# **6TL0D0GSH6** 21-10319

### WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 10/27/2021

Crash Time 12:35 PM

	Document Number Override Primary Crash Document#			Agency Crash Number 21-10319			Investigating Officer/Deputy DEPUTY S. FINNEGAN			
9	Crash Date Crash Time 10/27/2021 12:35 PM		Date Arrived		Time	Time Arrived				
6TL0D0GSH6	Date Notified 10/27/2021	Time Notified 12:39 PM	Total Ur 01	Total Units 01		Total	Total Injured Total Killed 00			
Ö	On Emergency Hit and Run Lan		Closure	losure Work Zone			Trailer or Towed		Reporting  Threshold	
119	Government Property	NO NO	1		Tags	ıgs				
	Reportable	NIMAL W/ NO INJURY		Υ		Amended		Secondary  Crash		
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.									
	Location <b>———</b>									
- 1	ON CTHPF WB				Latitude			Longitud	Φ.	
	676 FT W				43.292912488		-89.78140419			
	OF OLD BLUFF TRL							-09.70140419		
	IN THE TOWN OF PRAIRIE I	DURAC			X Coordin	ate		Y Coordi	inate	
		DO SAC			274366.7	78125	479710		0	
	IN SAUK COUNTY				Structure Type					
					NO STR					
(	Crash Scene									
1	First Harmful Event				F: 411					
						ful Event Lo	cation			
	NON DOMESTICATED ANIM	IAL (ALIVE)			ON ROADWAY					
l	Manner of Collision				Light Condition					
	00 - NO COLLISION W/VEHI	CLE IN TRANSPORT			Ů					
					D d	T4/-\				
	Road Surface Condition(s)				Roadway Factor(s)					
	Environment Factor(s)				1					
ŀ	Weather Condition(s)				1					
	Weather Condition(s)									
	Animal Type									
						Relation To Trafficway				
	DEER				TRAFFICWAY - ON ROAD					
l	Crash Classification - Location		Crash Classification - Jurisdiction							
	PUBLIC PROPERTY				NO SPEC	CIAL JURI	SDICTION	SDICTION		
-	TribalLand								C	
	IlibaiLaild			Access Control				Special Study		
Į										
Į.	Unit Summary 💳									
	Unit Status		Vehicle Oner	ating As C	lassification		UnitType			
				Vehicle Operating As Classification			1 **			
				D CLASS				AUTOMOBILE		
_ [	Vehicle Type				Operating As Endorsements			ments		
01	(SPORT) UTILITY VEHICLE									
1	Total Occs	Total # Citations Issued  0		0		0		Mat Tynes		
	Total Occs Train/Bus#Recorded									
ļ										
	Insurance?	rance? Direction Of Travel Pre Cra						es		
	NO WESTBOUND									
LND	Most Harmful Event: Collision With Special Function			tion	<u> </u>		Emergency Motor Vehicle Use			
<b>-</b>	NON DOMESTICATED ANIM	NO SPECIAL FUNCT		TION		NOT APPLICABLE				
	Traffic Way	Tva60- 0/	.1							
	Harrio VVay	Traffic Control				Traffic Control Inoperative/Missing				
	Surface Type	Road Curvati	Ros		Road Grad	Road Grade				

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	Truc	sk Bus or HazMat								
		Vehicle			015050150501505015					
		License Plate Number AKP3925		Plate Type AUT - AUTOMOBILE	St Wi	Country of Issuance UNITED STATES	1			
01	5	Vehicle Identification Number 2CNDL13F166052280		Make CHEVROLET	Year 2006	Model EQUINOX				
		Color GRY - GRAY		Body Style Bus Use UT - SPORT UTILITY VEHICLE						
TIN	VEHICLE	Initial Contact Point 11 - LEFT FRONT CORNER		Vehicle Damage 7, 8, 9, 10, 11, 01 - RIGHT FRONT CORNER, 09 - LEFT SIDE 8, 10, 11, 12, 13, 14, 15, 15, 15, 15, 15, 15, 15, 15, 15, 15						
5		Extent Of Damage  DISABLING DAMAGE  Towed Due To Damage		MIDDLE, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT, 13 - TOP  5 4 8 2 3						
		TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By EVERETTS TOWING						
		What Driver Was Doing Vehicle Factors								
		Driver Prior Action Other								
UNIT	3	Driver Actions NO CONTRIBUTING ACTION								
	VEHICLE									
01	5	OwnerNatte		Charter Address						
3										
		Individual								
		Driver BENJAMIN S TUCKER		Citations issued  0	Sex MALE	MALE				
⊨	<b>7</b> 00	(608) 432-2706		Date of Birth	Race WHITE					
T <b>N</b> O	INDIVIDUA	Address N1041 COUNTY ROAD J LYNDON STATION, WI 53944, US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sai	On Duty Crash  Safety Equipment		Safety Equipment						
		Row	SeatPosition	SHOULDER & LAP BELT						
		HelmetUse		Helmet Compliance						
	100	Eye Protection		TintCompliance						
01		injury Severity NO APPARENT INJURY		Airbag						
		Ejection Path				Trapped/Extricated				
		Medical Transport NOT TRANSPORTED Hospital		EMS Agency Identifier		EMS Run#				
				Date of Death		Time of Death				
		Distracted By	ł By Source	•		•				

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	Distracted By Action						
. L	Non Motorist Striking Unit#	Location					
	Prior Action	•					
	Action						
M							
	Action Other					To/From School	
		1	I Commente d'Ominita				
L	Drug & Alcohol NO		NO NO				
	Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type			Alcohol Test Results		
	Drug Test Given TEST NOT GIVEN Drug Test			Drug Test Results	3		
8	Drug Type						
	Individual Condition						
	APPEARED NORMAL						
		Prior Action  Action  Action Other  Drug & Alcohol  Alcohol Test Given TEST NOT GIVEN  Drug Type  Drug Type	Non Motorist  Prior Action  Action  Action Other  Suspected Alcohol Use NO  Alcohol Test Given TEST NOT GIVEN  Drug Type  Individual Condition	Prior Action   Action   Action   Action	Non Motorist   Striking Unit # Location	Non Motorist   Striking Unit #   Location	