6TL0D7W154 22-00638

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 01/21/2022

Crash Time 05:06 PM

	Document Number Override	Primary CrashDocument#	Agency Crash Nu				stigating Officer/Deputy			
52	Crash Date 01/21/2022	Crash Time 05:06 PM	Date Arrived			Time	Arrived			
TL0D7W154	Oate Notified 01/21/2022 Time Notified 05:06 PM On Emergency Hit and Run Lane C		Total Units 01		Total 00	Total Injured 00 Total Killed 00				
0			Closure	losure Work Zone			Trailer or Towed		Reporting Threshold	
6TI	Government Property	School Bus Related		Tags	ags .					
	Reportable	NIMAL W/ NO INJURY			Amended		Secondary Crash			
	i, a sworn law enforcem	IS data in this report.								
ı	_ocation									
Ī	ON KENNEDY RD			7	Latitude Longitude					
	995 FT E					43.178381137		1 -	-90.109713643	
	OF BIG HOLLOW RD									
	IN THE TOWN OF SPRING	PEEN			X Coordinate		Y Coord		linate	
	IN SAUK COUNTY	SKEEK			247258.7	65625	478531		9.5	
	IN SAUR COUNTY				Structure T	VDA				
					Ottactare	ype				
Ţ				10						
(Crash Scene									
Ī	FirstHarmfulEvent				FirstHarm	fulEventLo	cation			
	NON DOMESTICATED ANIM	ΙΔΙ (ΔΙΙΥΕ)			ON ROAL					
- 1		(AE(VE)								
	Manner of Collision				Light Condition					
	00 - NO COLLISION W/VEHI	CLE IN TRANSPORT								
Ī	Road Surface Condition(s)				Roadway	Factor(s)				
1	Environment Factor(s)									
	.,									
ı	Weather Condition(s)									
	AnimalType									
1					Relation To Trafficway					
	DEER				TRAFFICWAY - ON ROAD					
ł	Crash Classification - Location PUBLIC PROPERTY				Crash Classification - Jurisdiction					
					NO SPECIAL JURISDICTION					
				Access Control				1		
	Tribal Land							Special Study		
Į		=								
l	Jnit Summary 👅									
	Unit Status	-	Vehicle Oper	ating As C	Classification Unit Type					
	1			DCLASS		AUTOMOI		RII F		
-										
5	Vehicle Type				Operating As Endorsements					
٦١	PASSENGER VAN									
	Total Occs Train/Bus # Recorded 1		Total # Citations Issued 0		Total Traile		ilers Total Hazl		MatTypes	
1	Insurance?	Direction Of Travel	Pre C	rashTire	Speed Lim		mit Total Lanes		es	
<u>.</u>	YES	EASTBOUND		nasii nie Nark	'					
				Special Function		ė.	Emergency Motor Vehicle Use			
ラ		Special Function			NOT APPLICABLE					
	NON DOMESTICATED ANIN					4				
	Traffic Way	Traffic Control				Traffic Control Inoperative/Missing				
	Surface Type	Road Curvat	Road Curvature		Î	Road Grade				

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	Truc	Fruck Bus or HazMat							
		Vehicle License Plate Number Plate Type St Country of Issuance							
	VEHICLE 01	AJM2616	AUT - AUTOMOBILE	wı	UNITED STATES				
2		Vehicle Identification Number NM0GE9F28L14444431	Make FORD	Year 2020	Model TRANSIT CO				
		Color WHi - WHITE	Body Style VN - VAN	·	Bus Use				
IN		Initial Contact Point 01 - RtGHT FRONT CORNER Extent Of Damage FUNCTIONAL DAMAGE	Vehicle Damage 01 - RIGHT FRONT C FRONT, 12 - FRONT	01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE					
		Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR	· ·					
		What Driver Was Doing	Vehicle Factors						
		Driver Prior Action Other		_					
	щ	Driver Actions NO CONTRIBUTING ACTION							
NS NS	VEHICLE								
		Owner Name	Owner Address						
٦									
		Policy Holder							
l N S		Insurance Company	Organization/Company	<i>f</i>					
-		OWNERS-INS-CO	I	UPLAND HILLS HEALTH INC					
	INDIVIDUAL	Individual Driver	Citations Issued	Citations issued Sex					
		PAUL T THOMPSON	0	MALE					
 -		(608) 574-5588	Date of Birth	Race WHITE					
N N		Address 822 THOMPSON DR MINERAL POINT, WI 53565, US		Drivert icense Number STATE: WISCONSIN COUNTRY: UNITED STATES					
	Sai	On Duty Crash Fety Equipment	Safety Equipment						
		Row Seat Position		SHOULDER & LAP BELT					
	1001	HelmetUse		HelmetCompliance					
		Eye Protection	·	TintCompliance					
2		Injury Severity NO APPARENT INJURY Ejected Ejection Path	Airbag						
					Trapped/Extricated				
		Medical Transport NOT TRANSPORTED	EMS Agency Identifier		EMS Run#				
	Hospital		Date of Death		Time of Death				

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		Distracted By Source							
		Distracted By Action							
		Non Motorist Striking	g Unit#	Location					
		Prior Action Prior Action							
LIND	INDIVIDUAL	Action Action Other						To/From School	
	<u> </u>	Drug & Alcohol NO			Suspected Drug Use				
		Alcohol Test Given TEST NOT GIVEN	1			e Alcohol Test Resu			
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results			
2	001	Drug Type	•						
		Individual Condition APPEARED NORMAL							
0									

3 of 3