# 6TL0DBC3B5 20-12121

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 10/13/2020

Crash Time 06:41 PM

	Document Number Override	Primary Crash Document# Agency Crash Nur 20-12121				stigating Officer/Deputy PUTY C. GALLAGHER				
3B5	Crash Date		Date Arrived		Time	Time Arrived				
BC3	Date Notified         Time Notified           10/13/2020         06:41 PM		Total Units 01			Total Injur <b>00</b>		jured Total Killed 00		
0	On Emergency	it and Run Lane (	Closure		rk Zone	L	Trailer or T	owed	Reporting  Threshold	
6TL	Government Property	Active School Zone  Crash Type	School NO	Bus Relat	ed	Tags				
	Reportable	ANIMAL W/ NO INJURY				Amended		Secondary  Crash		
	i, a sworn law enforcement	i any CJ	JIS data in this report.							
	Location <b>——</b>	ocation								
- [	ON CTHO WB				Latitude Longitude					
	540 FT W				43.278108366		-89.830482			
	OF EXCHANGE RD				43.276106300					
	IN THE TOWN OF PRAIRIE	NI SAC			X Coordina	ate		Y Coordinate		
	IN SAUK COUNTY	DO SAC			270329.5	270329.53125		479558	4795589.5	
	IN SAUK COUNT				Structure	Type				
					Structure Type					
l.	O									
•	Crash Scene									
	First Harmful Event					ful Event Lo	cation			
	NON DOMESTICATED ANIM	AL (ALIVE)			ON ROADWAY Light Condition					
Ì	Manner of Collision									
	00 - NO COLLISION W/VEHICLE IN TRANSPORT									
ŀ	Road Surface Condition(s)				Roadway	Factor(s)				
	•									
	Environment Factor(s)									
-	Weather Condition(s)									
	Weather Condition(s)									
	AnimalType									
						Relation To Trafficway				
	DEER				TRAFFICWAY - ON ROAD					
	Crash Classification - Location			Crash Classification - Jurisdiction						
	PUBLIC PROPERTY				NO SPECIAL JURIS Access Control					
	TribalLand								Special Study	
L										
	Unit Summary 💳									
	Unit Status V			Vehicle Operating As Classification			UnitType			
	IN TRANSIT			D CLASS		AUTOMO		BILE		
ŀ	Vehicle Type				Operating As Endorsements			ments		
01	(SPORT) UTILITY VEHICLE									
ŀ	Total Occs Train/Bus#Recorded Total# Citations Iss				d Total Tra		ailers Total HazM		MatTypos	
	1 otal Occs	Hall#Bus#Recolded	0			0	eis Totalmazi		viat i ypes	
ŀ				. =-					7e	
_		WESTBOUND	Pre CrashTire Mark		, Opeau		, our Lan		35	
LINO	Most Harmful Event: Collision With Special Function						   Emergency Motor Vehicle Use			
ב	NON DOMESTICATED ANIM	NO SPECIAL FUNCTION		TION		NOT APPLICABLE				
}	Traffic Way	Traffic Control				Traffic Control Inoperative/Missing				
	•	Hanic Conno			, idilio c					
	Surface Type	Road Curvature			F		Road Grade			

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	Truc	k Bus or HazMat							
		Vehicle	1501501501501501501501501501501501501501	50'50'50'50'50'50'50'50'50'50'50'50'50'5	000000000000000000000				
		License Plate Number 669ZVT		Plate Type	St WI	Country of Issuance UNITED STATES			
UNIT 01	5	Vehicle Identification Number 1GNEK13Z92R279552		Make CHEVROLET	Year 2002	Model TAH			
	VEHICLE	Color WHt - WHITE		Body Style UT - SPORT UTILITY	VEHICLE	Bus Use NOT A BUS			
		Initial Contact Point 12 - FRONT		Vehicle Damage					
		Extent Of Damage DISABLING DAMAGE		12 - FRONT					
		Towed Due To Damage NOT TOWED		Vehicle Removed By OWNER					
		What Driver Was Doing GOING STRAIGHT		Vehicle Factors					
		Driver Prior Action Other		NOT APPLICABLE					
	Щ	Driver Actions NO CONTRIBUTING ACT	ON						
IN N	VEHICLE								
	3								
۶	5	Owner Name  Owner Address							
Ħ		Policy Holder Insurance Company		Individual					
Ś		PROGRESSIVE-CLASSIC-INS-CO		CHARLES SAYLOR					
	INDIVIDUAL	Individual Driver		Citations Issued		I Sex			
		CHARLES DENNIS SAYLOR (608) 643-9334		O MA		MALE Race			
Ę					WHITE				
5		Address E8744 CTH O SAUK CITY, WI 53583 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
		On Duty		Safety Equipment					
	Sai	Safety Equipment  Row Seat Position		SHOULDER & LAP BELT					
10		Helmet Use	dour dollars	Helmet Compliance					
		Eye Protection		TintCompliance					
	×	injury Severity		Airbag					
	00	INJURY NO APPARENT INJURY  Ejected Ejection Path				Trapped/Extricated			
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run#			
		Hospital		Date of Death	Time of Death				

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:		Distracted By Sour	ce						
		Distracted By							
		Distracted By Action							
		Non Motorist Striking Unit#	Location						
		Prior Action							
		Action							
L	INDIWIBUAL								
UNIT	VID								
ا ر	ā								
	Í								
		Action Other					To/From School		
		Suspected Alcohol	Hea	Suspected Drug Use					
	L	Drug & Alcohol	NO						
		Alcohol Test Given	Alcohol Test Type	AlcoholTestType			Alcohol Test Results		
		TEST NOT GIVEN							
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results				
01	001	Drug Type	1		•				
_	0								
		Individual Condition							
		APPEARED NORMAL							