

6TL0C884K3
23-02087

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

6TL0C884K3

| | | | | | | | |
|--|--------------------------------------|---|--|--|--|---|--|
| Document Number Override | | Primary Crash Document # | | Agency Crash Number 23-02087 | | Investigating Officer/Deputy DEPUTY T. SUTHERLAND | |
| Crash Date 03/01/2023 | | Crash Time 03:05 PM | | Date Arrived | | Time Arrived | |
| Date Notified 03/01/2023 | | Time Notified 03:10 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 1.32 MI S OF USH12 EB IN THE TOWN OF SUMPTER IN SAUK COUNTY | Latitude 43.401326785 | Longitude -89.772491193 |
| | X Coordinate 275490.125 | Y Coordinate 4809117 |
| | 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 TURKEY | 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

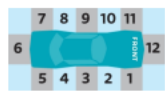
| | | | | | | |
|------------|--|--|---|----------------------------|--|--|
| UNIT 01 | Unit Status IN TRANSIT | | Vehicle Operating As Classification D CLASS | | Unit Type AUTOMOBILE | |
| | Vehicle Type (SPORT) UTILITY VEHICLE | | | | Operating As Endorsements | |
| | Total Occs 1 | Train/Bus # Recorded | Total # Citations Issued 0 | Total Trailers 0 | Total HazMat Types 0 | |
| | Insurance? YES | Direction Of Travel 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 | |

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| | | | |
|----------|---|---|--|
| | | Truck Bus or HazMat | |
| 01 | UNIT | Vehicle | |
| | | License Plate Number PLV4012 | Plate Type AUT - AUTOMOBILE |
| | | Vehicle Identification Number 2GNAXKEV4K6173666 | Make CHEVROLET |
| | | Color WHI - WHITE | Year 2019 |
| | | Initial Contact Point 13 - TOP | Vehicle Damage 13 - TOP |
| | | Extent Of Damage MINOR DAMAGE | Bus Use |
| | | Towed Due To Damage TOWED DUE TO DISABLING DAMAGE | Vehicle Removed By CRAIGS TOWING |
| | | What Driver Was Doing | Vehicle Factors |
| | | Driver Prior Action Other | |
| | | Driver Actions NO CONTRIBUTING ACTION | |
| 01 | UNIT | Owner Name | Owner Address |
| | | | |
| 01 | UNIT | Policy Holder | |
| | | Insurance Company GEICO-ADVANTAGE-INSURANCE-CO | Individual NUVIA PARRA BARRAZA |
| 01 | UNIT | Individual | |
| | | Driver CYNTHIA BARRAZA (956) 215-6977 | Citations Issued 0 |
| | | | Sex FEMALE |
| | | | Race HISPANIC |
| | Address 36 FOREST DR # 610 WISCONSIN DELLS, WI 53965 , US | Driver License Number | |
| 01 | UNIT | Safety Equipment | |
| | | On Duty Crash | Safety Equipment SHOULDER & LAP BELT |
| | | Row | Seat Position |
| | | Helmet Use | Helmet Compliance |
| | | Eye Protection | Tint Compliance |
| | | Injury | Injury Severity NO APPARENT INJURY |
| | | | Airbag |
| | | Ejected | Ejection Path |
| | | Trapped/Extricated | |
| | | Medical Transport NOT TRANSPORTED | EMS Agency Identifier |
| Hospital | Date of Death | | |
| | Time of Death | | |



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CRASH REPORT

| | | | | |
|--|----------------------|--|---|---------------------------------|
| UNIT | Distracted By | Distracted By Source | | |
| | | Distracted By Action | | |
| | Non Motorist | Striking Unit # | Location | |
| | | Prior Action | | |
| | INDIVIDUAL | Action | | |
| | | Action Other | | To/From School |
| | | Drug & Alcohol | Suspected Alcohol Use NO | Suspected Drug Use NO |
| | | | Alcohol Test Given TEST NOT GIVEN | Alcohol Test Type |
| | | Drug Test Given TEST NOT GIVEN | Drug Test Type | Drug Test Results |
| | | Drug Type | | |
| Individual Condition APPEARED NORMAL | | | | |