

6TL0B3P3J3
22-09308

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 SC22-09308		Investigating Officer/Deputy DEPUTY J. GREENWOOD	
Crash Date 09/16/2022		Crash Time 05:20 PM		Date Arrived 09/16/2022		Time Arrived 06:21 PM	
Date Notified 09/16/2022		Time Notified 05:58 PM		Total Units 01		Total Injured 00	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> <p>Private Driveway</p> <p>CTH PF</p> <p>Not to Scale</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.

UNIT 1 WAS TRAVELING SOUTH ON CTH PF. TWO DOGS RAN OUT IN THE ROAD TO GREET ANOTHER VEHICLE TURNING TO THE DRIVEWAY. UNIT 1 HIT BOTH DOGS AND SUSTAINED MINOR DAMAGE AND WAS REMOVED BY THE OPERATOR.

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Location

ON CTHPF SB 0.31 MI N OF HIGH ST IN THE TOWN OF FREEDOM IN SAUK COUNTY	Latitude 43.466035682	Longitude -89.856794715
	X Coordinate 268909.65625	Y Coordinate 4816534.5
	Structure Type NO STRUCTURE	

Crash Scene

First Harmful Event 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) NONE		
Weather Condition(s) CLEAR		
Animal Type	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

UNIT 01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE		
	Vehicle Type (SPORT) UTILITY VEHICLE	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	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With 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 LEVEL		
	Truck Bus or HazMat NO				

Vehicle

UNIT VEHICLE 01	License Plate Number 564SEL	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
	Vehicle Identification Number 1GKKNSLS0HZ300989	Make GENERAL MOTORS COR	Year 2017	Model ACADIA
	Color BLK - BLACK	Body Style UT - SPORT UTILITY VEHICLE	Bus Use	
	Initial Contact Point 01 - RIGHT FRONT CORNER	Vehicle Damage 01 - RIGHT FRONT CORNER		
	Extent Of Damage MINOR DAMAGE			



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UNIT VEHICLE	Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR	
	What Driver Was Doing GOING STRAIGHT		Vehicle Factors	
	Driver Prior Action Other		NOT APPLICABLE	
	Driver Actions NO CONTRIBUTING ACTION			
01 01	Owner Name DAVID K ZIMMERMAN (608) 293-2266		Owner Address 144 HIGH ST NORTH FREEDOM, WI 53951 , US	
	Sequence Of Events			
01 02 03 04	Event DOMESTICATED ANIMAL - ALIVE			
	Event			
	Event			
	Event			
UNIT	Policy Holder			
	Insurance Company ACUITY,-A-MUTUAL-INSURANCE-CO		Individual LYNN ZIMMERMAN	
UNIT INDIVIDUAL	Individual			
	Driver LYNN MARIE ZIMMERMAN (608) 293-2266		Citations Issued 0	Sex FEMALE
	Address 144 HIGH ST NORTH FREEDOM, WI 53951 , US		Date of Birth [REDACTED]	Race WHITE
	Driver License Number [REDACTED]		STATE: WISCONSIN COUNTRY: UNITED STATES	
01 001	Safety Equipment		On Duty Crash	
	Safety Equipment		SHOULDER & LAP BELT	
	Row 01 - FRONT ROW	Seat Position 07 - LEFT	Helmet Compliance	
	Helmet Use		Tint Compliance	
	Eye Protection		Airbag NON DEPLOYED	
	Injury		Injury Severity NO APPARENT INJURY	Trapped/Extricated NOT TRAPPED
Ejected NOT EJECTED		Ejection Path NOT EJECTED/NOT APPLICABLE		EMS Agency Identifier
Medical Transport NOT TRANSPORTED		Hospital		EMS Run #
Date of Death		Time of Death		
Distracted By		Distracted By Source		
Distracted By Action UNKNOWN				

WISCONSIN MOTOR VEHICLE CRASH REPORT

UNIT	Non Motorist		Striking Unit #	Location		
	Prior Action					
	Action					
	Action Other					
	To/From School					
	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					