

6TL0B7D6VV  
22-01866

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 22-01866		Investigating Officer/Deputy DEPUTY S. ELLICKSON	
Crash Date 02/27/2022		Crash Time 06:59 PM		Date Arrived 02/27/2022		Time Arrived 07:19 PM	
Date Notified 02/27/2022		Time Notified 07:02 PM		Total Units 02		Total Injured 02	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input checked="" type="checkbox"/> Lane Closure		<input type="checkbox"/> Work Zone		<input type="checkbox"/> Trailer or Towed	<input type="checkbox"/> Reporting Threshold
<input type="checkbox"/> Government Property		<input type="checkbox"/> Active School Zone		School Bus Related NO		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

Description

Diagram		Reconstruction By	
<p>Not to Scale</p> <p>Diagram description: A top-down view of a road intersection. The vertical road is labeled 'STH 23' and the horizontal road is labeled 'CTH N'. Two vehicles, 'U1' and 'U2', are shown. U1 is positioned at the intersection, having struck a cow. U2 is positioned to the right of U1, having struck another cow. A north arrow is located in the upper right quadrant. Stop signs are shown at the intersection. The text 'Cows' is written near the cow symbols.</p>		<p>Photos By</p> <p>Additional Information PHOTOS</p>	

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

UNIT 1 AND UNIT 2 WERE TRAVELING SOUTH BOUND ON STH 23 AND CTH N. UPON COMING DOWN THE HILL UNIT 1 STRUCK A COW THAT WAS IN THE ROADWAY. UNIT 2 SWERVED AROUND UNIT 1 STRICKING ANOTHER COW.

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**Location**

<b>ON STH23 EB</b> <b>104 FT N</b> <b>OF CTHN NB</b> <b>IN THE TOWN OF FRANKLIN</b> <b>IN SAUK COUNTY</b>	Latitude <b>43.293404458</b>	Longitude <b>-90.044216044</b>
	X Coordinate <b>253047.78125</b>	Y Coordinate <b>4797898.5</b>
	Structure Type <b>NO STRUCTURE</b>	

**Crash Scene**

First Harmful Event <b>DOMESTICATED ANIMAL - ALIVE</b>		First Harmful Event Location <b>ON ROADWAY</b>	
Manner of Collision <b>00 - NO COLLISION W/VEHICLE IN TRANSPORT</b>		Light Condition <b>DARK/UNLIT</b>	
Road Surface Condition(s) <b>DRY</b>		Roadway Factor(s)  <b>NONE</b>	
Environment Factor(s) <b>NONE</b>			
Weather Condition(s) <b>CLEAR</b>			
Animal Type <b>OTHER NON DOMESTICATED</b>		Relation To Trafficway <b>TRAFFICWAY - ON ROAD</b>	
Crash Classification - Location <b>PUBLIC PROPERTY</b>		Crash Classification - Jurisdiction <b>NO SPECIAL JURISDICTION</b>	
Tribal Land		Access Control <b>NO CONTROL</b>	Special Study
Within Interchange Area <b>NO</b>	Junction Location <b>INTERSECTION</b>	Intersection Type <b>FOUR-WAY INTERSECTION</b>	
Closure Type <b>LANE CLOSURE</b>		Reasons for Closure <b>LAW ENFORCEMENT, TOW TRUCK, FIRE/EMS</b>	
Date Initial Lane/Rd Closed <b>02/27/2022</b>	Time Initial Lane/Rd Closed <b>07:24 PM</b>		
Date All Lanes Open <b>02/27/2022</b>	Time All Lanes Open <b>07:56 PM</b>	Date Scene Cleared <b>02/27/2022</b>	Time Scene Cleared <b>07:56 PM</b>

**Unit Summary**

<b>UNIT</b>  <b>01</b>	Unit Status <b>IN TRANSIT</b>		Vehicle Operating As Classification <b>D CLASS</b>		Unit Type <b>AUTOMOBILE</b>	
	Vehicle Type <b>(SPORT) UTILITY VEHICLE</b>				Operating As Endorsements	
	Total Occs <b>2</b>	Train/Bus # Recorded	Total # Citations Issued <b>0</b>	Total Trailers <b>0</b>	Total HazMat Types <b>0</b>	
	Insurance? <b>YES</b>	Direction Of Travel <b>SOUTHBOUND</b>	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit <b>55</b>	Total Lanes <b>2</b>	
	Most Harmful Event: Collision With <b>DOMESTICATED ANIMAL - ALIVE</b>		Special Function <b>NO SPECIAL FUNCTION</b>		Emergency Motor Vehicle Use <b>NOT APPLICABLE</b>	
	Traffic Way <b>TWO-WAY, NOT DIVIDED</b>		Traffic Control <b>NO CONTROL</b>		Traffic Control Inoperative/Missing <b>NO</b>	
	Surface Type <b>BLACKTOP (BITUMINOUS)</b>		Road Curvature <b>STRAIGHT</b>		Road Grade <b>DOWNHILL</b>	
	Truck Bus or HazMat <b>NO</b>					

