6TL0CTJN33 22-10931

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 11/01/2022

Crash Time 11:25 PM

	Document Number Override	Primary Crash Docun	Primary Crash Document#		Agency Crash Number 22-10931			Investigating Officer/Deputy DEPUTY A. KULAS			
33	Crash Date Crash Time 11/01/2022 11:25 PM			Date Arrived		Time	Time Arrived				
TJN33	Date Notified 11/01/2022	Time Notified 11:28 PM			Total Units 01		Total			Total Killed 00	
LOC	On Emergency	it and Run	and Run Lane Clos		sure Work Zone			Trailer or Towed		Reporting Threshold	
1 <u>1</u> 9	Government Property Active School Zone			School Bus Related 1			Tags	ags			
	▼ Reportable	Crash Type NON-DOMESTICA	TED ANIM	AL W/ N	O INJUR	Y		Amended		Secondary Crash	
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.										
Ì	Location										
j	ON STH33 EB					1 -424 1 -			1	d _	
	ON STH33 EB 0.59 MI W					Latitude		Longitude			
						43.52566	9524		-89.849041631		
	OF MIRROR LAKE RD					X Coordinate			Y Coord	Y Coordinate	
	IN THE TOWN OF EXCELSION	OR				269763.7	1875	48231		36	
	IN SAUK COUNTY										
					Structure NO STR						
	Crash Scene										
,											
	First Harmful Event					First Harm	ıful Event Lo	cation			
	NON DOMESTICATED ANIM	IAL (ALIVE)				ON ROA	DWAY				
ŀ	Manner of Collision					Light Condition					
		CI E IN TRANSPORT	-			Light Cont	210011				
	00 - NO COLLISION W/VEHI	CLE IN TRANSPORT	i								
	Road Surface Condition(s)					Roadway	Factor(s)				
ŀ	Environment Factor(s)					-					
	Environment Factor(s)										
	Weather Condition(s)										
	Animal Type					Relation To Trafficway					
	DEER					TRAFFICWAY - ON ROAD					
	Crash Classification - Location										
						Crash Classification - Jurisdiction					
	PUBLIC PROPERTY				NO SPEC	CIAL JURI	SDICTION				
	Tribal Land				Access Control				Special Study		
L	Linit Communication										
	Unit Summary 🗨										
	Unit Status		Vel	Vehicle Operating As Classification				UnitType			
				CLASS				AUTOMOBILE			
ŀ	Vehicle Type					Operating As Endorsements			monte		
01	PASSENGER CAR					Operating As Endotsements					
	T = =										
	Total Occs Train/Bus # Recorded 1 Insurance? Direction Of Travel		Tot	Total# Citations Issued 0 Pre CrashTire		0 hTire Speed Lim		0		MatTypes	
			0								
-			-							25	
_	YES	Fie Clas			03						
LIND				Mark Mark							
\leq				ecial Func		=:01:		Emergency Motor Vehicle Use			
-	NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNCTION			TION		NOT APPLICABLE		
	Traffic Way	•	Tra	ffic Contro	1			Traffic Control Inoperative/Missing			
	receive truy			OUINIU	••	ļ		Traine Consideratioperative rivinosity			
	Surface Type			Road Curvature				Road Grade			

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	Truck Bus or HazMat									
	1100	N BOS OF FIGURE								
01	5	Vehicle License Plate Number AMJ7735 Vehicle Identification Number KNADM4A33H6062701		Plate Type AUT - AUTOMOBILE Make KIA MOTORS CORPO	St WI Year	Country of Issuance UNITED STATES Model RIO				
	VEHICLE	Color		Body Style	KAI 2017	Bus Use				
		WHI - WHITE		4D - 4DR	4D - 4DR					
IN N		Initial Contact Point 11 - LEFT FRONT CORNER Extent Of Damage FUNCTIONAL DAMAGE		Vehicle Damage						
		Towed Due To Damage NOT TOWED		Vehicle Removed By						
		What Driver Was Doing		Vehicle Factors	Vehicle Factors					
		Driver Prior Action Other		-						
UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTION								
٥	5	Owner Varie		Owner Address						
l ⊨ i		Policy Holder								
N L		Insurance Company PROGRESSIVE-CLASSIC	-INS-CO	Individual CARLTON HUGHAN						
		ndividual								
		Driver CARLTON MICHAEL HUGHAN JR (608) 566-4829		Citations Issued	Sex					
	4			0 Date of Birth	MALE Race					
 -	3		Date of Bilth	Race	see					
TNU	NDWDUA	Address \$5352 SLEEPY HOLLOW RD BARABOO, WI 53913, US		Drivert icense Number STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sai	On Duty Crash Safety Equipment		Safety Equipment						
		Row Seat Position		SHOULDER & LAP BELT						
		HeimetUse		Heimet Compliance						
	100	Eye Protection		TintCompliance						
5		Injury Severity Injury NO APPARENT INJURY		Airbag	Airbag					
		Ejected	l		Trapped/Extricated	apped/Extricated				
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run#	EMS Run#			
		Hospital		Date of Death		Time of Death	Time of Death			

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		Distracted By Source						
		Distracted By Action						
	1	Non Motorist Striking Un	nit# Location					
		Prior Action						
UNIT	INDIVIDUAL	Action Action Other					To/From School	
	I	Drug & Alcohol NO	Suspected Drug Use NO		1			
		Alcohol Test Given TEST NOT GIVEN	e	Alcohol Test Results				
		Drug Test Given TEST NOT GIVEN	Drug Test Type	Drug Test Results		;		
2	001	Drug Type			•			
		Individual Condition APPEARED NORMAL						
- 1								