# 6TL0B8M7ZJ 21-12351

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 12/24/2021

Crash Time 04:50 PM

	Document Number Override	Primary Crash Document# Agency Crash Nu 21-12351				stigating Officer/Deputy				
7	Crash Date Crash Time 12/24/2021 04:50 PM		Date Arrived		Time	Time Arrived				
6TL0B8M7ZJ	Date Notified 12/24/2021	Time Notified 04:53 PM	Total Units 01		Total		Ilnjured	Injured Total Killed 00		
-0B	On Emergency	it and Run Lane (	Closure		rk Zone	L	Trailer or T	owed	Reporting  Threshold	
6TI	Government Property	Active School Zone	NO NO	Bus Relat	ed	Tags				
	Reportable	Crash Type NON-DOMESTICATED A	NIMAL W/ N	O INJUR	Υ		Amended		Secondary Crash	
	Summed	ve not added	not added any CJIS data in this report.							
	Location <b>———</b>									
	ON STH33 WB				Latitude			Longitud	e	
	0.34 MI W				43.619462615		-90.154			
	OF WILKINSON RD									
	IN THE TOWN OF LA VALLE	•			X Coordin		Y Coordi			
	IN SAUK COUNTY	•			245512.2	296875		483444	3.5	
	IN SASK COOK!!				Structure	Tyne		-		
					Structure Type NO STRUCTURE					
(	Crash Scene				•					
1	First Harmful Event									
	NON DOMESTICATED ANIM	AL (ALIVE)				nful Event Lo				
		AL (ALIVE)			ON ROADWAY					
	Manner of Collision			Light Condition						
	00 - NO COLLISION W/VEHIO	CLE IN TRANSPORT								
	Road Surface Condition(s)				Roadway Factor(s)					
Ì	Environment Factor(s)				1					
	Weather Condition(s)					_				
ľ										
	ryearier condition(s)									
	Animal Type									
ŀ						Relation To Trafficway				
	DEER	••				WAY - ON				
					Crash Classification - Jurisdiction					
	Crash Classification - Location			I						
	PUBLIC PROPERTY			NO SPECIAL JURIS						
	TribalLand				Access Control				Special Study	
L										
	Unit Summary 💳									
	Unit Status		Vehicle Opera	nicle Operating As Classification			UnitType			
	IN TRANSIT	D CLASS			AUTOMO		BILE			
ŀ	Vehicle Type						Operating As Endorsements			
01	(SPORT) UTILITY VEHICLE					operating to Endorson to the				
_	,									
		0		otal#Citations Issued		Total Traile	0		MatTypes	
	1				0					
		Direction Of Travel WESTBOUND	Pre CrashTire Mark		SpeedL		mit Total Lane		98	
LINO							Emergency Meter \/ehicle \frac{1}{2}			
5	Most Harmful Event: Collision With NON DOMESTICATED ANIM	Special Function NO SPECIAL FUNCTIO		TION		Emergency Motor Vehicle Use NOT APPLICABLE				
}	Traffic Way	Traffic Control				Traffic Control Inoperative/Missing				
	•	TARRO COMICI					The solution of the solution o			
	Surface Type	Road Curvature			Road Grade					

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	Truc	ck Bus or HazMat							
		Velacola							
		Vehicle License Plate Number		Plate Type     St		Country of issuance			
10		AJK1370		AUT - AUTOMOBILE	WI	UNITED STATES			
	5	Vehicle Identification Number		Make	Year	Model			
		1FMCU93G29KB64345		FORD	2009	ESCAPE			
		Color BLU - BLUE		Body Style 4D - 4DR		Bustise			
	VEHICLE	Initial Contact Point		Vehicle Damage					
HND		12 - FRONT		7 8 9 10 11 7 11 11 11 11 11 11 11 11 11 11 11 1					
5		Extent Of Damage DISABLING DAMAGE							
	2	Towed Due To Damage		Vehicle Removed By					
		TOWED DUE TO DISABLIN	IG DAMAGE	SHIELDS TOWING					
		What Driver Was Doing		Vehicle Factors					
		Driver Prior Action Other		4					
		Carett Bernaud Chie.							
		Driver Actions							
	VEHICLE	NO CONTRIBUTING ACTION							
	Y								
_	Щ								
		Owner Vante		OwnerAddress					
2	5								
l⊨		Policy Holder							
¥		Insurance Company PROGRESSIVE-CASUALTY-INS-CO		Individual	FN				
				KATELYNN PORTZ					
		Driver		Citations Issued	Sex				
		KATELYNN IRENE PORTZEN (608) 495-3619  Address 215 1/2 MAIN ST		0	FEMALE				
	5			Date of Birth	Race WHITE				
Ş	8								
⋽				Driver License Number					
	Z	ELROY, WI 53929 , US		STATE: WISCONSIN COUNTRY: UNITED STATES					
		0-51-5							
	Sa	On Duty Crash <b>fety Equipment</b>		Safety Equipment					
		Row	Seat Position	SHOULDER & LAP BELT					
		HelmetUse		Helmet Compliance					
		Eye Protection		Tint Compliance					
2	8	Injury Severity NO APPARENT INJURY		Airbag					
		Ejected Ejection Path				Trapped/Extricated			
		-,				,,,			
		Medical Transport		EMS Agency Identifier		EMS Run#			
		NOT TRANSPORTED		Date of Death		Time of Death	Time of Death		
		Hospital		Date of Death		Time of Death			

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	Distracted By Sou	rce						
	Distracted By Action							
	Non Motorist Striking Unit#	Location						
	Prior Action							
	Action							
UNIT								
UNIT								
=								
	Action Other					To/From School		
	Drug & Alcohol NO	Suspected Drug Use NO	'					
	Alcohol Test Given TEST NOT GIVEN		AlcoholTestType			Alcohol Test Results		
	Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results				
2 <u>8</u>	Drug Type							
	Individual Condition							
	APPEARED NORMAL							