6TL0CBQ6NL 20-13512

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 11/28/2020

Crash Time 02:41 AM

	Document Number Override Primary Crash Document# Agency Crash Nu 20-13512				stigating Officer/Deputy						
	Crash Date Crash Time 11/28/2020 02:41 AM		Date Ar	Date Arrived		Time	Time Arrived				
6TL0CBQ6NI	Date Notified Time Notified 11/28/2020 02:42 AM		Total Ui 01	Total Units 01		Total	Total Injured Total Killed 00				
딩	On Emergency	it and Run Lane (Closure Wor		rk Zone	-	Trailer or T	owed	Reporting Threshold		
ETL	Government Property	Active School Zone	NO NO	Bus Relat	ed 	Tags					
	Reportable	Crash Type NON-DOMESTICATED A	NIMAL W/ N	O INJUR	Υ	Amended			Secondary Crash		
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.										
	Location ————————————————————————————————————										
	ON CTHV NB				Latitude			Longitud	Φ.		
	445 FT E				43.583958318		-90.06450609				
	OF MENCHOFF RD										
	IN THE TOWN OF WINFIELD	•			X Coordina	ate		Y Coord	inate		
	IN SAUK COUNTY	,			252589.6	25	483022		9.5		
	IN SAUR COUNTY				Structure 7	T					
					NO STRU						
(Crash Scene										
1	First Harmful Event				Te:		43				
						ful Event Lo	cation				
	NON DOMESTICATED ANIM	IAL (ALIVE)			ON ROA	DWAY					
	Manner of Collision				Light Cond	dition					
	00 - NO COLLISION W/VEHI	CLE IN TRANSPORT									
ŀ					Roadway Factor(s)						
	Road Surface Condition(s)				Roadway	ractor(s)					
Į.											
	Environment Factor(s)										
	Weather Condition(s)				-						
	Animal Type					Relation To Trafficway					
ŀ											
	DEER				TRAFFICWAY - ON ROAD						
	Crash Classification - Location										
					Crash Classification - Jurisdiction						
	PUBLIC PROPERTY				NO SPECIAL JURIS		RISDICTION				
İ	Tribal Land			Access Control				Special Study			
	Init Cummon				I						
	Unit Summary -				1 16: .:						
	Unit Status			Vehicle Operating As Classification			UnitType				
	IN TRANSIT	D CLASS				AUTOMOBILE					
ŀ	Vehicle Type						Operating As Endorsements		ments		
01	PASSENGER CAR				' -						
						I Total Traile		ers Total HazMat Types			
			Total # Citations Issued		`				viat i ypes		
	2		0		0		0				
	Insurance?	Direction Of Travel	Pre CrashTire		, Speed Lim		nit Total Lanes		es		
⊢	YES	NORTHBOUND Mark									
LINO	Most Harmful Event: Collision With Special Function			tion	I		Emergency Motor Vehicle Use				
-	NON DOMESTICATED ANIM	NO SPECIAL FUNCT		TION		NOT APPLICABLE					
	Traffic Way	Traffic Control				Traffic Control Inoperative/Missing					
	Surface Type	Road Curvatu	Road Curvature		Road Grade		e	÷			

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	Truc	ck Bus or HazMat							
	5000000	Vehicle	15015035035035035035035035035	sorsorsorsorsorsorsorsorsorsorsors	nennennen en				
UNIT 01		License Plate Number AGZ3581		Plate Type AUT - AUTOMOBILE	St WI	Country of issuance UNITED STATES			
	5	Vehicle Identification Number 5NPEU46F28H298045		Make HYUNDAI	Year 2008	Model SONATA			
		Color RED - RED		Body Style SD - SEDAN		Bus Use			
	H G	Initial Contact Point 12 - FRONT		Vehicle Damage					
	VEHICLE	Extent Of Damage DISABLING DAMAGE		12 - FRONT					
		Towed Due To Damage TOWED DUE TO DISABLE	NG DAMAGE	Vehicle Removed By STEVES AUTO SERVICE					
		What Driver Was Doing		Vehicle Factors	Vehicle Factors				
	щ	Driver Actions NO CONTRIBUTING ACT	ON						
	VEHICLE								
	5								
٤	٠,	Owner Name Owner Address							
≒									
IN I		Insurance Company PROGRESSIVE-ADVANCE		Individual MARISSA FLICK					
		Individual Driver		Citations issued		Ī Şex			
		MARISSA JO FLICK (608) 415-7258 Address Address 538 FLLINWOOD AVE		0 Date of Birth		FEMALE Race			
F				Drivert icense Number		WHITE			
>	2	REEDSBURG, WI 53959 , US On Duty Crash		STATE: WISCONSIN COUNTRY: UNITED STATES					
				Safety Equipment					
	Sai	Safety Equipment Row Seat Position		SHOULDER & LAP BELT					
		Helmet Use		Helmet Compliance					
		Eye Protection		Tint Compliance					
10	100	Injury Severity		Airbag					
		Injury NO APPARENT INJURY Ejected Ejection Path				Trapped/Extricated			
		Medical Transport		EMS Agency Identifier	EMS Agency Identifier EMS Run#				
		NOT TRANSPORTED							
		Hospital		Date of Death		Time of Death			

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	Distracted By Source							
	Distracted By Action							
	Non Motorist Striking Unit#	Location						
	Prior Action	-						
	Action							
UNIT								
_								
	Action Other					To/From School		
	Drug & Alcohol NO	Suspected Drug Use NO						
	Alcohol Test Given TEST NOT GIVEN		AlcoholTestType			Alcohol Test Results		
	Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results				
2 🖺	Drug Type							
	Individual Condition							
	APPEARED NORMAL							