# 6TL0D2XVNR 21-01592

### WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 02/24/2021

Crash Time 05:25 AM

	Document Number Override	Primary Crash Document# Agency Crash Nu				stigating Officer/Deputy UTY B. SCHLOUGH				
NR NR	Crash Date 02/24/2021	Crash Time 05:25 AM		Date Arrived			Time Arrived			
L0D2XVNR	Date Notified 02/24/2021	Time Notified 05:27 AM	Fime Notified Total Unit 05:27 AM 01		its To		I Injured Total Killed 00			
0	On Emergency	iit and Run Lan					railer or Towed		Reporting Threshold	
6TI	Government Property	ne NO	School Bus Related NO			Tags				
	Reportable	Crash Type NON-DOMESTICATED	ANIMAL 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.									
ı	Location ====									
Ī	ON CTHB WB				Latitude			Longitud	A	
	156 FT W				43.271882163		-90.02039896			
	OF WILSON CREEK RD									
	IN THE TOWN OF FRANKLI	N		X Coordinate			Y Coord			
	IN SAUK COUNTY					254893.5		479543	<u> </u>	
					Structure 7	Туре				
,	Crash Scene				1					
•										
	First Harmful Event					ful Event Lo	cation			
	NON DOMESTICATED ANIM	MAL (ALIVE)			ON ROA	DWAY				
ı	Manner of Collision				Light Condition					
	00 - NO COLLISION W/VEHI	CLE IN TRANSPORT			•					
ŀ	Road Surface Condition(s)				Roadway	Factor(s)				
	• *				, , , , , , , , , , , , , , , , , , , ,					
1	EnvironmentFactor(s)				1					
ļ					]					
	Weather Condition(s)									
-	h-line of Tonna									
	Animal Type				Relation To Trafficway					
l	DEER			TRAFFICWAY - ON ROAD						
	Crash Classification - Location PUBLIC PROPERTY Tribal Land				Crash Classification - Jurisdiction					
					NO SPECIAL JURIS Access Control		· · · · · · · · · · · · · · · · · · ·			
									Special Study	
L										
Ų	Unit Summary 👅									
	Unit Status Vehicle			ehicle Operating As Classification			UnitType			
	IN TRANSIT	D CLASS	D CLASS				AUTOMOBILE			
_ 1	Vehicle Type						Operating As Endorsements		nents	
2	PASSENGER CAR									
ŀ	Total Occs	Total#Citatio	Total#Citations Issued		. Total Trail		Total Hazi	Viat Types		
	1	Train/Bus#Recorded	0		0		0		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Insurance?	Direction Of Travel	Pre CrashTire		Speed Lir		mit Total Lane		es .	
EN I	YES	WESTBOUND Mark								
5	Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE)			Special Function NO SPECIAL FUNCTION				Emergency Motor Vehicle Use NOT APPLICABLE		
	Traffic Way	Traffic Contro	Traffic Control				Traffic Control Inoperative/Missing			
	Surface Turn	Dr-40:				Dani Orada				
	Surface Type	Road Curvati	Road Curvature			Road Grade				

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	_									
	Truc	ck Bus or HazMat								
		Vehicle		0150150150150150150150150150150150150150						
		License Plate Number		Plate Type St		Country of Issuance				
UNIT 01		326WJY		AUT - AUTOMOBILE	WI	UNITED STATES				
	5	Vehicle Identification Numb		Make TOYOTA	Year 2010	Model PRI				
		Color	,	Body Style	2010	Bus Use				
		RED - RED		4H - HATCHBACK 4 DOOR						
	щ	Initial Contact Point		Vehicle Damage						
	VEHICLE	12 - FRONT								
	Ŧ	Extent Of Damage DISABLING DAMAGE		12 - FRONT  Vehicle Removed By						
		Towed Due To Damage								
		TOWED DUE TO DISA	BLING DAMAGE	GEORGES AUTO BODY						
		What Driver Was Doing		Vehicle Factors						
		Driver Prior Action Other								
		Driver Actions								
	щ	NO CONTRIBUTING ACTION								
INN	VEHICLE									
5										
		Owner Name		Owner Address						
٤	5									
0										
HNO		Policy Holder Insurance Company Individual								
5		ALLSTATE-INS-CO		Individual RAYMOND VALDEZ						
				I						
		Driver		Citations Issued		Sex				
		RAYMOND T VALDEZ (608) 718-0925		0		MALE				
	5	(608) 718-0925  Address Address A343 CUMBERLAND DR		Date of Birth		Race WHITE				
Ž	9			Drivert icense Number	Driver License Number					
<del>□</del>		1343 CUMBERLAND DR EDGERTON, WI 53534 , US								
	Z			STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sai	On Duty Crash  fety Equipment		Safety Equipment	Safety Equipment					
		Row	SeatPosition	SHOULDER & LAP BE	LT					
		11011	Ocati disaci)							
		HelmetUse		Helmet Compliance	Heimet Compliance					
		Euo Deska etian								
		Injury Severity NO APPARENT INJURY  Ejected Ejection Path		Tint Compliance	Tint Compliance Airbag					
_	_			Airbag						
5	100									
				•		Trapped/Extricated				
				ENADA - 11 AT		E35C Due #				
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run#				
	331551553	INCLINAMOPURIED		3 /						
		Hospital		Date of Death		Time of Death				

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		Distracted By Source	e				
		Distracted By Action					
		Non Motorist Striking Unit#	Location				
		Prior Action					
		Action					
,	DAL						
UNIT	INDIVIDUAL						
	2						
		Action Other					To/From School
	I	Drug & Alcohol Suspected Alcohol NO	Suspected Drug Use NO				
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	coholTestType AlcoholTestResult			
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results		
01	100	Drug Type					
	_						
		Individual Condition					
		APPEARED NORMAL					
	walannalii%						