# **6TL0BFKDFP** 21-10270

## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 10/26/2021

Crash Time 07:25 AM

	DocumentNumberOverride Primary Crash Document#			1 * '			Investigating Officer/Deputy DEPUTY H. VOLZ			
FP	Crash Date         Crash Time           10/26/2021         07:25 AM		Date Arrived		Time	Time Arrived				
FKD	Date Notified 10/26/2021	Time Notified 07:28 AM	Total Ui	Total Units 01		Tota 00	Total Injured Total Killed 00			
00	On Emergency	On Emergency Hit and Run Lane Closure W			rk Zone		Trailer or T	owed	Reporting  Threshold	
6TL	Government Property	Active School Zone	NO NO	Bus Relat	ed	Tags				
	Reportable	Crash Type NON-DOMESTICATED A	NIMAL W/ N	O INJUR	ťΥ		Amended		Secondary  Crash	
	I, a sworn law enforcem	d any CJ	y CJIS data in this report.							
	Location <b>———</b>									
į	ON WALNUT ST/ STH154 E				Latitude Longitude				Φ	
	245 FT W	-			43.433977521				466425	
	OF ELI VALLEY RD									
	IN THE TOWN OF WESTFIE	מו			X Coordin		Y Coordi			
	IN SAUK COUNTY				251412.2	251412.28125		481359	2.5	
	IN SASK COOK!!				Structure	Tyne		-		
						, ,,,,,				
	Crash Scene									
,					I = 1					
	First Harmful Event					iful Event Lo	cation			
	NON DOMESTICATED ANIM	IAL (ALIVE)			ON ROA	DWAY				
Ì	Manner of Collision				Light Cond	dition				
	00 - NO COLLISION W/VEHIC	CLE IN TRANSPORT		Light Condition						
ŀ	Road Surface Condition(s)				Roadway Factor(s)					
	• • • • • • • • • • • • • • • • • • • •				,					
	Environment Factor(s)									
Ī	Weather Condition(s)			1						
ŀ	Animal Type DEER				Relation To Trafficway TRAFFICWAY - ON ROAD					
	Crash Classification - Location				Crash Classification - Jurisdiction					
	PUBLIC PROPERTY  Tribal Land			NO SPECIAL JURIS Access Control		SUICTION		Constitution of the state of th		
	Tiparcand				, 100633 OUHUU				Special Study	
ļ	Unit Summary				l					
`			Mohiolo Opor	atina As C	lassification		1 1 m is T			
				Vehicle Operating As Classification			UnitType			
	IN TRANSIT	D CLASS				AUTOMOBILE				
_ [	Vehicle Type					Operating As Endorsements			ments	
01	(SPORT) UTILITY VEHICLE									
ŀ	Total Occs Train/Bus#Recorded Total Occs			Total#Citations languard		1 Total Trai		Total Hazi	Mat Types	
	3	Hallin Das # I tecolded	Total#Citations Issue		0		0		otal HazîMat Types	
ŀ		Direction Of Travel								
<u>_</u>		EASTBOUND	Pre CrashTire  Mark		, , , , , , , , , , , , , , , , , , , ,		, , , , , , , , , , , , , , , , , , , ,		~	
LIND	Most Harmful Event: Collision With NON DOMESTICATED ANIM		Special Function NO SPECIAL FUNCTION		1	Emergency Motor Vehicle NOT APPLICABLE		cle Use		
-	Traffic Way	Traffic Control		Traffic Cont		trol Inoperative/Missing				
	Surface Type	Book Cum rations		Road Grade						
	Currace type	Road Curvature			Moad Glade					

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	Truc	ck Bus or HazMat							
		Vahiola							
		Vehicle License Plate Number		Plate Type	l St	Country of Issuance			
UNIT 01		AHR3796		AUT - AUTOMOBILE	wı	UNITED STATES			
		Vehicle Identification Number		Make	Year	Model			
	ö	1C4RDJDG1LC116397		DODGE 2020		DUR			
		Color SIL - SILVER (ALUMINUM)		Body Style 4D - 4DR		Bus Use			
	ш	Initial Contact Point		Vehicle Damage					
	ಠ	12 - FRONT		01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE					
	VEHICLE	Extent Of Damage		FRONT, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT					
	3	DISABLING DAMAGE Towed Due To Damage		Vehicle Removed By					
		TOWED DUE TO DISABLIN	IG DAMAGE	STEVES AUTO SERVICE					
		What Driver Was Doing		Vehicle Factors					
		Delicas Brian Antion Others							
		Driver Prior Action Other							
		Driver Actions							
	VEHICLE	NO CONTRIBUTING ACTION							
	¥								
_	y								
		OwnerName		Owner Address					
2	5								
l⊨		Policy Holder							
IN IN		Insurance Company NATIONAL-GENERAL-INS-CO		Individual JENNIFER NEUMAN	NN				
		Individual		I					
		Driver		Citations sued	Sex				
		JENNIFER LYNN NEUMAN (608) 444-8082	N	0	FEMALE				
_	DIMDUA	(000) 444 0002		Date of Birth	Race WHITE				
S	Z	Address		Driver License Number					
-	2	S6220 HWY 154 HILLPOINT, Wt 53937 , US		STATE: WISCONSIN COUNTRY: UNITED STATES  Safety Equipment					
	Sa	fety Equipment		• 13-1111					
		Row	Seat Position	SHOULDER & LAP	PBELT				
		Helmet Use		Helmet Compliance	Heimet Compliance				
				1 with the search is until the					
		Eye Protection Injury Severity NO APPARENT INJURY Ejected Ejection Path		Tint Compliance					
_	_			Airbag					
5	8								
				•		Trapped/Extricated			
				EMS Agency Identifier		EMS Run#			
		NOT TRANSPORTED							
		Hospital		Date of Death		Time of Death			
				I					

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							• •
		Distracted By Source	•				
		Distracted By Action					
		Non Motorist Striking Unit#	Location				
		Prior Action					
		Action					
,	DAL						
UNIT	INDIVIDUAL						
	2						
							1
		Action Other					To/From School
	I	Drug & Alcohol NO	Suspected Drug Use				
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	coholTestType AlcoholTestResu			
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results		
01	100	Drug Type					
		Individual Condition					
		APPEARED NORMAL					
	watannalilik						