

6TL0CTJN38

22-12252

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

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Document Number Override, Primary Crash Document #, Agency Crash Number 22-12252, Investigating Officer/Deputy DEPUTY A. KULAS, Crash Date 12/08/2022, Crash Time 11:00 PM, Date Arrived, Time Arrived, Date Notified 12/08/2022, Time Notified 11:07 PM, Total Units 01, Total Injured 00, Total Killed 00, On Emergency, Hit and Run, Lane Closure, Work Zone, Trailer or Towed, Reporting Threshold, Government Property, Active School Zone, School Bus Related NO, Tags, Reportable, Crash Type NON-DOMESTICATED ANIMAL W/ NO INJURY, Amended, Secondary Crash

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

Location

ON USH14 WB
1312 FT W
OF DYKE RD
IN THE TOWN OF SPRING GREEN
IN SAUK COUNTY
Latitude 43.189693659, Longitude -90.138244204, X Coordinate 244986.9375, Y Coordinate 4786662.5, 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 RACCOON(S), 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

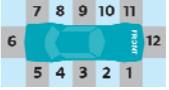
Unit Status IN TRANSIT, Vehicle Operating As Classification D CLASS, Unit Type AUTOMOBILE, Vehicle Type (SPORT) UTILITY VEHICLE, Operating As Endorsements, Total Occs 1, Train/Bus # Recorded, Total # Citations Issued 0, Total Trailers 0, Total HazMat Types 0, Insurance? YES, Direction Of Travel WESTBOUND, 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

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		Truck Bus or HazMat				
01	UNIT	VEHICLE	<b>Vehicle</b>			
			License Plate Number <b>318TNN</b>	Plate Type <b>AUT - AUTOMOBILE</b>	St <b>WI</b>	Country of Issuance <b>UNITED STATES</b>
			Vehicle Identification Number <b>5TDYK3DC2GS716974</b>	Make <b>TOYOTA</b>	Year <b>2016</b>	Model <b>SIENNA</b>
			Color <b>SIL - SILVER (ALUMINUM)</b>	Body Style <b>MV - MINI VAN</b>	Bus Use	
			Initial Contact Point <b>11 - LEFT FRONT CORNER</b>	Vehicle Damage <b>11 - LEFT FRONT CORNER, 12 - FRONT</b>		
			Extent Of Damage <b>MINOR DAMAGE</b>			
			Towed Due To Damage <b>NOT TOWED</b>	Vehicle Removed By <b>OWNER</b>		
			What Driver Was Doing	Vehicle Factors		
			Driver Prior Action Other			
			01	UNIT	VEHICLE	Driver Actions <b>NO CONTRIBUTING ACTION</b>
Owner Name	Owner Address					
<b>Policy Holder</b>						
01	UNIT	Insurance Company <b>AMERICAN-FAMILY-INS-CO</b>	Individual <b>CATRINA WASTLICK</b>			
		<b>Individual</b>				
01	UNIT	INDIVIDUAL	Driver <b>CATRINA MARIE WASTLICK (608) 604-0572</b>	Citations Issued <b>0</b>	Sex <b>FEMALE</b>	
				Date of Birth	Race <b>WHITE</b>	
			Address <b>32933 ALBERT LN LONE ROCK, WI 53556 , US</b>	Driver License Number <b>STATE: WISCONSIN COUNTRY: UNITED STATES</b>		
01	UNIT	001	<b>Safety Equipment</b>		On Duty Crash	
					Safety Equipment <b>SHOULDER &amp; LAP BELT</b>	
			Row	Seat Position		
			Helmet Use		Helmet Compliance	
			Eye Protection		Tint Compliance	
			<b>Injury</b>	Injury Severity <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

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