6TL0CTJN2W 22-10167

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 10/12/2022

Crash Time 06:19 PM

	Document Number Override Primary Crash Documen			Agency Crash Number 22-010167			Investigating Officer/Deputy DEPUTY A. KULAS				
OCTJN2W	Crash Date Crash Time 06:19 PM			Date Arrived		Time	Time Arrived				
3	Date Notified Time Notified 10/12/2022 06:21 PM			Total Ur	nits		Tota	Injured	Total Killed		
片					<u> </u>					Reporting	
ŏ	On Emergency Hit and Run Lane			losure Work Zone			£	Trailer or Towed		Threshold	
6TL	Government Property	Active School 2	Zone	NO	Bus Relat	eα	Tags	•			
	∨ Reportable	Crash Type NON-DOMESTICAT	TED ANIM	AL W/ N	O INJUR	Υ		Amended		Secondary Crash	
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.										
	Location ———										
- {	ON STH136 WB					Latitude Longitude					
	0.51 MI N					43.50335	2773	-89.949			
	OF MILE RD										
	IN THE TOWN OF EXCELSIOR				X Coordinate Y Coordinate 261569.96875 4820940						
	IN SAUK COUNTY				Structure Type						
L						NO STR	JCTORE				
(Crash Scene										
Ī	First Harmful Event					First Harmful Event Location					
	NON DOMESTICATED ANIM	IAL (ALIVE)				ON ROADWAY					
-	Manner of Collision										
	00 - NO COLLISION W/VEHI	CLE IN TRANSPORT				Light Condition					
ŀ	Road Surface Condition(s)					Roadway	Factor(s)				
	, read out the out the same the					(Nodumay) action(s)					
	Environment Factor(s)					-					
	Environment Factor(s)										
						•					
	Weather Condition(s)										
	AnimalType					Relation To Trafficway TRAFFICWAY - ON ROAD					
	DEER					Crash Classification - Jurisdiction					
	Crash Classification - Location PUBLIC PROPERTY				NO SPECIAL JURISDICTION						
	Tribal Land					Access Control				Special Study	
Į											
	Unit Summary 💳										
	Unit Status Vehicle			ehicle Operating As Classification			UnitType				
	IN TRANSIT			D CLASS					AUTOMOBILE		
_	Vehicle Type					Operating As Endorsements					
01	(SPORT) UTILITY VEHICLE										
ŀ	Total Occs	Tota	Total#Citations Issued		I Total Trail		 lers		Mat Tynes		
	2	Train/Bus#Recorded	0			0		0		wat rypos	
Ī	Insurance?	Direction Of Travel		Pre CrashTire		Speed Lim		nit	TotalLane	es	
LIND	YES NORTHBOUND Most Harmful Event: Collision With			Mark Special Function				Emergency Motor Vehicle Use			
-	NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNCTION					PLICABLE		
	Traffic Way			Traffic Control			Traffic Control		trol Inopera	ol Inoperative/Missing	
	Surface Type			Road Curvature				Road Grade			

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I	True	ck Bus or HazMat								
	1111	S. 505 OF FIGERRAL								
		Vehicle								
UNIT 01		License Plate Number		Plate Type	St	Country of Issuance	•			
		645PLC		100-1	WI	UNITED STATES	3			
	5	Vehicle Identification Number 2FMDK4GC9DBC91715		Make FORD	Year 2013	Model EDGE				
		Color		Body Style	12010	Bustise				
		WHI - WHITE		UT - SPORT UTILITY VEHICLE						
	VEHICLE	Initial Contact Point		Vehicle Damage	7 8 9 10 11					
		12 - FRONT Extent Of Damage		01 - RIGHT FRONT	CORNER, 02 - R					
	Ü	DISABLING DAMAGE		FRONT, 12 - FRON	T		5 4 3 2 1			
		Towed Due To Damage		Vehicle Removed By						
		TOWED DUE TO DISABL	ING DAMAGE	BILLS TOWING						
		What Driver Was Doing		Vehicle Factors						
		Driver Prior Action Other								
		Driver Actions								
┖	VEHICLE	NO CONTRIBUTING ACTION								
NS.	<u>Q</u>									
-	Ų									
		Owner Name Owner Address								
2	5									
l_		Policy Holder								
¥		Insurance Company		Individual						
_		AMERICAN-FAMILY-INS-		VICKI WELLS						
		Individual		Total	T =					
		Driver VICKI LYNN WELLS		Citations Issued 0						
	4	(608) 356-6130		Date of Birth						
╘	DIMIDITA				WHITE					
ş	8	Address 531 POTTER ST BARABOO, WI 53913 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES						
	Z									
	٠.,	On Duty Crash fety Equipment		Safety Equipment						
	90		Ta	SHOULDER & LAP BELT						
		Row	Seat Position	SHOULDER & LA	AF BELI					
		Helmet Use		Helmet Compliance	elmet Compliance					
		Injury Severity Injury NO APPARENT INJURY Ejected Ejection Path		Tint Compliance						
				Airbag						
01	8			, which was						
				Trapped/Extricated						
				leve:	po.					
		Medical Transport NOT TRANSPORTED		EMS Agency Identif	ter	EMS Run#				
		Hospital		Date of Death		Time of Death				

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		Distracted By Source	•				
		Distracted By Action					
		Non Motorist Striking Unit#	Location				
		Prior Action					
		Action					
	AL						
UNIT	INDIVIDUAL						
	2						
		Action Other					To/From School
	I	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		
01	100	Drug Type					
	_						
		Individual Condition					
		APPEARED NORMAL					
l							

Form DT4000