**Vehicle**

<b>01</b>	License Plate Number <b>AAU8786</b>		Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
	Vehicle Identification Number <b>1FM5K8D86DGA67998</b>		Make <b>FORD</b>	Year <b>2013</b>	Model <b>EXPLORER</b>

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UNIT VEHICLE	Color <b>GLD - GOLD</b>	Body Style <b>UT - SPORT UTILITY VEHICLE</b>	Bus Use	
	Initial Contact Point <b>01 - RIGHT FRONT CORNER</b>	Vehicle Damage <b>01 - RIGHT FRONT CORNER</b>		
	Extent Of Damage <b>FUNCTIONAL DAMAGE</b>			
	Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OPERATOR</b>		
	What Driver Was Doing <b>GOING STRAIGHT</b>	Vehicle Factors <b>NOT APPLICABLE</b>		
Driver Prior Action Other				
UNIT VEHICLE	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
	Owner Name <b>GLENN DAVID ROSE (608) 576-3371</b>	Owner Address <b>1170 CHERRY ST PLAIN, WI 53577 , US</b>		
UNIT VEHICLE	<b>Sequence Of Events</b>			
	Event <b>DOMESTICATED ANIMAL - ALIVE</b>			
	Event			
	Event			
UNIT VEHICLE	<b>Policy Holder</b>			
	Insurance Company <b>PROGRESSIVE-CASUALTY-INS-CO</b>	Individual <b>GLENN ROSE</b>		
UNIT INDIVIDUAL	<b>Individual</b>			
	Driver <b>JENNIFER LYNN ALT (608) 576-3371</b>	Citations Issued <b>0</b>	Sex <b>FEMALE</b>	
		Date of Birth <b>[REDACTED]</b>	Race <b>WHITE</b>	
	Address <b>1170 CHERRY ST PLAIN, WI 53577 , US</b>	Driver License Number <b>[REDACTED]</b>	<b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
UNIT INDIVIDUAL	<b>Safety Equipment</b>			
	On Duty Crash	Safety Equipment <b>NONE USED - VEHICLE OCCUPANT</b>		
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>		
	Helmet Use	Helmet Compliance		
	Eye Protection	Tint Compliance		
UNIT INDIVIDUAL	<b>Injury</b>	Injury Severity <b>POSSIBLE INJURY</b>	Airbag <b>NON DEPLOYED</b>	
	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>	
	Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier	EMS Run #	

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UNIT INDIVIDUAL	Hospital		Date of Death		Time of Death		
	<b>Distracted By</b> Distracted By Source NOT APPLICABLE (NOT DISTRACTED)						
	Distracted By Action NOT DISTRACTED						
	<b>Non Motorist</b>		Striking Unit #		Location		
	Prior Action						
	Action						
	Action Other					To/From School	
	<b>Drug &amp; Alcohol</b>		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						
	UNIT INDIVIDUAL	<b>Individual</b>					
		Passenger LAWRENCE STANLEY DONALD ROSE (262) 339-5074			Citations Issued 0	Sex MALE	
					Date of Birth [REDACTED]	Race WHITE	
Address 6380 RAY HOLLOW RD ARENA, WI 53503 , US			Driver License Number [REDACTED] STATE: WISCONSIN COUNTRY: UNITED STATES				
UNIT INDIVIDUAL	<b>Safety Equipment</b>		On Duty Crash		Safety Equipment		
	Row 01 - FRONT ROW		Seat Position 09 - RIGHT		SHOULDER & LAP BELT		
	Helmet Use			Helmet Compliance			
	Eye Protection			Tint Compliance			
	<b>Injury</b>		Injury Severity POSSIBLE INJURY		Airbag NON DEPLOYED		
	Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		Trapped/Extricated NOT TRAPPED		
	Medical Transport NOT TRANSPORTED			EMS Agency Identifier		EMS Run #	
Hospital		Date of Death		Time of Death			

