6TL0C22XX4 22-06024

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 06/25/2022

Crash Time 11:00 PM

	Document Number Override	Primary Crash Document#		Agency Crash Number 22-06024			Investigating Officer/Deputy DEPUTY A. WILCOX				
X4	Crash Date 06/25/2022	Crash Time 11:00 PM			Date Arrived		Time	Time Arrived			
6TL0C22XX4	Date Notified 06/25/2022	Time Notified 11:18 PM		Total Units 01		Total		Injured Total Killed 00			
၁၀	On Emergency	it and Run	Lane Closi			Vork Zone		Trailer or Towed		Reporting Threshold	
ETI	Government Property	Active Sch	ool Zone	School B NO	lus Relat	ed 	Tags	•			
	Reportable	Crash Type NON-DOMEST	MESTICATED 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.										
	Location ——										
·	ON STH23 EB					Latitude Longitude					
	355 FT N					43.559723376 X Coordinate				1986793	
	OF TURTLE RD										
	IN THE TOWN OF DELLONA IN SAUK COUNTY				270463.21875 4826899						
						Structure Type NO STRUCTURE					
	Crash Scene										
1	First Harmful Event					T:11	ful Event Lo				
		AL (ALEXE)						cation			
	NON DOMESTICATED ANIM	AL (ALIVE)			ON ROADWAY						
		Manner of Collision				Light Condition					
	00 - NO COLLISION W/VEHIO	CLE IN TRANSPO	ORI								
	Road Surface Condition(s)					Roadway	Factor(s)				
ŀ	Environment Factor(s)					1					
	Weather Condition(s)					1					
	Animal Type DEER					Relation To Trafficway TRAFFICWAY - ON ROAD					
	Crash Classification - Location PUBLIC PROPERTY Tribal Land						Crash Classification - Jurisdiction NO SPECIAL JURISDICTION				
ŀ						Access Control				Special Study	
										-,,	
L	Unit Summary					I					
·	Unit Status		I V/oh	icle Operat	tina As C	laccification		I I mit Turns			
				nicle Operating As Classification			UnitType AUTOMOBILE				
	IN TRANSIT D CLASS					Operating As Endorsements					
5	Vehicle Type (SPORT) UTILITY VEHICLE						Operating A	s Endoiser	rients		
	T ==				TotalTrailers TotalHazMatTypes			16-4T			
	Total Occs	rain/Bus#Record	orded Total#Citations lss		is issued		0			otai Haziviat Types	
		Direction Of Travel		Pre CrashTire		Speed Lim		nit Total Lane		es	
LIND	YES NORTHBOUND			Mark Special Function				Emergency Motor Vehicle Use		olo i ino	
5	Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNCTION					ergency Motor Venicle Use IT APPLICABLE		
	Traffic Way			Traffic Control					Traffic Control Inoperative/Missing		
	Surface Time			B10			Dand Out de				
	Surface Type			Road Curvature			Road Grade				

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	Truc	k Bus or HazMat						
		License Plate Number	St	St Country of Issuance				
2	VEHICLE 01	AJM6011 Vehicle Identification Number 2T2BZMCA5HC072089	Make LEXUS	Year 2017	Model RX			
		Color SIL - SILVER (ALUMINUM)	Body Style UT - SPORT UTILITY	Bus Use				
TINO		Initial Contact Point 01 - RtGHT FRONT CORNER Extent Of Damage	Vehicle Damage 01 - RIGHT FRONT C	ORNER, 12 - FF	RONT	7 8 9 10 11 6 12		
		DISABLING DAMAGE Towed Due To Damage	Vehicle Removed By					
		TOWED DUE TO DISABLING DAMAGE What Driver Was Doing	PLATTS WRECKER Vehicle Factors					
		Driver Prior Action Other	_					
 -	井	Driver Actions NO CONTRIBUTING ACTION						
IND	VEHICLE							
		Owner Name	Chines Address					
۶	5							
 ⊑		Policy Holder						
IN IN		Insurance Company WEST-BEND-MUTUAL-INS-CO	Individual NADIA MEYER					
	INDIVIDUAL	Individual Driver	Citations issued Sex					
		NADIA MEYER	Citations Issued 0	FEMALE				
=		(608) 432-9549	Date of Birth	Race WHITE				
TINU		Address 1222 HANOVER TRL WAUNAKEE, W! 53597, US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
	Sai	On Duty Crash ety Equipment	Safety Equipment					
	001	Row Seat Position	SHOULDER & LAP BELT					
		HelmetUse	HeimetCompliance					
		Eye Protection	TintCompliance					
2		Injury Severity Injury 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	By Source						
	Distracted By Action							
	Non Motorist Striking Ur	it# Location						
	Prior Action							
	Action							
UNIT								
5								
_								
	Action Other					To/From School		
	Drug & Alcohol 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 Test Results			
2	Drug Type							
	Individual Condition							
	APPEARED NORMAL							