

6TL0B4X4QG
22-04942

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 22-04942 | Investigating Officer/Deputy SERGEANT E. KNULL | |
| Crash Date 05/29/2022 | | Crash Time 10:16 AM | Date Arrived 05/29/2022 | Time Arrived 10:27 AM | |
| Date Notified 05/29/2022 | | Time Notified 10:16 AM | Total Units 01 | Total Injured 01 | 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 DT4000 (STANDARD CRASH) | | <input type="checkbox"/> Amended | <input type="checkbox"/> Secondary Crash |

Description

| | |
|----------------|--------------------------------|
| <p>Diagram</p> | Reconstruction By |
| | Photos By |
| | Additional Information NONE |

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

OPERATOR SB ON N DUTCH HOLLOW RD STRUCK A DEER. OPERATOR WAS ABLE TO KEEP THE BIKE UPRIGHT AND COASTED TO A STOP. OPERATOR SUSTAINED POSSIBLE SERIOUS INJURY AND WAS TRANSPORTED FROM THE SCENE BY WONEWOC AMBULANCE. MOTORCYCLE WAS REMOVED FROM SCENE BY SHIELDS TOWING.

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Location

Table with 3 columns: Address (ON N DUTCH HOLLOW RD, 281 FT E, OF AMSTERDAM RD, IN THE TOWN OF LA VALLE, IN SAUK COUNTY), Latitude (43.610764311), Longitude (-90.180449696), X Coordinate (243342.625), Y Coordinate (4833559), Structure Type (NO STRUCTURE)

Crash Scene

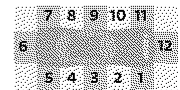
Table with 4 columns: First Harmful Event (NON DOMESTICATED ANIMAL (ALIVE)), First Harmful Event Location (ON ROADWAY), Manner of Collision (00 - NO COLLISION W/VEHICLE IN TRANSPORT), Light Condition (DAYLIGHT), Road Surface Condition(s) (DRY), Roadway Factor(s) (NONE), Environment Factor(s) (ANIMAL (S) IN ROADWAY), Weather Condition(s) (CLOUDY), Animal Type (DEER), Relation To Trafficway (TRAFFICWAY - ON ROAD), Crash Classification - Location (PUBLIC PROPERTY), Crash Classification - Jurisdiction (NO SPECIAL JURISDICTION), Tribal Land, Access Control (NO CONTROL), Special Study, Within Interchange Area (NO), Junction Location (NON-JUNCTION), Intersection Type (NOT AN INTERSECTION)

Unit Summary

Table with 5 columns: Unit Status (IN TRANSIT), Vehicle Operating As Classification (M CLASS), Unit Type (MOTORCYCLE), Vehicle Type (MOTORCYCLE), 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 (45), Total Lanes (2), Most Harmful Event: Collision With (NON 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

Table with 4 columns: License Plate Number (221FB), Plate Type (CYC - CYCLE), St (WI), Country of Issuance (UNITED STATES), Vehicle Identification Number (1HD1ECK20DY123521), Make (HARLEY DAVIDSON), Year (1983), Model (CYCLE), Color (BRO - BROWN), Body Style (MC - MOTORCYCLE), Bus Use, Initial Contact Point (12 - FRONT), Vehicle Damage (01 - RIGHT FRONT CORNER, 12 - FRONT), Extent Of Damage (FUNCTIONAL DAMAGE)



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|---|---|--|---|----------------------|
| UNIT VEHICLE | Towed Due To Damage TOWED BUT NOT DUE TO DISABLING DAMAG | | Vehicle Removed By SHIELDS TOWING | |
| | What Driver Was Doing GOING STRAIGHT | | Vehicle Factors | |
| | Driver Prior Action Other | | NOT APPLICABLE | |
| | Driver Actions NO CONTRIBUTING ACTION | | | |
| 01 01 | Owner Name ROBERT ALLEN AUSTIN (608) 853-0578 | | Owner Address N2903 BROWN RD ELROY, WI 53929 , US | |
| | Sequence Of Events | | | |
| 01 02 03 04 | Event NON DOMESTICATED ANIMAL (ALIVE) | | | |
| | Event | | | |
| | Event | | | |
| | Event | | | |
| UNIT | Policy Holder | | | |
| | Insurance Company PROGRESSIVE-CLASSIC-INS-CO | | Individual ROBERT AUSTIN | |
| UNIT INDIVIDUAL | Individual | | | |
| | Driver ROBERT ALLEN AUSTIN (608) 853-0578 | | Citations Issued 0 | Sex MALE |
| | Address N2903 BROWN RD ELROY, WI 53929 , US | | Date of Birth [REDACTED] | Race WHITE |
| | Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES | | | |
| 01 001 | Safety Equipment | | On Duty Crash | |
| | Row 01 - FRONT ROW | | Seat Position 07 - LEFT | |
| | Protective Gear GLOVES, BOOTS, JACKET, LONG PANTS | | | |
| | Helmet Use NO | | Helmet Compliance UNKNOWN | |
| | Eye Protection YES: WORN AND WINDSHIELD | | Tint Compliance YES | |
| | Injury | | Airbag | |
| | Injury Severity SUSPECTED SERIOUS INJUR | | NON DEPLOYED | |
| Ejected NOT APPLICABLE | | Ejection Path NOT EJECTED/NOT APPLICABLE | | |
| Trapped/Extricated NOT TRAPPED | | | | |
| Medical Transport EMS GROUND | | EMS Agency Identifier 6000820 | | |
| EMS Run # | | | | |
| Hospital HILLSBORO AREA HOSPITAL | | Date of Death | | |
| Time of Death | | | | |
| Distracted By | | Distracted By Source | | |
| NOT APPLICABLE (NOT DISTRACTED) | | | | |
| Distracted By Action NOT DISTRACTED | | | | |

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|-------------------|--|--|------------------------------------|---------------------------------|----------------------|
| UNIT | Non Motorist | | Striking Unit # | Location | |
| | Prior Action | | | | |
| | Action | | | | |
| | Action Other | | | | To/From School |
| INDIVIDUAL | Drug & Alcohol | | 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 | | | | |