6TL097RB7G 22-04980

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 05/29/2022

Crash Time 11:29 PM

	Document Number Override Primary Crash Document		Agency Crash Number 22-04980		I	Investigating Officer/Deputy DEPUTY C. BRATZ				
<u>7</u>	Crash Date Crash Time 05/29/2022 11:29 PM		Date Arrived			Time	Time Arrived			
TL097RB	Date Notified Time Notified 11:29 PM		Total Units 01		Total		Ilnjured	Total Killed		
.097	On Emergency Hit and Run L		Closure Work Zone			3	Trailer or Towed		Reporting Threshold	
6TI	Government Property	NO NO	I		Tags	gs				
	Reportable	Crash Type NON-DOMESTICATED A	NIMAL W/ N	O INJUR	ťΥ		Amended		Secondary Crash	
	i, a sworn law enforcem	ent officer, agree that I ha	ave not added any CJIS data in this report.							
	_ocation									
- [ON STH154 WB				Latitude			Longitud	Δ	
	36 FT S				43.40487	72834			593135	
	OF RUSTIC VIEW RD				43.404012031		-30.112		383133	
	IN THE TOWN OF WASHING	TON			X Coordina	ate	Y Coordii		nate	
	IN SAUK COUNTY	1014			243104.0	3125		481066	6.5	
	IN SAUR COUNTY									
				Structure Type NO STRUCTURE						
(Crash Scene									
1	First Harmful Event				Eirat Uarm	ıful Event Lo	antion			
		IAL (ALIXE)			1		Cadors			
	NON DOMESTICATED ANIM	IAL (ALIVE)			ON ROADWAY					
	Manner of Collision			Light Condition						
	00 - NO COLLISION W/VEHI	CLE IN TRANSPORT								
ľ	Road Surface Condition(s)				Roadway Factor(s)					
	• ,			, , , , , , , , , , , , , , , , , , , ,						
ŀ	Environment Factor(s)									
	Environmental deter(e)									
ŀ	Weather Condition(s)									
	Weather Condition(s)									
	A mine at True		Dalaka Ta Tarka							
	AnimalType				Relation To Trafficway					
	DEER			TRAFFICWAY - ON ROAD						
	Crash Classification - Location			Crash Classification - Jurisdiction						
	PUBLIC PROPERTY			NO SPECIAL JURIS Access Control		SDICTION				
ľ	Tribal Land							Special Study		
L	In it Common and				<u> </u>					
	Jnit Summary 💳									
	Unit Status		Vehicle Opera	ehicle Operating As Classification			UnitType			
	IN TRANSIT			D CLASS				AUTOMOBILE		
ŀ	Vehicle Type						Operating As Endorsements		ments	
01	PASSENGER CAR						-,			
						1 T-4-1T3		lers Total HazMat Types		
	1 0		Total # Citations Issued						viat i ypes	
			0	0		0		0		
	Insurance?	Direction Of Travel	Pre C	Speed Lim		nit Total Lane		es		
	YES WESTBOUND Mark									
LIND	Most Harmful Event: Collision With Special Funct			tion	on I		Emergency Motor Vehicle Use			
-	NON DOMESTICATED ANIM		'			-				
				Traffic Control			Traffic Contro		rol Inonarativa (Missing	
	Traffic Way			rg .			Traffic Control Inoperative/Missing			
	2	 								
	Surface Type	Road Curvature				Road Grade				

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	Truc	ck Bus or HazMat							
		Vehicle	004004004004004004004004004004	0150150150150150150150150150150150150	15015015015015015015015	TENNESSE STEELE STE			
UNIT 01		License Plate Number		Plate Type	St	Country of Issuance)		
		APB6750		AUT - AUTOMOBILE	WI	UNITED STATES	3		
		Vehicle Identification Number		Make	Year	Model			
	VEHICLE 01	2B3KA43R68H153692		DODGE	2008	CHARGER			
		Color BLK - BLACK		Body Style SD - SEDAN		Bus Use	BusUse		
		Initial Contact Point		Vehicle Damage			7 8 9 10 11		
		01 - RIGHT FRONT CORNER Extent Of Damage MINOR DAMAGE Towed Due To Damage					5 12		
	曲			01 - RIGHT FRONT CO	NNEK		5 4 3 2 1		
	>			Vehicle Removed By					
		NOT TOWED		<u>'</u>					
		What Driver Was Doing		Vehicle Factors					
		NEGOTIATING CURVE							
		Driver Prior Action Other		NOT APPLICABLE					
		Driver Actions							
١.	#	NO CONTRIBUTING ACTION							
	NO CONTRIBUTING ACTION Description:								
5									
		Owner Name Daner Address							
_									
2	5								
⊨		Policy Holder							
\ N		Insurance Company PROGRESSIVE-CLASSIC-INS-CO		Individual					
				DILLON IGEL					
		Driver		Citations issued					
		DILLON ROME IGEL			0 MALE				
				Date of Birth Race					
 	DMDUAI								
Ş	Ξ	Address		Drivert icense Number					
-	Z	2701 E MAIN ST LOT 60 REEDSBURG, WI 53959 , US		STATE: WISCONSIN COUNTRY: UNITED STATES					
	Sa	fety Equipment		Safety Equipment					
		Row	Seat Position	SHOULDER & LAP E	BELT				
		HelmetUse		Helmet Compliance					
		Eye Protection		TintCompliance					
_	_			Airbag					
01	5	Injury NO APPARENT INJURY							
		Ejected Ejection Path				Trapped/Extricated			
				EMS Agency Identifier		EMS Run#			
		NOT TRANSPORTED		gy was mild		Elve Ruisi			
		Hospital		Date of Death		Time of Death	Time of Death		
				1					

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		Distracted By	Source					
		Distracted By						
		Distracted By Action						
			1					
		Non Motorist Striking Unit #	Location					
		Prior Action						
		Action						
	4							
<u>_</u>	INDIWIBUAL							
UNIT	Ŋ							
_	9							
		Action Other					To/From School	
		L Suspected Al	Suspected Drug Use					
	L	Drug & Alcohol NO	NO					
		Alcohol Test Given	Alcohol Test Type	+		Alcohol Test Results		
		TEST NOT GIVEN		I				
		Drug Test Given TEST NOT GIVEN Drug Test Type			Drug Test Results		5	
01	001	Drug Type	'		•			
	0							
		Individual Condition						
		APPEARED NORMAL						