6TL0CVRP52 23-06823

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 23-06823				Investigating Officer/Deputy SERGEANT B. LUBER				
.0CVRP52	Crash Date 06/29/2023	Crash Time 07:41 PM		Date Arrived		Tim	Time Arrived					
	Date Notified 06/29/2023	Time Notified 07:41 PM		Total Units 01		Total		I Injured Total Killed		t		
	On Emergency Hi	t and Run Lane Closu		ıre Work Zo				Trailer or Tov		ved Reporting Threshold		
eTL	Government Property	nool Zone	School Bus Related NO			Tag	Tags					
	✓ Reportable	Crash Type NON-DOMESTICATED ANIMAL W/ NO INJUR			RY Amended			Secondary Crash				
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.											
Ì	Location											
Ī	ON USH12 WB					Latitude Longitude						
	696 FT N					43.38012	28602	-89.76821				
	OF USH12 WB					X Coordin	ate		Y Coordinate			
	IN THE TOWN OF SUMPTER	l								4806751		
	IN SAUK COUNTY								400070			
						Structure 7	туре					
	Crash Scene											
1	First Harmful Event					First Israe	nful Event L	acation				
		AL (ALIVE)						.ocalion				
	NON DOMESTICATED ANIM Manner of Collision	AL (ALIVE)				ON ROADWAY						
		OLE IN TRANSF	ODT			Light Condition						
	00 - NO COLLISION W/VEHIO	JE IN TRANSF	OKI			D 1	F (()					
	Road Surface Condition(s)					Roadway	racior(s)					
	Environment Factor(s)											
ŀ	Weather Condition(s)											
	<u> </u>											
	Animal Type				Relation To Trafficway							
	DEER				TRAFFICWAY - ON ROAD							
	Crash Classification - Location				Crash Classification - Jurisdiction							
	PUBLIC PROPERTY Tribell and				NO SPECIAL JURISDICTION							
	Tribal Land					Access Control Special Study						
Į												
	Unit Summary		1177	:-! 0 :	A O	: e:		111 11 -				
				•	cle Operating As Classification			Unit Type				
ļ	IN TRANSIT D CLASS							AUTOMOBILE				
7	Vehicle Type						Operating A	s Endorser	nents			
٦	(SPORT) UTILITY VEHICLE											
	Total Occs Train/Bus # Recorded			Total # Citations Issued 0		0				Mat Types		
	1							0				
.		Direction Of Travel WESTBOUND		Pre CrashTir Mark		e Speed		ed Limit Tota		otal Lanes		
LIND	Most Harmful Event: Collision With							Emergency	Emergency Motor Vehicle Use			
5	NON DOMESTICATED ANIMAL (ALIVE)			Special Function NO SPECIAL FUNCTION			TION		NOT APPLICABLE			
	Traffic Way								trol Inoperative/Missing			
	Traino vvay			Traffic Control			Trailic Cont		roi moperative/iviissifig			
ŀ	Surface Type			Road Curvature				Road Grade				
				.								

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	Truc	k Bus or HazMat							
	,	Vehicle							
10		License Plate Number BZ53678	Plate Type	St IL	Country of Issuance UNITED STATES				
	VEHICLE 01	Vehicle Identification Number 5XYPG4A38GG103116	Make KIA MOTORS CORPO	Year 2016	Model SORENTO				
		Color WHI - WHITE	Body Style UT - SPORT UTILITY VEHICLE Bus Use						
UNIT		Initial Contact Point 12 - FRONT Extent Of Damage DISABLING DAMAGE	Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 12 - FRONT 5 4 3 2 1						
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By EVERETTS TOWING						
		What Driver Was Doing Driver Prior Action Other	Vehicle Factors						
		Driver Actions							
LIND	VEHICLE	NO CONTRIBUTING ACTION							
		Owner Name	Owner Address						
6	2								
⊨	ı	Policy Holder							
UNIT		Insurance Company STATE-FARM-GENERAL-INS-CO	ANNEMARIE KOUB	A					
	INDIVIDUAL	Individual Driver	Citations leaved	Cav					
		ANNEMARIE KOUBA	Citations Issued 0	Sex FEMALE					
_		(773) 391-6189	Date of Birth	Race WHITE					
LIND		Address 1400 W OHIO ST APT 1 CHICAGO, IL 60642, US	Driver License Number STATE: ILLINOIS COUNTRY: UNITED STATES						
	Sai	On Duty Crash fety Equipment	Safety Equipment						
		Row Seat Position	SHOULDER & LAP BELT						
	100	Helmet Use	Helmet Compliance						
		Eye Protection	Tint Compliance						
5		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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Crash Date 06/29/2023

Crash Time 07:41 PM

		Distracted By	Distracted By Source						
		Distracted By Action							
		Non Motorist	Striking Unit #	Location					
		Prior Action							
		Action							
	JAL								
LNN	INDIVIDUAL								
	<u>N</u>								
		Action Other						To/From School	
	ı	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			
10	004	Drug Type				•			
		Individual Condition							
		APPEARED NORM	MAL						