# 6TL09XQZ4S

22-11254

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override Primary Crash Document #			Agency Crash Number 22-11254					Investigating Officer/Deputy DEPUTY M. KYLE				
4S	Crash Date 11/10/2022	Crash Time 06:56 AM	-		Date Arrived			Т	Time Arrived				
09XQZ4S	Date Notified 11/10/2022	Time Notified 06:58 AM			Total Units <b>01</b>			Total <b>00</b>		Injured Total Killed 00			
60-	On Emergency	Hit and Run	Lane Closu	ure		Wor	/ork Zone		Trailer or	Trailer or Towed		Reporting Threshold	
6TL	Government Property	hool Zone	School Bus Related NO			Т	Tags						
	<ul> <li>Reportable</li> </ul>		ANIMAL W/ NO INJURY			Y		Amendeo	l		Secondary Crash		
	✓ I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.												
	Location												
ł	ON CTHN WB						Latitude Longitude						
	0.32 MI E						43.32903	1219		-90.164889 <sup>,</sup>		14	
	OF MC CARVILLE RD						X Coordina	ate		Y Cod	ordinate		
	IN THE TOWN OF BEAF	RCREEK					243408.0625 4802219.5						
	IN SAUK COUNTY						Structure 7	Гуре					
							NO STRI	21	E				
	Crash Scene												
1	First Harmful Event					1							
							First Harmful Event Location						
		ANIMAL (ALIVE)					ON ROADWAY						
							Light Condition						
	Road Surface Condition(s)		FORT				Roadway Factor(s)						
	Road Surface Condition(3)	Surface Condition(S)						acion(3	1				
	Environment Factor(s)												
	Weather Condition(a)												
	Weather Condition(s)												
	Animal Type						Relation To Trafficway						
	DEER					TRAFFICWAY - ON ROAD							
	Crash Classification - Location						Crash Classification - Jurisdiction						
	PUBLIC PROPERTY					NO SPECIAL JURISDICTION			N				
	Tribal Land	R CREEK					Access Co	ontrol				cial Study	
I	Unit Summary												
	Unit Status Vehicle Operating As C					As Cl	- 51						
	IN TRANSIT D				D CLASS					AUTOMOBILE			
~	Vehicle Type								Operatin	g As Endor	sements		
9	(SPORT) UTILITY VEHICLE												
				otal # Citations Issued					railers			ypes	
	1			0			0				0		
	Insurance?			Pre C		Tire		Speed	Limit	Total L	anes		
UNIT				Special Function					Emerger	Emergency Motor Vehicle Use			
5	Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE)			Special Function			TION			NOT APPLICABLE			
	Traffic Way								Traffic Control Inoperative/Missing				
	manic way	irat	Traffic Control					Tallic C	Tranc Control moperative/missing				
	Surface Type			Pood Curvaturo				Road Grade					
				Road Curvature					i todu Ol	Node Orace			

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	Truc	k Bus or HazMat									
		Vehicle									
		License Plate Number 119XFS		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES					
6	0	Vehicle Identification Number		Make FORD	Year <b>2015</b>	Model					
	U	<b>2FMTK4J99FBB73594</b> Color		Body Style	2015	EDGE Bus Use					
		WHI - WHITE		4D - 4DR		Dus osc					
	щ	Initial Contact Point		Vehicle Damage							
L ⊨	VEHICLE	10 - LEFT SIDE FRONT		- 08 - LEFT SIDE REAR, 09 - LEFT SIDE MIDDLE, 10 - 6 6 6 6 1 1							
UNIT		Extent Of Damage		LEFT SIDE FRONT							
		FUNCTIONAL DAMAGE Towed Due To Damage		Vehicle Removed By							
		NOT TOWED		OWNER							
		What Driver Was Doing		Vehicle Factors							
		Driver Prior Action Other		-							
	ш	Driver Actions NO CONTRIBUTING ACTION	4								
E	VEHICLE										
UNIT	Ť										
	2										
		Owner Name	Owner Address	Owner Address							
6	0										
	Ŭ										
F	Policy Holder										
UNIT		Insurance Company ERIE-INS-CO		Individual JENNA WIPPERFU	ртц						
		Individual		JENNA WIFFENIO							
		Driver		Citations Issued	Sex						
		JENNA WIPPERFURTH (608) 588-5557		0	FEMALE						
	NDIVIDUAL			Date of Birth	Race WHITE						
UNIT	Ξ	Address		Driver License Number							
	ND	E7303 STRAIT RD SPRING GREEN, WI 53588 ,US		STATE: WISCONSIN COUNTRY: UNITED STATES							
	-										
	Sa	On Duty Cr.	ash	Safety Equipment	Safety Equipment						
	ou	Row	SHOULDER & LAP BELT								
			Seat Position								
	-	Helmet Use		Helmet Compliance							
		Eye Protection		Tint Compliance							
		Injury Severity		Airbag							
6	001	Injury NO APPA									
		Ejected Ejection Path				Trapped/Extricated					
		Medical Transport		EMS Agency Identifier		EMS Run #					
		NOT TRANSPORTED			T (D )						
		Hospital	Date of Death		I ime of Death	Time of Death					
1		L				1					

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		Distracted By	Distracted By Source	istracted By Source							
		Distracted By Action									
		Non Motorist	Striking Unit #	Location							
		Prior Action									
		Action									
	INDIVIDUAL										
╘│	DU										
	Σ										
	P										
	=										
		Action Other						To/From School			
		Suspected Alcohol Use			Suspected Drug Use						
	L	Drug & Alcohol No			NO						
		Alcohol Test Given Alcohol Test Ty				Alcohol Test Results					
		TEST NOT GIVEN									
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results					
2	001	Drug Type									
	•										
		Individual Condition									
		APPEARED NORM									