6TL0CVRP3Q 21-00969

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 02/02/2021

Crash Time 06:29 PM

	DocumentNumber Override Primary Crash Document# Agency Crash Nu 21-00969			Investigating Officer/Deputy SERGEANT S. SCHRAM						
30	Crash Date Crash Time 02/02/2021 06:29 PM		Date Arrived		Time	Time Arrived				
NR.	Date Notified 02/02/2021	Time Notified 06:29 PM	, 0.0, 0, 7,0		Tota		Injured Total Killed 00			
6TL0CVRP3Q	On Emergency	On Emergency Hit and Run Lane Closure W			rk Zone		Trailer or T	owed	Reporting Threshold	
6TL	Government Property	NO NO	I I		Tags	ags				
	Reportable	NIMAL W/ N	IIMAL W/ NO INJURY			Amended		Secondary Crash		
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.									
	Location									
į	ON CTHANB				Latitude			Longitud	•	
	63 FT S				43.499994707		-89.738655179			
	OF CRAWFORD ST									
	IN THE TOWN OF FAIRFIEL	ח			X Coordin		Y Coordi			
	IN SAUK COUNTY				278590.6	8875	481998		4.5	
	IN SASK COSKII				Structure	Tyne				
					Structure Type					
L										
(Crash Scene									
Ī	First Harmful Event				FirstHarm	ıful Event Lo	cation			
	NON DOMESTICATED ANIM	IAL (ALIVE)			ON ROA	DWAY				
ŀ	Manner of Collision	,, (, (, (, (, (, (, (, (, (, (, (, (, (Light Condition				
		CI E IN TRANSPORT			Light Cond	attion				
	00 - NO COLLISION W/VEHI	CLE IN TRANSPORT								
	Road Surface Condition(s)				Roadway Factor(s)					
	Environment Factor(s)									
	Weather Condition(s)									
	Animal Type				Relation To Trafficway					
	DEER				TRAFFICWAY - ON ROAD					
	Crash Classification - Location			Crash Classification - Jurisdiction						
	PUBLIC PROPERTY			NO SPECIAL JURIS		SDICTION				
Ì	Tribal Land			Access Control				Special Study		
ļ	Unit Summary									
`			I Vahiala Onav	atina Aa C	laasification		1 1 12 T			
				Vehicle Operating As Classification			UnitType			
	W. 7.18 W. 2.1			D CLASS				AUTOMOBILE		
_ [Vehicle Type				Operating As Endorsements			ments		
01	(SPORT) UTILITY VEHICLE									
İ	TotalOccs	Total#Citations Issued		0		0		Mat Types		
	01									
ŀ	Insurance?							<u> </u>		
,		Direction Of Travel Pre Crash Ti NORTHBOUND Mark			,				.~	
LINO							Emergency Motor Vehicle Use		iclo Heo	
5	Most Harmful Event: Collision Wit	Special Function NO SPECIAL FUNCT		TION		Emergency Motor Venicle Use NOT APPLICABLE				
	NON DOMESTICATED ANIM	IAL (ALIVE)				I IVIX				
	Traffic Way	Traffic Control				Traffic Control Inoperative/Missing				
	Surface Type	Road Curvature			Road Grade					

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	Truc	ruck Bus or HazMat								
		Vehicle License Plate Number		Plate Type	l St	Country of issuance				
	VEHICLE 01	AJY6437		AUT - AUTOMOBILE	WI	UNITED STATES				
2		Vehicle Identification Number 1V26E2CA1LC228330	I	Make VOLKSWAGEN	Year 2020	Model ATLAS CROS				
		Color BLK - BLACK		Body Style UT - SPORT UTILITY \	/EHICLE	Bus Use				
l⊨		Initial Contact Point 12 - FRONT		Vehicle Damage 01 - RIGHT FRONT CORNER, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT						
TINN		Extent Of Damage DISABLING DAMAGE		CORNER, 12 - FRONT						
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By BILLS TOWING						
		What Driver Was Doing	,	Vehicle Factors						
		Driver Prior Action Other								
	щ	Driver Actions NO CONTRIBUTING ACTION								
NS.	VEHICLE									
	7									
_	5	Owner Name		OwnerAddress						
2	•									
l⊨	Policy Holder									
N N		Insurance Company PROGRESSIVE-CLASSIC-INS-CO		Individual ANASAZI LUCERO						
		Individual Driver				▼Sex				
		ANASAZI CODY RAY LUCERO		Citations Issued 0		MALE				
 -	IDIVIDUA	5 (608) 408-7017		Date of Birth Race						
S	3			Driver License Number						
	Z			STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sai			Safety Equipment						
	001	Row Seat Position	3	SHOULDER & LAP E	BELT					
		HeimetUse		Heimet Compliance						
		Eye Protection		TintCompliance						
2		Injury Severity NO APPARENT INJURY		Airb a g						
		Ejected Ejection Path				Trapped/Extricated				
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier	Agency Identifier EMS Run#					
	Hospital			Date of Death		Time of Death				

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						()
	Distracted By	By Source				
	Distracted By Action					
	Non Motorist Striking Un	it# Location				
	Prior Action	•				
	Action					
W						
UNIT						
5 4						
4						
	Action Other					To/From School
			_			7 ON TOTAL CONSCI.
	Drug & Alcohol NO	Suspected Drug Use NO				
	Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	ol TestType Alcohol TestResu			
	Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results		
e g	Drug Type					
	Individual Condition					
	APPEARED NORMAL					
	IIIIX.					