# 6TL0CTJN35 22-11244

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Crash Date 11/09/2022

Crash Time 08:57 PM

	Document Number Override Primary Crash Document#			Agency Crash Number 22-11244			Investigating Officer/Deputy DEPUTY A. KULAS			
35	Crash Date Crash Time 11/09/2022 08:57 PM		Date Arrived		Time	Time Arrived				
TJN3	Date Notified         Time Notified           11/09/2022         08:59 PM		Total Units 01		Total		Injured	Injured Total Killed 00		
ဗ	On Emergency Hit and Run Lane		Closure	losure Work Zone		-	☐ Trailer or Towed		Reporting  Threshold	
6TL	Government Property	NO NO	1			ags 				
	Reportable	ANIMAL W/ NO INJURY		Y	Amended			Secondary  Crash		
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.									
	Location <b>———</b>									
- 1	ON STH23 WB				Latitude			Longitud	Φ	
	1200 FT S				43.572554529		-89.823		213518	
	OF PICKEREL SLOUGH RD									
	IN THE TOWN OF DELTON			XC		X Coordinate		Y Coordinate		
	IN SAUK COUNTY				272027.9	6875		482827	2	
	IN SAUR COUNT I				Ctm.ot.ro	Structure Type				
					NO STR					
(	Crash Scene									
1	First Harmful Event				Circt Uarna	fulEventLo	aatian			
							cation			
	NON DOMESTICATED ANIM	IAL (ALIVE)			ON ROA	DWAY				
	Manner of Collision				Light Condition					
	00 - NO COLLISION W/VEHIC	CLE IN TRANSPORT								
ŀ	Road Surface Condition(s)				Roadway	Factor(s)				
	road corrace contamon(s)				Stodaway	s deter(s)				
					ļ					
	Environment Factor(s)									
	Weather Condition(s)			1						
	Animal Type					Relation To Trafficway				
	DEER				TRAFFICWAY - ON ROAD					
ŀ	Crash Classification - Location			Crash Classification - Jurisdiction						
	PUBLIC PROPERTY			1						
					Access Control		SDICTION			
	Tribal Land								Special Study	
	Unit Summary									
	Unit Status		Vehicle Oper	ating As C	laccification		UnitType			
				Vehicle Operating As Classification			1 **			
	IN TRANSIT	D CLASS				AUTOMOBILE				
_	Vehicle Type					Operating As Endorsements				
01	PASSENGER CAR									
	TotalOccs	Total#Citatio	ns Issued	I Total Trai		ilers Total HazM		MatTvpes		
	Total Occs Train/Bus#Recorded		0		0 Speed Lir		0		<b></b>	
		1 16 Ciusi							95	
	YES WESTBOUND Mai						<u></u>			
LIND	Most Harmful Event: Collision Wit	Special Function				Emergency Motor Vehicle Use				
<b>ر</b> ر	NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNCTION		TION		NOT APPLICABLE		
	Traffic Way	Traffic Control				Traffic Control Inoperative/Missing				
	-	, and Johnson								
	Surface Type	Road Curvature					Road Grade			
	Surrace type	1 NOBU OBI VERBIE			, toda Grado					

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	Truc	ck Bus or HazMat								
		Vehicle								
		License Plate Number		Plate Type	St	Country of Issuance	9			
		AGG3211		AUT - AUTOMOBILE	WI	UNITED STATES	S			
2	5	Vehicle Identification Number KL8CB6SA9LC411473		Make CHEVROLET	Year 2020	Model SPARK				
		Color		Body Style	12323	Bus Use				
		BLU - BLUE		4H - HATCHBACK 4 D	OOR					
ᆫ	VEHICLE	Initial Contact Point 11 - LEFT FRONT CORNI		Vehicle Damage			7 8 9 10 11			
UNIT		Extent Of Damage	<u>-</u> R	11 - LEFT FRONT CO		6 12				
	Щ	DISABLING DAMAGE					5 4 8 2 1			
		Towed Due To Damage		Vehicle Removed By						
		TOWED DUE TO DISABLE What Driver Was Doing	ING DAWAGE	PLATTS WRECKER						
		What Driver Was Dunig		Versicle Factors	Vehicle Factors					
		Driver Prior Action Other								
	ш	Driver Actions NO CONTRIBUTING ACTION								
l⊨	VEHICLE									
	3									
		Owner Name: Owner Address								
_	5									
2	•									
		<u> </u>		1						
\ N		Policy Holder Insurance Company Individual								
5		AMERICAN-FAMILY-INS-CO		JACK ASBEL						
	,	Individual		i						
		Driver JACK FOSTER ASBEL		Citations Issued	Sex					
		(608) 574-1854		0 MALE Date of Birth Race						
<u>_</u>	DIVIDUA			Date of Billi	WHITE					
ş	Ξ	Address		Drivert icense Number						
-	Z	MAUSTON, WI 53948 , US  On Duty Crash		STATE: WISCONSIN COUNTRY: UNITED STATES  Safety Equipment						
	Sa	fety Equipment								
		Row	Seat Position	SHOULDER & LAP	BELT					
		Helmet Use		Heimet Compliance						
		The analysis of the state of th								
		Eye Protection Injury Severity NO APPARENT INJURY Ejected Ejection Path		Tint Compliance						
_	_			Airbag						
2	喜			, weag						
					Trapped/Extricated	d				
		Medical Transport		ENTRA A COLONIA DE LA COLONIA		East Dun#				
		NOT TRANSPORTED		EMS Agency Identifier		EMS Run#				
		Hospital		Date of Death		Time of Death	Time of Death			

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		Distracted By Source							
		Distracted By Action							
	l	Non Motorist Striking	Unit#	Location					
		Prior Action							
UNI	INDIVIDUAL	Action  Action Other						To/From School	
		Drug & Alcohol NO			Suspected Drug Use				
		Alcohol Test Given Alcohol Test Ty TEST NOT GIVEN			pe Alcohol Test Result				
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results		В	
2	<b>B</b>	Drug Type							
		Individual Condition  APPEARED NORMAL							
3									