6TL097RB7H 22-05091

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/01/2022

Crash Time 06:11 PM

	Document Number Override	Primary Crash Document#		Agency Crash Number 22-05091			Investigating Officer/Deputy DEPUTY C. BRATZ				
Y.	Crash Date 06/01/2022	Crash Time 06:11 PM			Date Arrived		Time	Time Arrived			
097RB7H	Date Notified 06/01/2022	Time Notified 06:11 PM			Total Units 01		Total		Injured Total Killed 00		
60	On Emergency	t and Run Lane Clos		ure Work		rk Zone	***************************************	Trailer or To		Reporting Threshold	
6TL	Government Active School Zone			School Bus Related NO			Tags	Tags			
	Reportable	Crash Type NON-DOMESTICATED ANIMAL W/ NO INJUR			Y Amended			Secondary Crash			
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.										
Ī	Location ——										
	ON STH33 WB					Latitude			Longitud	e	
	355 FT N					43.57050)4361	-90.100		091533	
	OF ROZNOS RD					V Coordin	ata				
	IN THE TOWN OF LA VALLE IN SAUK COUNTY					X Coordinate 249660.734375			Y Coordinate 4828842		
						Structure Type NO STRUCTURE					
	Crash Scene										
ì	First Harmful Event					Five # 1.1 = was	ful Event L				
		AL (ALE)(E)						ocation			
	NON DOMESTICATED ANIM	AL (ALIVE)					ON ROADWAY				
	Manner of Collision					Light Condition					
	00 - NO COLLISION W/VEHIC	CLE IN TRANSPO	DRT								
	Road Surface Condition(s)					Roadway Factor(s)					
ŀ	Environment Factor(s)					1					
	Environment deter(e)										
	Weather Condition(s)					1					
	·′										
	AnimalType					Relation To Trafficway					
	DEER					TRAFFICWAY - ON ROAD					
	Crash Classification - Location					Crash Classification - Jurisdiction					
	PUBLIC PROPERTY					NO SPECIAL JURISDICTION		Consist Charles			
	TribalLand					Access Control				Special Study	
L											
	Unit Summary										
	Unit Status Vehicle Operatin				ting As C	lassification		UnitType			
	IN TRANSIT D.C.				D CLASS			AUTOMOBILE			
_ [Vehicle Type					Operating As Endorsements					
01	(SPORT) UTILITY VEHICLE										
	Total Occs Train/Bus # Recorded			Total#Citations Issued		TotalTr		Trailers Total Ha		Mat Types	
	1			0		0		0			
_ [Direction Of Travel WESTBOUND		Pre CrashTire Mark		Speed Lim		it Total Lanes		es	
LNO	Most Harmful Event: Collision With			cial Function				Emergency Motor Vehicle Use			
 	NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNCT			TION		NOT APPLICABLE		
}	Traffic Way			ffic Control				Traffic Control Inoperative/Missing			
				riane contion				The second of the second secon			
	Surface Type			Road Curvature			Road Grade				

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	Truc	ck Bus or HazMat								
		<u>Vehicle</u>								
		License Plate Number 869WWF		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES				
01	VEHICLE 01	Vehicle Identification Number 2FMDK3GC1EBA41123		Make FORD	Year 2014	Model EDGE SE				
		Color BLU - BLUE		Body Style LL - CARRYALL		Bus Use				
LINO		Initial Contact Point 01 - RIGHT FRONT CORNER Extent Of Damage DISABLING DAMAGE Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Damage 01 - RIGHT FRONT C CORNER, 12 - FRONT		FT FRONT	7 8 9 10 11 T FRONT 6 12 5 4 3 2 1			
				Vehicle Removed By SHIELDS TOWING						
		What Driver Was Doing		Vehicle Factors						
LIND		Driver Prior Action Other								
	VEHICLE	Driver Actions NO CONTRIBUTING ACTION								
	3	Crimer Varie		Channes Address						
2	10									
⊨		Policy Holder								
N N		Insurance Company STATE-FARM-GENERAL-INS	-co	Individual JOSEPH STANEK						
		Individual								
	INDIVIDUAL	Driver PAMELA SUE STANEK		Citations issued 0	Sex FEMALE					
LN				Date of Birth	Race WHITE					
		Address E15835 STATE HIGHWAY 82 HILLSBORO, Wt 54634 , US On Duty Crash		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sa			Safety Equipment						
01	1001	Row Seat Position		SHOULDER & LAP BELT						
		HelmetUse		Helmet Compliance						
		Eye Protection		Tint Compliance						
		Injury Severity NO APPARENT INJURY		Airbag						
		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 So	ource					
		Distracted By Action						
		Non Motorist Striking Unit#	Location					
		Prior Action Prior Action	·					
	L	Action						
UNIT	NDWIDUAL							
5	NON							
		Action Other					To/From School	
	I	Drug & Alcohol NO	hol Use	Suspected Drug Use NO				
		Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type			Alcohol Test Results	Alcohol Test Results	
	Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results			
01	100	Drug Type						
		Individual Condition						
		APPEARED NORMAL						