

6TL0CR2KS2  
22-11431

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

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

6TL0CR2KS2

Document Number Override		Primary Crash Document#		Agency Crash Number 22-11431		Investigating Officer/Deputy DEPUTY Z. DRILL	
Crash Date 11/14/2022		Crash Time 11:03 PM		Date Arrived		Time Arrived	
Date Notified 11/14/2022		Time Notified 11:05 PM		Total Units 01		Total Injured 00	Total Killed 00
<input type="checkbox"/> On Emergency	<input type="checkbox"/> Hit and Run	<input type="checkbox"/> Lane Closure		<input type="checkbox"/> Work Zone		<input type="checkbox"/> Trailer or Towed	<input type="checkbox"/> Reporting Threshold
<input type="checkbox"/> Government Property		<input type="checkbox"/> Active School Zone		School Bus Related NO		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type NON-DOMESTICATED ANIMAL W/ NO INJURY				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

Location

ON USH12 EB 1019 FT S OF USH12 EB IN THE TOWN OF PRAIRIE DU SAC IN SAUK COUNTY	Latitude 43.311964599		Longitude -89.759265485	
	X Coordinate 276232.75		Y Coordinate 4799156.5	
	Structure Type NO STRUCTURE			

Crash Scene

First Harmful Event NON DOMESTICATED ANIMAL (ALIVE)		First Harmful Event Location ON ROADWAY	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT		Light Condition	
Road Surface Condition(s)		Roadway Factor(s)	
Environment Factor(s)			
Weather Condition(s)			
Animal Type DEER		Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY		Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land		Access Control	Special Study

Unit Summary

01 UNIT	Unit Status IN TRANSIT		Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR				Operating As Endorsements	
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel SOUTHBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit	Total Lanes	
	Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE)			Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE
	Traffic Way			Traffic Control		Traffic Control Inoperative/Missing
	Surface Type			Road Curvature		Road Grade

6TL0CR2KS2

22-11431

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

Truck Bus or HazMat			
01 UNIT VEHICLE	<b>Vehicle</b>		
	License Plate Number <b>723LXZ</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>
	Country of Issuance <b>UNITED STATES</b>	Year <b>2013</b>	Model <b>GRAND CARA</b>
	Vehicle Identification Number <b>2C4RDGCGXDR788455</b>	Make <b>DODGE</b>	Bus Use
	Color <b>SIL - SILVER (ALUMINUM)</b>	Body Style <b>VN - VAN</b>	
	Initial Contact Point <b>11 - LEFT FRONT CORNER</b>	Vehicle Damage <b>11 - LEFT FRONT CORNER, 12 - FRONT</b>	
	Extent Of Damage <b>DISABLING DAMAGE</b>		
	Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By	
	What Driver Was Doing	Vehicle Factors	
	Driver Prior Action Other		
01 UNIT VEHICLE	Driver Actions <b>NO CONTRIBUTING ACTION</b>		
	Owner Name	Owner Address	
01 UNIT POLICY HOLDER	<b>Policy Holder</b>		
	Insurance Company <b>AMERICAN-FAMILY-INS-CO</b>	Individual <b>NORMAN KEENE</b>	
01 UNIT INDIVIDUAL	<b>Individual</b>		
	Driver <b>NORMAN HOWARD KEENE</b>	Citations Issued <b>0</b>	Sex <b>MALE</b>
		Date of Birth [REDACTED]	Race <b>WHITE</b>
	Address <b>210 OMALLEY ST APT 102 WAUNAKEE, WI 53597 , US</b>	Driver License Number [REDACTED] <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>	
01 UNIT SAFETY EQUIPMENT	On Duty Crash		Safety Equipment
	Row	Seat Position	<b>SHOULDER &amp; LAP BELT</b>
	Helmet Use		Helmet Compliance
	Eye Protection		Tint Compliance
01 UNIT INJURY	<b>Injury</b> <b>NO APPARENT INJURY</b>		Airbag
	Ejected	Ejection Path	Trapped/Extricated
	Medical Transport <b>NOT TRANSPORTED</b>	EMS Agency Identifier	EMS Run#
	Hospital	Date of Death	Time of Death

WISCONSIN MOTOR VEHICLE  
CRASH REPORT

<b>UNIT</b> <b>INDIVIDUAL</b>      <b>01</b> <b>001</b>	<b>Distracted By</b> Distracted By Source	
	Distracted By Action	
	<b>Non Motorist</b>	Striking Unit # Location
	Prior Action	
	Action	
	Action Other To/From School	
	<b>Drug &amp; Alcohol</b>	Suspected Alcohol Use Suspected Drug Use <b>NO NO</b>
	Alcohol Test Given	Alcohol Test Type Alcohol Test Results <b>TEST NOT GIVEN</b>
	Drug Test Given	Drug Test Type Drug Test Results <b>TEST NOT GIVEN</b>
	Drug Type	
Individual Condition <b>APPEARED NORMAL</b>		