6TL0D9428G 22-02977

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 04/01/2022

Crash Time 03:43 AM

	Document Number Override Primary Crash D		Agency Crash Nun 22-02977				stigating Officer/Deputy UTY M. PETERSON			
8	Crash Date		Date Arrived		Time	Time Arrived				
942	Date Notified 04/01/2022	Time Notified 03:46 AM	Total Units 01		Total		Injured Total Killed 00			
6TL0D9428G	On Emergency	it and Run Lane (Closure		rk Zone	-	Trailer or T	owed	Reporting Threshold	
ETI	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	
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.									
	Location ———									
	ON STH23 EB				Latitude			Longitud	Φ.	
	0.32 MI S				43.329007171		-90.058			
	OF HICKORY RD						Y Coordii 480189			
	IN THE TOWN OF FRANKLII	Ni .			X Coordina	ate			inate	
	IN SAUK COUNTY	•			252030.1	25			5.5	
	IN SAUR COUNTY				Ctructure	T. (20				
					Structure Type NO STRUCTURE					
(Crash Scene									
1	First Harmful Event				Te:		43			
					I	ful Event Lo	cation			
	NON DOMESTICATED ANIM	IAL (ALIVE)			ON ROADWAY LightCondition					
Ì	Manner of Collision									
	00 - NO COLLISION W/VEHICLE IN TRANSPORT									
ŀ					Roadway Factor(s)					
	Road Surface Condition(s)				Roadway	ractor(s)	(S)10(S)			
	Environment Factor(s)									
	Weather Condition(s)]						
	AnimalType									
ŀ					Relation To Trafficway					
	DEER				1	WAY - ON				
	Crash Classification - Location			Crash Classification - Jurisdiction						
	PUBLIC PROPERTY				NO SPECIAL JURIS		RISDICTION			
	Tribal Land			Access Control				Special Study		
ì	Unit Summary									
			I \/- b :- l - O	A O	l'6'6					
				Vehicle Operating As Classification			UnitType			
	IN TRANSIT	D CLASS				AUTOMOBILE				
_	Vehicle Type			Operatir			g As Endorsements			
01	PASSENGER CAR									
					I Total Traile		l ers TotalHazMatTypes			
			Total # Citations Issued 0		`		o lotal Hazi		wat rypes	
						0				
	Insurance?	Direction Of Travel Pre CrashTi			e Speed Lim		nit Total Lanes		es	
	YES NORTHBOUND Mark			Mark						
LINO	Most Harmful Event: Collision With S			Special Function		-		Emergency Motor Vehicle Use		
-	NON DOMESTICATED ANIM	NO SPECIAL FUNCT		TION		NOT APPLICABLE				
}	Traffic Way	Traffic Contra	d			Traffic Control Inoperative/Missing				
	rianio vvay	Traffic Control				Harric Control Inoperative/Ivilssing				
	Durf Tur-	 								
	Surface Type	Road Curvature				Road Grade				

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	Truc	Truck Bus or HazMat							
		Vehicle License Plate Number	Plate Type	St	Country of Issuance				
	VEHICLE OF	AAX3022	AUT - AUTOMOBILE	WI	UNITED STATES	S			
5		Vehicle Identification Number 3N1AB7AP8DL656929	Make NISSAN	Year 2013	Model SENTRA				
		Color BLK - BLACK	Body Style SD - SEDAN		Bus Use				
 ⊑		Initial Contact Point 12 - FRONT	Vehicle Damage 7: 8: 9:10:11: 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE						
INN		Extent Of Damage DISABLING DAMAGE	FRONT, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT 5 4 3 2 3						
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By GEORGES AUTO BODY						
		What Driver Was Doing	Vehicle Factors						
		Driver Prior Action Other							
		Driver Actions NO CONTRIBUTING ACTION							
±NN 1	VEHICLE								
	<u>U</u>								
		OwnerName	Owner Address						
2	5								
 -		Policy Holder	1						
TNN N		Insurance Company PROGRESSIVE-UNIVERSAL-INSURANCE-COMP	Individual ASIA DELGADO						
		Driver ASIA BLU DELGADO (608) 567-1631	Citations Issued 0	Sex FEMALE					
⊨	DIVIDUA	(000) 507-1051	Date of Birth	Race HISPANIC					
N N		Address 980 WACHTER AVE APT 7	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES						
		PLAIN, WI 53577 , US							
	Sa	On Duty Crash fety Equipment	Safety Equipment						
		Row Seat Position	SHOULDER & LAP BELT						
	001	HelmetUse	Helmet Compliance						
		Eye Protection	Tint Compliance						
2		Injury Severity NO APPARENT INJURY	Airbag						
		Ejected Ejection Path			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 Source	e				
		Distracted By Action					
		Non Motorist Striking Unit#	Location				
		Prior Action					
		Action					
	AL						
UNIT	INDIVIBUAL						
	2						
		Action Other					To/From School
	1	Drug & Alcohol Suspected Alcohol NO	Suspected Drug Use NO				
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	Alcohol Test Type Alcohol Test Results			
		Drug Test Given TEST NOT GIVEN	Drug Test Type		Drug Test Results		
01	000	Drug Type					
	_						
		Individual Condition					
		APPEARED NORMAL					