI	LICARI F	Trapped/Extricated TRAPPED/EXTRICATED							
		Medical Transport	C. LULUILD/NOT AFFI	EMS Agency Identifier	EMS Run #							
		EMS GROUND		6000555								

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WISCONSIN MOTOR VEHICLE CRASH REPORT

		Hospital				Date of Death		Time of Death				
		SAUK PRAIRIE HOSP										
		Distracted By	Distracted E	By Source	E (NOT DISTRAC	CTED)						
		Distracted By Action NOT DISTRACTED										
		Non Motorist	Striking Uni	t #	Location							
		Prior Action										
		Action										
_	UAL											
LNO	INDIVIDUAL											
	Z											
		Action Other							To/From School			
	L	Drug & Alcohol	Suspected .	Alcohol U		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					
5	001	Drug Type										
		Individual Condition										
		APPEARED NORM	MAL									
	i	Individual										
		Passenger	DEDOED			Citations Issued		Sex				
	7	RYAN H MEIXELS (608) 588-5750	PERGER			0		MALE				
⊨	IDINIDUAL				Date of Birth		Race WHITE					
LIND	\leq	Address E6817 OSCHNER	DD.			Driver License Number						
	N	PLAIN, WI 53577				STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sat	fety Equipment	On Duty Cr	ash		Safety Equipment						
Row					sition GHT	SHOULDER & LAP BELT						
		Helmet Use				Helmet Compliance						
	Eye Protection					Tint Compliance						
5	005	Injury Severity NO APPARENT INJURY				Airbag NON DEPLOYED						
		Ejected Ejection Path NOT EJECTED NOT EJECTED/NOT APPI				Trapped/Extricat			.TED			
		Medical Transport NOT TRANSPORTED				EMS Agency Identifier EMS Run #						
		Hospital				Date of Death		Time of Death				
						1						

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WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 12/23/2019

Crash Time 08:52 AM

		Distracted By	Distracted By Source					
		Distracted By Action						
		Non Motorist	Striking Unit #	Location				
		Prior Action						
		Action						
	UAL							
UNIT	INDIVIDUAL							
	N N							
		Action Other						To/From School
		Action Other						10/From School
	ı	Drug & Alcohol	Suspected Alcohol U NO	se	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		
10	005	Drug Type		<u> </u>				
		Individual Condition						
		APPEARED NORI	MAL					