

6TL09XQZ3J

21-11150

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

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Document Number Override, Primary Crash Document#, Agency Crash Number, Investigating Officer/Deputy, Crash Date, Crash Time, Date Arrived, Time Arrived, Date Notified, Time Notified, Total Units, Total Injured, Total Killed, On Emergency, Hit and Run, Lane Closure, Work Zone, Trailer or Towed, Reporting Threshold, Government Property, Active School Zone, School Bus Related, Tags, Reportable, Crash Type, Amended, Secondary Crash.

I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

Location

ON CTHPF SB 0.26 MI S OF KLEIN RD IN THE TOWN OF FREEDOM IN SAUK COUNTY, Latitude, Longitude, X Coordinate, Y Coordinate, Structure Type.

Crash Scene

First Harmful Event, Manner of Collision, Road Surface Condition(s), Environment Factor(s), Weather Condition(s), Animal Type, Relation To Trafficway, Crash Classification - Location, Crash Classification - Jurisdiction, Tribal Land, Access Control, Special Study.

Unit Summary

Unit Status, Vehicle Operating As Classification, Unit Type, Vehicle Type, Operating As Endorsements, Total Occs, Train/Bus # Recorded, Total # Citations Issued, Total Trailers, Total HazMat Types, Insurance?, Direction Of Travel, Pre Crash Tire Mark, Speed Limit, Total Lanes, Most Harmful Event: Collision With, Special Function, Emergency Motor Vehicle Use, Traffic Way, Traffic Control, Traffic Control Inoperative/Missing, Surface Type, Road Curvature, Road Grade.

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Truck Bus or HazMat				
Vehicle				
01 UNIT VEHICLE	License Plate Number	Plate Type	St	Country of Issuance
	MRCHAND	AUT - AUTOMOBILE	WI	UNITED STATES
	Vehicle Identification Number	Make	Year	Model
	3HGGK5H82FM737658	HONDA	2015	FIT EX/EXL
	Color	Body Style	Bus Use	
	BLK - BLACK	4D - 4DR		
	Initial Contact Point	Vehicle Damage		
12 - FRONT	01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 12 - FRONT			
Extent Of Damage	FUNCTIONAL DAMAGE			
Towed Due To Damage	Vehicle Removed By			
NOT TOWED	OWNER			
What Driver Was Doing	Vehicle Factors			
Driver Prior Action Other				
Driver Actions	NO CONTRIBUTING ACTION			
Owner Name		Owner Address		
Policy Holder				
Insurance Company		Individual		
GEICO-CASUALTY-CO		DONALD KAUSS		
Individual				
01 UNIT INDIVIDUAL	Driver	Citations Issued	Sex	
	DONALD J KAUSS (608) 402-5635	0	MALE	
		Date of Birth	Race	
			WHITE	
Address		Driver License Number		
E5838 FELDMAN RD LOGANVILLE, WI 53943 , US		STATE: WISCONSIN COUNTRY: UNITED STATES		
Safety Equipment		On Duty Crash		
		Safety Equipment		
Row	Seat Position	SHOULDER & LAP BELT		
Helmet Use		Helmet Compliance		
Eye Protection		Tint Compliance		
01 UNIT INDIVIDUAL	Injury		Airbag	
	Injury Severity			
	NO APPARENT INJURY			
	Ejected	Ejection Path	Trapped/Extricated	
Medical Transport		EMS Agency Identifier	EMS Run#	
NOT TRANSPORTED				
Hospital		Date of Death	Time of Death	

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UNIT INDIVIDUAL 01 001	Distracted By Distracted By Source	
	Distracted By Action	
	Non Motorist	Striking Unit # Location
	Prior Action	
	Action	
	Action Other	
	To/From School	
	Drug & Alcohol	Suspected Alcohol Use NO
	Suspected Drug Use NO	
	Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type
Alcohol Test Results		
Drug Test Given TEST NOT GIVEN	Drug Test Type	
Drug Test Results		
Drug Type		
Individual Condition APPEARED NORMAL		