

6TL0BC3B40
20-00473

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 20-00473	Investigating Officer/Deputy DEPUTY W. VERTEIN	
Crash Date 01/12/2020		Crash Time 10:07 AM	Date Arrived 01/12/2020	Time Arrived 10:43 AM	
Date Notified 01/12/2020		Time Notified 10:10 AM	Total Units 01	Total Injured 00	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 checked="" 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

<p>Diagram</p>	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.

ON THE DESCRIBED DATE, TIME, AND LOCATION, UNIT 1 WAS TRAVELING WESTBOUND. WHILE THE OPERATOR WAS ATTEMPTING TO NEGOTIATE A CURVE, SHE LOST CONTROL OF UNIT 1 TO DUE SPEED AND SLUSHY ROAD CONDITIONS. UNIT 1 SPUN AROUND AND ENTERED THE SOUTHERNMOST DITCH LINE WHERE IT STRUCK A GUIDE WIRE ON A UTILITY POLE AND EVENTUALLY CAME TO REST. NO REPORTED INJURIES.

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Location

ON KENNEDY RD 659 FT E OF PEARL RD IN THE TOWN OF SPRING GREEN IN SAUK COUNTY	Latitude 43.175462534	Longitude -90.091669513
	X Coordinate 248713.40625	Y Coordinate 4784941
	Structure Type	

Crash Scene

First Harmful Event UTILITY POLE	First Harmful Event Location SHOULDER LEFT	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DAYLIGHT	
Road Surface Condition(s) WET, SLUSH	Roadway Factor(s) NONE	
Environment Factor(s) NONE		
Weather Condition(s) CLOUDY		
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 PASSENGER CAR				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 WESTBOUND	<input checked="" type="checkbox"/> Pre CrashTire Mark	Speed Limit 45	Total Lanes 2	
	Most Harmful Event: Collision With UTILITY POLE		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 CURVE RIGHT		Road Grade LEVEL	
	Truck Bus or HazMat NO					

UNIT 01	Vehicle						
	VEHICLE 01	License Plate Number AFL9929		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
		Vehicle Identification Number 19XFA1F58AE022322		Make HONDA	Year 2010	Model CIVIC	
		Color SIL - SILVER (ALUMINUM)		Body Style SD - SEDAN		Bus Use	
		Initial Contact Point 07 - LEFT REAR CORNER		Vehicle Damage			
Extent Of Damage DISABLING DAMAGE		01 - RIGHT FRONT CORNER, 06 - REAR, 07 - LEFT REAR CORNER, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT					

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UNIT VEHICLE	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By GEORGES AUTO BODY			
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors			
	Driver Prior Action Other		NOT APPLICABLE			
	Driver Actions SPEED TOO FAST/COND, FAILURE TO CONTROL, RAN OFF ROADWAY, FAILED TO KEEP IN DESIGNATED LANE					
01	01	Owner Name MALEAH N KERN (608) 393-2242		Owner Address E4802 SNYDER RD SPRING GREEN, WI 53588 , US		
		Sequence Of Events				
UNIT INDIVIDUAL	01	01	Event CROSS CENTERLINE			
		02	Event RUN OFF ROADWAY LEFT			
		03	Event DITCH			
		04	Event UTILITY POLE			
UNIT	Policy Holder					
	Insurance Company ERIE-INS-CO		Individual EMILLY LISSY			
UNIT	INDIVIDUAL	Individual				
		Driver EMILLY LAYNE LISSY (563) 886-7122		Citations Issued 0	Sex FEMALE	
		Address E4802 SNYDER RD SPRING GREEN, WI 53588 , US		Date of Birth	Race WHITE	
		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES				
01	001	Safety Equipment		On Duty Crash	Safety Equipment	
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	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 NOT APPLICABLE (NOT DISTRACTED)				
Distracted By Action NOT DISTRACTED						

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UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		Action					
		Action Other				To/From School	
01	001	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 SHANTAI MARIE GIROUX (608) 588-5797			Citations Issued 0	Sex FEMALE	
		Address 553 E EXCHANGE ST LONE ROCK, WI 53556 , US			Date of Birth	Race WHITE	
		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
		01	002	Safety Equipment		On Duty Crash	Safety Equipment
Row 01 - FRONT ROW	Seat Position 09 - RIGHT			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			
Distracted By Action							
Non Motorist		Striking Unit #	Location				

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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			

Property Owner

PROP OWNER	01	Organization/Company ALLIANT ENERGY	Address 4902 N BILTMORE MADISON, WI 53707 1077, US
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Fixed Objects Struck

PROP OWNER	01	Striking Unit 01	Struck Object UTILITY POLE	Structure Number	Damage Tag Number NA
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Property Owner

PROP OWNER	02	Government TOWNSHIP OF SPRING GREEN (608) 588-3235	Address S12442 E PRAIRIE VIEW RD PO BOX 445 SPRING GREEN, WI 53588 , US
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Fixed Objects Struck

PROP OWNER	02	Striking Unit 01	Struck Object DITCH	Structure Number	Damage Tag Number NA
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