

6TL0CBQ6S0
23-07746

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

6TL0CBQ6S0

| | | | | | | | |
|--|--------------------------------------|---|--|--|--|---|--|
| Document Number Override | | Primary Crash Document # | | Agency Crash Number 23-07746 | | Investigating Officer/Deputy DEPUTY A. JAHNKE | |
| Crash Date 07/20/2023 | | Crash Time 07:00 PM | | Date Arrived | | Time Arrived | |
| Date Notified 07/20/2023 | | Time Notified 07:10 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 SECTION 11 RD 1007 FT W OF W REDSTONE DR IN THE TOWN OF LA VALLE IN SAUK COUNTY | Latitude 43.620010833 | Longitude -90.097006045 |
| | X Coordinate 250115.0625 | Y Coordinate 4834331 |
| | 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

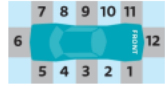
| | | | | | | | |
|------------|--|---|---|----------------------------|--|---------------------------|--|
| UNIT 01 | Unit Status IN TRANSIT | | Vehicle Operating As Classification D CLASS | | Unit Type AUTOMOBILE | | |
| | Vehicle Type (SPORT) UTILITY VEHICLE | | | | | Operating As Endorsements | |
| | Total Occs 1 | Train/Bus # Recorded | Total # Citations Issued 0 | Total Trailers 0 | Total HazMat Types 0 | | |
| | Insurance? YES | Direction Of Travel WESTBOUND | <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 G186 | Plate Type AUT - AUTOMOBILE | |
| | | Vehicle Identification Number 2T2HK31U27C029432 | Make LEXUS | |
| | | Color BLK - BLACK | Year 2007 | |
| | | Initial Contact Point 12 - FRONT | Model RX 350 | |
| | | Extent Of Damage FUNCTIONAL DAMAGE | Body Style LL - CARRYALL | |
| | | Towed Due To Damage NOT TOWED | Bus Use | |
| | | What Driver Was Doing | Vehicle Damage 01 - RIGHT FRONT CORNER, 12 - FRONT | |
| | | Driver Prior Action Other | Vehicle Removed By OWNER | |
| | | Driver Actions NO CONTRIBUTING ACTION | Vehicle Factors | |
| Owner Name | Owner Address | | | |
| 01 | UNIT | Policy Holder | | |
| | | Insurance Company USAA-CASUALTY-INS-CO | Individual SUSAN OTT | |
| | | Individual | | |
| 01 | UNIT | Driver SUSAN OTT (608) 963-0834 | Citations Issued 0 | |
| | | Sex FEMALE | Date of Birth | |
| | | Address E4543 BLACKBIRD CT LA VALLE, WI 53941 , US | Race WHITE | |
| | | Driver License Number | | |
| | | 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 | EMS Run # | | |
| Hospital | Date of Death | Time of Death | | |



| | | | | | | | | |
|--|------------|----------------------|-----------------|---|-------------------|------------------------------------|---------------------------------|--|
| UNIT | INDIVIDUAL | Distracted By | | Distracted By Source | | | | |
| | | Distracted By Action | | | | | | |
| | | Non Motorist | Striking Unit # | Location | | | | |
| | | | Prior Action | | | | | |
| | | Action | | | | | | |
| | | Action Other | | | | To/From School | | |
| | | 01 | 001 | 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 | | | | |
| Individual Condition APPEARED NORMAL | | | | | | | | |