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UNIT INDIVIDUAL 01 002
Distracted By Source
Distracted By Action
Non Motorist Striking Unit# Location
Prior Action
Action
Action Other To/From School
Drug & Alcohol Suspected Alcohol Use Suspected Drug Use
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

Unit Summary

UNIT 02
Unit Status IN TRANSIT Vehicle Operating As Classification D CLASS Unit Type TRUCK
Vehicle Type UTILITY TRUCK/PICKUP TRUCK Operating As Endorsements
Total Occs 1 Train/Bus # Recorded Total # Citations Issued 0 Total Trailers 0 Total HazMat Types 0
Insurance? YES Direction Of Travel SOUTHBOUND Pre Crash Tire Mark Speed Limit 55 Total Lanes 2
Most Harmful Event: Collision With DOMESTICATED ANIMAL - ALIVE Special Function NO SPECIAL FUNCTION Emergency Motor Vehicle Use NOT APPLICABLE
Traffic Way TWO-WAY, NOT DIVIDED Traffic Control NO CONTROL Traffic Control Inoperative/Missing NO
Surface Type BLACKTOP (BITUMINOUS) Road Curvature STRAIGHT Road Grade DOWNHILL
Truck Bus or HazMat NO

Vehicle

UNIT 02 002
License Plate Number RH7414 Plate Type LTK - LIGHT TRUCK St WI Country of Issuance UNITED STATES
Vehicle Identification Number 1GCVKREC1GZ296434 Make CHEVROLET Year 2016 Model SILVERADO
Color WHI - WHITE Body Style PK - PICKUP Bus Use
Initial Contact Point 12 - FRONT

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UNIT VEHICLE	Vehicle Damage		7 8 9 10 11 5 4 3 2 1	
	Extent Of Damage <b>DISABLING DAMAGE</b>			12 - FRONT
	Towed Due To Damage <b>TOWED DUE TO DISABLING DAMAGE</b>			Vehicle Removed By <b>GEORGES AUTO BODY</b>
	What Driver Was Doing <b>GOING STRAIGHT</b>			Vehicle Factors
UNIT VEHICLE	Driver Prior Action Other		<b>NOT APPLICABLE</b>	
	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
	Owner Name <b>RYAN JOSEPH LIEGEL</b> (608) 477-2586		Owner Address <b>E5846 LELAND RD</b> <b>LOGANVILLE, WI 53943 , US</b>	
	<b>Sequence Of Events</b>			
UNIT VEHICLE	Event <b>DOMESTICATED ANIMAL - ALIVE</b>			
	Event			
	Event			
	Event			
UNIT VEHICLE	<b>Policy Holder</b>			
	Insurance Company <b>ALLSTATE-INS-CO</b>		Individual <b>RYAN LIEGEL</b>	
	<b>Individual</b>			
	Driver <b>RYAN JOSEPH LIEGEL</b> (608) 477-2586		Citations Issued <b>0</b>	Sex <b>MALE</b>
		Date of Birth [REDACTED]	Race <b>WHITE</b>	
Address <b>E5846 LELAND RD</b> <b>LOGANVILLE, WI 53943 , US</b>		Driver License Number [REDACTED] <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
UNIT INDIVIDUAL	<b>Safety Equipment</b>		On Duty Crash	
	Safety Equipment			
	Row <b>01 - FRONT ROW</b>	Seat Position <b>07 - LEFT</b>	<b>SHOULDER &amp; LAP BELT</b>	
	Helmet Use		Helmet Compliance	
Eye Protection		Tint Compliance		
UNIT INDIVIDUAL	<b>Injury</b>		Airbag	
	<b>NO APPARENT INJURY</b>		<b>DEPLOYED-SIDE</b>	
	Ejected <b>NOT EJECTED</b>	Ejection Path <b>NOT EJECTED/NOT APPLICABLE</b>	Trapped/Extricated <b>NOT TRAPPED</b>	
	Medical Transport <b>NOT TRANSPORTED</b>		EMS Agency Identifier	EMS Run#
Hospital		Date of Death	Time of Death	

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<b>UNIT INDIVIDUAL          02 003</b>	<b>Distracted By</b> Distracted By Source <b>NOT APPLICABLE (NOT DISTRACTED)</b>	
	Distracted By Action <b>NOT DISTRACTED</b>	
	<b>Non Motorist</b>	Striking Unit #      Location
	Prior Action	
	Action	
	Action Other	
	To/From School	
	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>
		Suspected Drug Use <b>NO</b>
	Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type
Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results
Drug Type		
Individual Condition <b>APPEARED NORMAL</b>		