6TL0C22XWX 22-02220

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 03/09/2022

Crash Time 06:38 PM

	Document Number Override Primary Crash Document#		1 -	Agency Crash Number 22-02220			Investigating Officer/Deputy DEPUTY A. WILCOX			
6TL0C22XWX	Crash Date Crash Time 03/09/2022 06:38 PM		Date A	Date Arrived		Time	Time Arrived			
	Date Notified Time Notified 03/09/2022 06:40 PM		Total U	Total Units		Tota 00	Total Injured Total Killed 00			
0C2	On Emergency	it and Run Lane	Closure	Closure Work Z			Trailer or Towe		Reporting Threshold	
3TL	Government Property	School NO	I		Tags	ags				
	▼ Reportable	Crash Type NON-DOMESTICATED	ANIMAL W/ N	NO INJUR	ťΥ		Amended		Secondary Crash	
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.									
Ì	Location									
ï								T. 5		
	ON STH23 WB			Latitude					Longitude	
	1252 FT S				43.371008283		-90.062890723		890723	
	OF ELI VALLEY RD				X Coordin	ate	Y Coordi 480657		inate	
	IN THE TOWN OF FRANKLI	N			251849.2					
	IN SAUK COUNTY				23 1049.2	23		400037	3	
					Structure	Туре				
	Crash Scene									
	First Harmful Event				FirstHarm	iful Event Lo	cation			
	NON DOMESTICATED ANIM	IAL (ALIVE)			ON ROA	DWAY				
ŀ	Manner of Collision				Light Condition					
		CLE IN TRANSPORT			Ligittoon	anion				
	00 - NO COLLISION W/VEHI	CLE IN TRANSPORT								
	Road Surface Condition(s)				Roadway Factor(s)					
	Environment Factor(s)									
Ī	Weather Condition(s)				1					
	Animal Type DEER									
ľ					Relation To Trafficway					
					TRAFFICWAY - ON ROAD					
ŀ					Crash Classification - Jurisdiction					
	Crash Classification - Location PUBLIC PROPERTY Tribal Land									
						NO SPECIAL JURIS				
					Access Control				Special Study	
Ī	Unit Summary									
·			I Vahiala Ona	ratina A a C	lassification		1 1 't T			
				Vehicle Operating As Classification			UnitType			
				D CLASS			AUTOMOB		3ILE	
_ [Vehicle Type				Operating As Endorsements			ments		
01	(SPORT) UTILITY VEHICLE									
ŀ	Total Occs Train/Bus#Recorded 1			Total # Citations Issued		- Total Trai		ilers Total HazMat Type		
	1	, .a.,	0		0		0			
		Direction Of Travel	Pre CrashTire		e Speed Lir		nit Total Lanes		es	
	YES	NORTHBOUND Mark								
LIND	Most Harmful Event: Collision With Spec			Special Function		•	Emergency Motor V		icle Use	
ب	NON DOMESTICATED ANIM	NO SPECIA	NO SPECIAL FUNCTION		TION		NOT APPLICABLE			
}	Traffic Way	Traffic Contr	Traffic Control				Traffic Control Inoperative/Missing			
			Hamic Control				Traine Considerative newspaling			
	Curfo on Turns	15-16				Bood Crode				
	Surface Type		Road Curvat	Road Curvature			Road Grade			

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	True	Fruck Bus or HazMat							
		Vehicle License Plate Number Plate Type St Country of Issuance							
2	VEHICLE 01	262VMH Vehicle Identification Number 1C4RJFAG8FC950794	Make JEEP	Year 2015	Model GRAND CHER	del			
		Color GRY - GRAY	Body Style UT - SPORT UTILITY VEHICLE Bus Use						
INI		Initial Contact Point 11 - LEFT FRONT CORNER Extent Of Damage	Vehicle Damage 11 - LEFT FRONT CO	PRNER		7 8 9 10 H 6 12 5 4 3 2 3			
		DISABLING DAMAGE Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By STEVES AUTO SERVICE						
		What Driver Was Doing	Vehicle Factors						
		Driver Prior Action Other							
UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTION							
٦	5	Owner Name	Owner Address						
TIND		Policy Holder Insurance Company	Individual						
5		PROGRESSIVE-CLASSIC-INS-CO	SHARI BROWN						
	IDIMDUAL	Individual Driver SHARI L BROWN (608) 403-1042	Citations issued	Sex FEMALE					
5		, , ,	Date of Birth	Race WHITE					
TNO.		Address 1685 CANTERBURY DR REEDSBURG, WI 53959 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sai	On Duty Crash fety Equipment	Safety Equipment						
		Row Seat Position	SHOULDER & LAP BELT						
		Heimet Usa	Heimet Compliance						
	100	Eye Protection	Tint Compliance Airbag						
9		Injury Severity NO APPARENT INJURY Ejected Ejection Path	Trapped/Extricated						
		Medical Transport	ESSE A		EMS Run#				
		NOT TRANSPORTED	EMS Agency Identifier Date of Death						
		Hospital	Date of Death		Time of Death				

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	Distracted By Distracted E	By Source				
	Distracted By Action					
	Non Motorist Striking Unit	t# Location				
	Prior Action					
	Action					
. 4						
GN						
						.
	Action Other					To/From School
	Drug & Alcohol 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		
<u>و</u> ع	Drug Type			1		
	Individual Condition					
	APPEARED NORMAL					