

6TL0D0GSLD
23-06070

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 23-06070		Investigating Officer/Deputy DEPUTY G. AKERS	
Crash Date 06/11/2023		Crash Time 10:05 PM		Date Arrived		Time Arrived	
Date Notified 06/11/2023		Time Notified 10:21 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 STH23 WB 817 FT N OF CTHGG WB IN THE TOWN OF FRANKLIN IN SAUK COUNTY	Latitude 43.353296369	Longitude -90.06901316
	X Coordinate 251280.78125	Y Coordinate 4804624
	Structure Type	

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

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	

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		Truck Bus or HazMat				
01	UNIT	VEHICLE	Vehicle			
			License Plate Number 851LPH	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES
			Vehicle Identification Number 3GNBAAFW3BS504696	Make CHEVROLET	Year 2011	Model HHR LS
			Color BRO - BROWN	Body Style LL - CARRYALL	Bus Use	
			Initial Contact Point 12 - FRONT	Vehicle Damage 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT		
			Extent Of Damage FUNCTIONAL DAMAGE			
			Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR		
			What Driver Was Doing	Vehicle Factors		
			Driver Prior Action Other			
			01	UNIT	VEHICLE	Driver Actions NO CONTRIBUTING ACTION
Owner Name	Owner Address					
Policy Holder						
01	UNIT	Insurance Company NATIONWIDE-INSURANCE-COMPANY-OF-AMERI	Individual NORA MOE			
		Individual				
01	UNIT	INDIVIDUAL	Driver NORA MOE	Citations Issued 0	Sex FEMALE	
				Date of Birth	Race WHITE	
			Address 426 N WOOD ST SPRING GREEN, WI 53588 , US	Driver License Number STATE: WISCONSIN COUNTRY: UNITED STATES		
			Safety Equipment			
01	UNIT	001	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	EMS Run #	
Hospital	Date of Death	Time of Death				

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UNIT	Distracted By		Distracted By Source		
	Distracted By Action				
	Non Motorist		Striking Unit #	Location	
	Prior Action				
	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		Alcohol Test Results
	Drug Test Given TEST NOT GIVEN		Drug Test Type	Drug Test Results	
	Drug Type				
01	001	Individual Condition			
		APPEARED NORMAL			