6TL0CVRP4L 22-10967

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 11/02/2022

Crash Time 06:52 PM

	Document Number Override Primary Crash Document#			Agency Crash Number 22-10967		- I	Investigating Officer/Deputy SERGEANT B. LUBER			
4	Crash Date Crash Time 11/02/2022 06:52 PM		Date Arrived		Time	Time Arrived				
6TL0CVRP4L	Date Notified 11/02/2022	Time Notified 06:55 PM	Total Ur 01	Total Units 01		Total	Total Injured Total Killed 00		1	
၁	On Emergency	it and Run Lane (Lane Closure W		L		Trailer or T	owed	Reporting Threshold	
6TL	Government Property	Active School Zone	NO NO	Bus Relat	ed	Tags				
	Reportable	Crash Type NON-DOMESTICATED A	NIMAL W/ N	O INJUR	ťΥ		Amended		Secondary Crash	
	I, a sworn law enforcem	ent officer, agree that I ha	ave not added any CJIS data in this report.							
	Location ——									
i	ON USH12 EB				Latitude			Longitud		
	1.18 MI S				43.403383899		-89.77230			
	OF USH12 EB					43.403363699			linate	
	IN THE TOWN OF SUMPTER	2			X Coordinate 275512.5		Y Coord			
	IN SAUK COUNTY	•						480934	.5	
	IN SASK COSKII				Structure	Tyne				
					Structure Type					
l.										
(Crash Scene									
	First Harmful Event				FirstHarm	ful Event Lo	cation			
	NON DOMESTICATED ANIM	IAL (ALIVE)			ON ROA	DWAY				
	Manner of Collision				Light Cond	dition				
	00 - NO COLLISION W/VEHI	CLE IN TRANSPORT			Light Contains					
ŀ	Road Surface Condition(s)				Roadway	Factor(s)				
	road corrace corramon(s)				Roadway Factor(s)					
	Environment Factor(s)				1					
	, ,	and detailed								
				-						
	Weather Condition(s)									
	A 1 17									
	Animal Type				Relation To Trafficway					
	DEER			TRAFFICWAY - ON ROAD						
	Crash Classification - Location			Crash Classification - Jurisdic						
	PUBLIC PROPERTY			NO SPECIAL JURIS Access Control		SDICTION				
	Tribal Land							Special Study		
Į.	Unit Summary 💳									
	Unit Status		Vehicle Oper	Operating As Classification			UnitType			
				D CLASS		AUTÓMO		BILE		
ŀ	Vehicle Type						Operating As Endorsements		monte	
7	(SPORT) UTILITY VEHICLE						Operating	15 LIIU01561	i le i io	
_	, , , , , , , , , , , , , , , , , , , ,					TotalTrailers TotalHazMatTypes				
	Total Occs	Train/Bus#Recorded	Total # Citations Issued 0		Total Trail		ailers Total Hazi 0		MatTypes	
		Direction Of Travel				<u> </u>				
_	Insurance? YES	SOUTHBOUND	1 1	, opeed Lin		ne rotarianes		:5		
LIND							Emergency Motor Vehicle Use		icle I lee	
5	Most Harmful Event: Collision Wit NON DOMESTICATED ANIM	NO SPECIAL FUNCTION		TION		NOT APPLICABLE				
	Traffic Way	Traffic Control				Traffic Control Inoperative/Missing				
	•	, rune Congo					Sormormoporday commoning			
	Surface Type	Road Curvature					Road Grade			
					1					

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	Truc	ruck Bus or HazMat							
		License Plate Number SN2799		Plate Type LTK - LIGHT TRUCK	St WI	Country of issuance UNITED STATES			
2	VEHICLE 01	Vehicle Identification Number 1C4SDJCT3JC226767		Make DODGE	Year 2018	Model DURANGO			
		Color RED - RED		Body Style UT - SPORT UTILITY	VEHICLE	Bus Use			
UNIT		Initial Contact Point 12 - FRONT Extent Of Damage DISABLING DAMAGE		Vehicle Damage 01 - RIGHT FRONT C	ORNER, 12 - FF	RONT	7 8 9 10 11 6 12 5 4 3 2 1		
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By CRAIGS TOWING					
		What Driver Was Doing		Vehicle Factors					
		Driver Prior Action Other							
UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTION							
٦	7 6	Chaner Name		Chiner Address					
IND		Policy Holder Insurance Company							
		PROGRESSIVE-CASUAL	TY-INS-CO	Individual MCKENZY STIEVE					
	DMDUAL	Driver MCKENZY KATERINE ELSIE STIEVE (608) 477-5910		Citations Issued	d Sex				
				0 Date of Birth	FEMALE Race	LE			
5					WHITE				
TNO		Address E10762 DELTON RD BARABOO, WI 53913 , US		Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES					
	Sai	On Duty Crash Safety Equipment		Safety Equipment					
	001	Row Seat Position		SHOULDER & LAP BELT					
		Helmet Use		Helmet Compliance					
		Eye Protection		TintCompliance					
2		Injury Severity Injury NO APPARENT INJURY		Airbag					
		Ejection Path		1		Trapped/Extricated	Trapped/Extricated		
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run#			
		Hospital		Date of Death		Time of Death			

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	Distracted By Source								
		Distracted By							
		Distracted By Action							
		Striking Unit#	Location						
		Non Motorist							
		Prior Action							
		Action							
<u></u>	INDIVIDUAL								
UNIT	Ħ								
_	2								
	_								
		Action Other					To/From School		
	I	Drug & Alcohol Suspected Alc	Suspected Drug Use NO						
		Alcohol Test Given	Alcohol Test Type			Alcohol Test Results			
		TEST NOT GIVEN	Drug Test Type	Drug Test Results					
		Drug Test Given TEST NOT GIVEN Drug Test Type			Diag restriesuis				
01	001	Drug Type	<u>'</u>		•				
	0								
		Individual Condition							
		APPEARED NORMAL							