

6TL0D6N02F  
22-01995

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 22-01995		Investigating Officer/Deputy DEPUTY B. STODDARD	
Crash Date 03/03/2022		Crash Time 06:20 AM		Date Arrived		Time Arrived	
Date Notified 03/03/2022		Time Notified 06:20 AM		Total Units 01		Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input 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 NON-DOMESTICATED ANIMAL W/ NO INJURY				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

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

**Location**

ON STH33 EB 0.67 MI E OF JOHNSON RD IN THE TOWN OF GREENFIELD IN SAUK COUNTY	Latitude 43.474254034	Longitude -89.657243657
	X Coordinate 285081.4375	Y Coordinate 4816912.5
	Structure Type	

**Crash Scene**

First Harmful Event NON DOMESTICATED ANIMAL (ALIVE)	First Harmful Event Location ON ROADWAY	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition	
Road Surface Condition(s)	Roadway Factor(s)	
Environment Factor(s)		
Weather Condition(s)		
Animal Type DEER	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control	Special Study

**Unit Summary**

01 UNIT	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 EASTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit	Total Lanes	
	Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE)		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way		Traffic Control		Traffic Control Inoperative/Missing	
	Surface Type		Road Curvature		Road Grade	

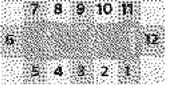
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Truck Bus or HazMat				
<b>Vehicle</b>				
01 UNIT VEHICLE 01	License Plate Number <b>PC7598</b>	Plate Type <b>LTK - LIGHT TRUCK</b>	St <b>WI</b>	
	Country of Issuance <b>UNITED STATES</b>	Vehicle Identification Number <b>3GTU2NECXGG180556</b>	Make <b>GENERAL MOTORS COR</b>	
	Year <b>2016</b>	Model <b>SIERRA</b>	Color <b>RED - RED</b>	
	Body Style <b>PK - PICKUP</b>	Bus Use	Initial Contact Point <b>12 - FRONT</b>	
	Vehicle Damage <b>01 - RIGHT FRONT CORNER, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT</b>			
	Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OPERATOR</b>		
	What Driver Was Doing	Vehicle Factors		
Driver Prior Action Other				
01 UNIT VEHICLE 01	Driver Actions <b>NO CONTRIBUTING ACTION</b>			
	Owner Name	Owner Address		
<b>Policy Holder</b>				
01 UNIT INDIVIDUAL 01	Insurance Company <b>WISCONSIN-MUTUAL-INS-CO</b>	Individual <b>LEE VIERBICHER</b>		
	<b>Individual</b>			
01 UNIT INDIVIDUAL 01	Driver <b>LEE TYLER VIERBICHER (608) 963-7402</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>	
	Date of Birth [REDACTED]	Race <b>ASIAN OR NATIVE HAWAIIAN OR OTHER PACIFIC ISLAN</b>		
	Address <b>331 7TH ST BARABOO, WI 53913 , US</b>	Driver License Number [REDACTED] <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
	<b>Safety Equipment</b>			
On Duty Crash	Safety Equipment <b>SHOULDER &amp; LAP BELT</b>			
Row	Seat Position	Helmet Compliance		
Helmet Use	Tint Compliance			
Eye Protection	Airbag			
01 UNIT INDIVIDUAL 001	Injury Severity <b>NO APPARENT INJURY</b>			
	Ejected	Ejection Path	Trapped/Extricated	
	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          01 001</b>	<b>Distracted By</b>		Distracted By Source		
	Distracted By Action				
	<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		Alcohol Test Results
	Drug Test Given <b>TEST NOT GIVEN</b>		Drug Test Type	Drug Test Results	
	Drug Type				
Individual Condition <b>APPEARED NORMAL</b>					