6TL0BNZM3T 22-05461

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/10/2022

Crash Time 09:30 PM

	Document Number Override Primary Crash Document#			Agency Crash Number 22-05461		I	Investigating Officer/Deputy DEPUTY K. RENZ			
//3T	Crash Date 06/10/2022	Crash Time 09:30 PM	Date Arrived		Time		e Arrived			
0BNZM3T	Date Notified 06/10/2022	Time Notified 09:35 PM	Total Ur 01	Total Units 01		Total			Total Killed 00	
.0B	On Emergency	it and Run Lane (Lane Closure W				railer or Towed		Reporting Threshold	
eTL	Government Property	Active School Zone Crash Type	NO NO	School Bus Related NO		Tags	Гags 			
	Reportable	ANIMAL W/ NO INJURY				Amended		Secondary Crash		
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.									
	Location ———									
Ī	ON USH12 EB				Latitude Longitude				٥	
	0.33 MI S				43.34888923 X Coordinate		-89.76018 Y Coordina			
	OF USH12 EB									
	IN THE TOWN OF SUMPTER	•							nate	
	IN SAUK COUNTY	`			276293.8	375	4803260		0	
	IN SAUK COUNT				Structure 7	Type				
					Circolaro	, ,,,,				
	Crash Scene				l					
Ţ										
	First Harmful Event				First Harm	ful Event Lo	cation			
	NON DOMESTICATED ANIM	IAL (DEAD)			ON ROA	DWAY				
ŀ	Manner of Collision				Light Cond	dition				
	00 - NO COLLISION W/VEHIC	CLE IN TRANSPORT			Eight Condition					
ŀ	Road Surface Condition(s)				Roadway Factor(s)					
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				incadway i acion(s)					
	Environment Factor(s)									
	Weather Condition(s))								
İ	Animal Type					Relation To Trafficway				
	DEER				TRAFFICWAY - ON ROAD					
	Crash Classification - Location			Crash Classification - Jurisdiction						
	PUBLIC PROPERTY			NO SPECIAL JURIS		SDICTION				
	Tribal Land				Access Control				Special Study	
į	Unit Summary									
	Unit Status Vehicle Operating As C					lassification UnitType				
				D CLASS			AUTOMOBILE			
				D CLASS						
01	Vehicle Type				Operating As Endorsements			ments		
0	PASSENGER CAR Total Occs Train/Bus#Recorded Total # Citations Issued									
	Total Occs	Total#Citations Issued						Vlat Types		
	2		0		0		0			
_		Direction Of Travel SOUTHBOUND	1 1	rashTire Aark	, Speed Lin		it Total Lanes		es	
LINO	No.			Special Function				Emergency Motor Vehicle Use		
→	NON DOMESTICATED ANIM	NO SPECIAL FUNCTION		TION						
	Traffic Way	Traffic Control				Traffic Control Inoperative/Missing				
	Surface Type	Road Curvature			Road Grade					

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	Truc	ck Bus or HazMat								
		Vehicle								
		License Plate Number		Plate Type St		Country of Issuance				
10		AMS6425		AUT - AUTOMOBILE	WI	UNITED STATES	1			
	5	Vehicle Identification Number 2G1WT58K869112315		Make CHEVROLET	Year 2006	Model IMPALA				
		Color		Body Style		Bus Use				
		BLU - BLUE Initial Contact Point		4D - 4DR						
<u> </u>	Ħ	Initial Contact Point 01 - RIGHT FRONT CORNE	R	Vehicle Damage 7 8 9 10 11						
TINO	VEHICLE	Extent Of Damage		01 - RIGHT FRONT CORNER, 14 - UNDERCARRIAGE 5 12 13 Vehicle Removed By						
	3	MINOR DAMAGE								
		Towed Due To Damage NOT TOWED		OPERATOR						
		What Driver Was Doing		Vehicle Factors						
		Driver Prior Action Other		4						
		Dital Life Veliet Agist								
		Driver Actions NO CONTRIBUTING ACTION								
<u> </u>	VEHICLE	NO CONTRIBUTING ACTION								
	Ĭ									
	×									
		Owner Name: Owner Address								
2	5									
•										
١.		Policy Holder								
\ S		Insurance Company		Individual						
_		STATE-FARM-GENERAL-INS-CO		DARLENE COOK						
		Individual Driver		Citations Issued	Sex					
		DARLENE U COOK		0 FEMALE						
	DIMIDUAL			Date of Birth	Race WHITE					
Ş	8	Address		Driver License Number						
>		S7559 HWY 12 # N26 NORTH FREEDOM, Wt 53951 , US		STATE: WISCONSIN COUNTRY: UNITED STATES Safety Equipment						
	Sal	fety Equipment								
		Row	Seat Position	SHOULDER & LAP	PBELT					
		HelmetUse		Heimet Compliance						
		Euo Protoglion		Tito						
		Eye Protection Injury Severity		Tint Compliance						
2	100			Airbag						
	•	INJURY NO APPARENT INJURY Ejected Ejection Path		Trapped/Extricated						
		Ljector Ljector Fau				, supper Entitioned				
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run#				
		Hospital		Date of Death		Time of Death				
		Hoshed								

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								• •		
		Distracted By	d By Source							
		Distracted By Action								
		Non Motorist Striking U	nit#	Location						
		Prior Action								
		Action								
_	A L									
UNIT	NDWBUAL									
		Action Other						To/From School		
	l	L Suspecte	d Alcohol Us	se .	Suspected Drug Use					
	Drug & Alcohol NO				NO					
				Alcohol Test Type	ype Alcohol Test Results					
		TEST NOT GIVEN		D T4.T						
		Drug Test Given TEST NOT GIVEN Drug Test 7		Drug Test Type	Drug Test Resu		is .			
04	ē	Drug Type				•				
)	0									
		Individual Condition								
		APPEARED NORMAL								