

6TL0D6N03F  
22-10057

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 22-10057		Investigating Officer/Deputy DEPUTY B. STODDARD	
Crash Date 10/09/2022		Crash Time 06:20 AM		Date Arrived		Time Arrived	
Date Notified 10/09/2022		Time Notified 07:06 AM		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 NON-DOMESTICATED ANIMAL W/ NO INJURY		<input type="checkbox"/> Amended		<input type="checkbox"/> Secondary Crash	

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

**Location**

ON STH23 WB 662 FT N OF HICKORY RD IN THE TOWN OF FRANKLIN IN SAUK COUNTY	Latitude 43.334669823	Longitude -90.062498581
	X Coordinate 251732.796875	Y Coordinate 4802536
	Structure Type	

**Crash Scene**

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	
Road Surface Condition(s)	Roadway Factor(s)	
Environment Factor(s)		
Weather Condition(s)		
Animal Type DEER	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control	Special Study

**Unit Summary**

01 UNIT	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR				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 NORTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit	Total Lanes	
	Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE)		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE	
	Traffic Way		Traffic Control		Traffic Control Inoperative/Missing	
	Surface Type		Road Curvature		Road Grade	

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Truck Bus or HazMat				
<b>Vehicle</b>				
01 UNIT VEHICLE 01	License Plate Number	Plate Type	St	Country of Issuance
	AKJ4520	AUT - AUTOMOBILE	WI	UNITED STATES
	Vehicle Identification Number	Make	Year	Model
	JF1VA2E65L9826005	SUBARU	2020	WRX
	Color	Body Style	Bus Use	
	WHI - WHITE	SD - SEDAN		
	Initial Contact Point	Vehicle Damage		
01 - RIGHT FRONT CORNER	01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT			
Extent Of Damage	DISABLING DAMAGE			
Towed Due To Damage	Vehicle Removed By			
TOWED DUE TO DISABLING DAMAGE	GEORGES AUTO BODY			
What Driver Was Doing	Vehicle Factors			
Driver Prior Action Other				
Driver Actions	NO CONTRIBUTING ACTION			
Owner Name		Owner Address		
<b>Policy Holder</b>				
Insurance Company		Individual		
PROGRESSIVE-ADVANCED-INSURANCE-CO		LONG LEE		
<b>Individual</b>				
01 UNIT INDIVIDUAL	Driver	Citations Issued	Sex	
	LONG LEE (608) 977-0668	0	MALE	
	Address	Date of Birth	Race	
	202 PRAIRIE CLOVER CT SUN PRAIRIE, WI 53590 , US		ASIAN OR NATIVE HAWAIIAN OR OTHER PACIFIC ISLAN	
On Duty Crash		Driver License Number		
		STATE: WISCONSIN COUNTRY: UNITED STATES		
<b>Safety Equipment</b>		Safety Equipment		
Row	Seat Position	SHOULDER & LAP BELT		
Helmet Use	Helmet Compliance			
Eye Protection	Tint Compliance			
01 UNIT INDIVIDUAL	<b>Injury</b>	Injury Severity	Airbag	
		NO APPARENT INJURY		
	Ejected	Ejection Path	Trapped/Extricated	
Medical Transport	EMS Agency Identifier		EMS Run #	
NOT TRANSPORTED				
Hospital	Date of Death		Time of Death	

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<b>UNIT</b> <b>INDIVIDUAL</b>         <b>01</b> <b>001</b>	<b>Distracted By</b>	Distracted By Source	
	Distracted By Action		
	<b>Non Motorist</b>	Striking Unit #	Location
	Prior Action		
	Action		
	Action Other		To/From School
	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use <b>NO</b>	Suspected Drug Use <b>NO</b>
	Alcohol Test Given <b>TEST NOT GIVEN</b>	Alcohol Test Type	Alcohol Test Results
	Drug Test Given <b>TEST NOT GIVEN</b>	Drug Test Type	Drug Test Results
	Drug Type		
Individual Condition <b>APPEARED NORMAL</b>			