6TL0D7W14V 21-11377

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 11/26/2021

Crash Time 04:51 PM

	Document Number Override	Primary Crash Document# Agency Crash Nu 21-11377		I		stigating Officer/Deputy PUTY K. MUELLER				
<u>¥</u>	Crash Date Crash Time 04:51 PM		Date Arrived		Time	Time Arrived				
6TL0D7W14V	Date Notified 11/26/2021	Time Notified 04:51 PM	Total Ui 01	Total Units 01		Tota 00	Total Injured Total Killed 00		ł	
0.	On Emergency Hit and Run Lane Closure			ork Zone		Trailer or T	owed	Reporting Threshold		
119	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 enforcement officer, agree that I have not added any CJIS data in this report.									
	Location ——									
i	ON STH60 EB				Latitude			Longitud		
	1229 FT W						-89.8469 Y Coordii			
	OF SEITZ RD			43.238322253		22233			1962812	
	IN THE TOWN OF TROY				X Coordinate				inate	
					268841.3	375	479121		6.5	
	IN SAUK COUNTY				Ctureture	T				
					Structure Type					
(Crash Scene									
,					I =:					
	First Harmful Event					ful Event Lo	cation			
	NON DOMESTICATED ANIM	IAL (ALIVE)			ON ROA	DWAY				
l	Manner of Collision				Light Cond	dition				
	00 - NO COLLISION W/VEHI	CLE IN TRANSPORT								
ŀ	Road Surface Condition(s)			Roadway Factor(s)						
	Environment Factor(s)				_					
	Weather Condition(s)									
ŀ	Animal Type					Bolation To Trafficular				
						Relation To Trafficway TRAFFICWAY - ON ROAD				
	DEER									
	Crash Classification - Location			Crash Classification - Jurisdiction						
	PUBLIC PROPERTY				NO SPECIAL JURIS		SDICTION			
	Tribal Land				Access Control				Special Study	
į	Unit Summary -									
	Unit Status		Vehicle Oper	ating As C	lassification		UnitType			
				D CLASS			AUTOMOBILE		F	
				<u> </u>						
0	Vehicle Type				Operating As Endorsements			nents		
0	(SPORT) UTILITY VEHICLE									
,	Total Occs 5	Train/Bus#Recorded	Total#Citations Issued 0		Total Trail		ilers Total Hazi		MatTypes	
_	Insurance? YES	Direction Of Travel EASTBOUND	Pre CrashTire Mark		Speed Lim		it Total Lanes		es	
TINO TINO	Most Harmful Event: Collision Wit NON DOMESTICATED ANIM	Special Function NO SPECIAL FUNCTION		I	Emergency Motor Vehicle Use NOT APPLICABLE					
	Traffic Way	Traffic Control			Traffic Control Inoperative/Missing					
	Surface Type	Road Curvature			Road Grade					

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	Truc	ck Bus or HazMat							
		Vehicle							
10		License Plate Number Q878246		Plate Type	St IL	Country of Issuance			
	VEHICLE 01	Vehicle Identification Number 5NMZUDLB7HH010181		Make HYUNDAI	Year 2017	Model SANTA FE			
		Color BLK - BLACK		Body Style UT - SPORT UTILIT	I	Bus Use			
		Initial Contact Point		Vehicle Damage					
INN		12 - FRONT Extent Of Damage FUNCTIONAL DAMAGE		01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT \$ 4 3 2 5					
		Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR					
		What Driver Was Doing		Vehicle Factors					
		Driver Prior Action Other							
	144	Driver Actions NO CONTRIBUTING ACTION							
IN I	VEHICLE								
⊃									
		Owner Value		OwnerAddress					
٤	5								
l.		Policy Holder							
\ S		Insurance Company		Individual					
		STATE-FARM-GENERAL-I		IVA YOVCHEVA					
	DIMDUAL	Individual Driver		Citations Issued	Sex				
		IVA D YOVCHEVA		0 FEMALE					
<u>_</u>		(773) 934-3569		Date of Birth	Race WHITE				
ş	S	Address 5535 N PARKSIDE AVE CHICAGO, IL 60630 , US On Duty Crash fety Equipment		Driver License Number					
	Z			STATE: ILLINOIS COUNTRY: UNITED STATES					
				Safety Equipment					
		Row	Seat Position	SHOULDER & LA	LAP BELT				
	001	Helmet Use		Helmet Compliance					
		Eye Protection		Tint Compliance					
_		Injury Severity		Airbag					
01		Injuny NO APPARENT INJURY				Trapped/Extricated			
		Ejected Ejection Path				stapped/Extitosed			
		Medical Transport		EMS Agency Identifie	et	EMS Run#			
		NOT TRANSPORTED Hospital		Date of Death		Time of Death			
		1 100 p (CE)							

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200		Distracted By Source						
200		Distracted By Action						
		Non Motorist Striking Unit#	Location					
		Prior Action						
		Action						
-0-2-2-2-2	_1							
	INDIVIDUAL							
UNIT								
n	ā							
	2							
		Action Other					To/From School	
	L	Drug & Alcohol Suspected Alcohol C	Suspected Drug Use NO					
		Alcohol Test Given	Alcohol Test Type			Alcohol Test Results		
		TEST NOT GIVEN	"					
		Drug Test Given TEST NOT GIVEN Drug Test Type			Drug Test Results			
01	994	Drug Type	•		•			
)	0							
		Individual Condition						
		APPEARED NORMAL						