### 6TL0D7W15Q

22-11200

## WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 11/08/2022

Crash Time 06:17 PM

	Document Number Override	Primary Crash Document#	Primary Crash Document# Agency Crash Nu 22-11200				stigating Officer/Deputy UTY K. MUELLER			
5Q	Crash Date         Crash Time           11/08/2022         06:17 PM		Date Ar	Date Arrived		Time	Time Arrived			
6TL0D7W1	Date Notified Time Notified 11/08/2022 06:17 PM		Total Ui 01	Total Units 01		Tota 00	Total Injured Total Killed			
00	On Emergency	it and Run Lane (	Closure		rk Zone	3	Trailer or T	owed	Reporting  Threshold	
6TL	Government Property	Active School Zone	NO NO	Bus Relat	ed	Tags				
	✓ Reportable Crash Type NON-DOMESTICATED ANIMAL W/ NO IN			O INJUR	₹Y/		Amended		Secondary  Crash	
i, a sworn law enforcement officer, agree that I have not added any CJIS data i						data in this report.				
	Location <b>———</b>									
- 1	ON LINN ST/ STH136 EB				Latitude			Longitud	Δ	
	0.39 MI E				43.48068	20156	-89.795			
	OF RAVEN ACRES DR									
	IN THE TOWN OF BARABOO	n			X Coordin			Y Coord		
	IN SAUK COUNTY	•			273935.4	10625		481799	2	
	IN SASK COOK!!				Structure	Tyne		-		
						, ,,,,				
l										
(	Crash Scene									
Ī	First Harmful Event				FirstHarm	ful Event Lo	cation			
	NON DOMESTICATED ANIM	IAL (ALIVE)			ON ROA	DWAY				
-	Manner of Collision									
		CI E IN TRANSPORT			Light Condition					
	00 - NO COLLISION W/VEHI	CLE IN TRANSPORT								
	Road Surface Condition(s)				Roadway	Factor(s)				
	Environment Factor(s)									
	Weather Condition(s)					_				
	AnimalTuna				Deletion To Trefficular					
	Animal Type  DEER				Relation To Trafficway TRAFFICWAY - ON ROAD					
	Crash Classification - Location			Crash Classification - Jurisdiction						
	PUBLIC PROPERTY			NO SPECIAL JURIS Access Control		SDICTION				
ĺ	Tribal Land							Special Study		
ĺ	Unit Summary									
	Unit Status		Vehicle Oper	ating As C	lassification		UnitType			
				D CLASS			AUTOMOBIL		H E	
				CEASS						
0	Vehicle Type				Operating As Endorsements			nents		
0	(SPORT) UTILITY VEHICLE									
			Total#Citations Issued  0		Total Traile		ailers Total Hazi		Vat Types	
l	Insurance?	Direction Of Travel Pre CrashTi		rashTire	e Speed Lim		nit Total Lanes		es	
<u>.</u>	YES	WESTBOUND	Fie Clasifilit			<b>'</b>				
LIND	Most Harmful Event: Collision With Special Function						Emergency Motor Vehicle Use			
<b>)</b>	NON DOMESTICATED ANIM	NO SPECIAL FUNCT		TION		NOT APPLICABLE				
		Traffic Cont				Traffic Com				
	Traffic Way	Traffic Control					Traffic Control Inoperative/Missing			
	Confere Tona					Dec 10 ce 1				
	Surface Type	Road Curvature					Road Grade			
		i				1				

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	Truc	Truck Bus or HazMat							
		<b>Vehicle</b> License Plate Number	Plate Type	l St	Country of Issuance				
	VEHICLE 01	AJH2042	AUT - AUTOMOBILE	wı	UNITED STATES				
2		Vehicle Identification Number 1FMCU9GDXJUA63286	Make FORD	Year 2018	Model ESCAPE				
		Color GLD - GOLD	Body Style UT - SPORT UTILITY						
INN		Initial Contact Point  11 - LEFT FRONT CORNER  Extent Of Damage  MINOR DAMAGE	Vehicle Damage						
		Towed Due To Damage NOT TOWED	Vehicle Removed By  OPERATOR						
		What Driver Was Doing	Vehicle Factors						
		Driver Prior Action Other							
UNIT	VEHIOLE	Driver Actions NO CONTRIBUTING ACTION							
-	01 VE	Oviner Value	Owner Address						
_		Policy Holder	1						
IN N		Insurance Company WISCONSIN-MUTUAL-INS-CO	Individual HEATHER KLAETS						
	INDIVIDUAL	Individual							
		Driver HEATHER ANN KLAETSCH	Citations issued  0	Sex FEMALE					
  -		(734) 621-3963	Date of Birth	Race WHITE					
TNO		Address 419 N MAPLE ST # 9 NORTH FREEDOM, Wt 53951 , US	Drivert icense Number STATE: WISCONSIN COUNTRY: UNITED STATES						
	On Duty Crash Safety Equipment		Safety Equipment						
		Row Seat Position	SHOULDER & LAP BELT						
	001	Helmet Use	HelmetCompliance						
		Eye Protection	TintCompliance						
2		Injury Severity NO APPARENT INJURY	Airbag						
		Ejected Ejection Path	Trapped/Extricated						
		Medical Transport NOT TRANSPORTED	EMS Agency Identifier		EMS Run#				
		Hospital	Date of Death		Time of Death				

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						, ,
	Distracted By Distracted	l By Source				
	Distracted By Action					
	Non Motorist Striking U	nit# Location				
	Prior Action	·				
UNIT	Action					
	Action Other					To/From School
	Drug & Alcohol NO	Suspected Drug Use	1			
	Alcohol Test Given TEST NOT GIVEN	Alcohol Test Type	•		Alcohol Test Results	
	Drug Test Given TEST NOT GIVEN Drug Test Ty		Drug Test Result		S	
M M	Drug Type	<u>.</u>				
	Individual Condition  APPEARED NORMAL					