6TL0B655WL 23-08150

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash	Primary Crash Document #		Agency Crash Number 23-08150			Investigating Officer/Deputy DEPUTY W. NEUBAUER			
ML	Crash Date 07/29/2023	Crash Time 04:20 PM			Date Arrived		Time	Time Arrived			
1MCC9AULI 0	Date Notified 07/29/2023	Time Notified 04:20 PM			Total Units 01		Total 00	tal Injured Total Killed 00			
-0B(On Emergency	Hit and Run	Lane Clo		Ш	rk Zone		Γrailer or Τ	owed	Reporting Threshold	
ا ا و ا	Government Active School Zone			NO School	School Bus Related NO		Tags	Tags			
	✓ Reportable	STICATED ANI	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.										
- 1	Location										
Ī	ON STH58 SB 0.26 MI E					Latitude	Latitude Longitude 43.535468336 -90.187854179				
	OF QUAKER VALLEY DR					X Coordinate			Y Coord		
	IN THE TOWN OF IRONT IN SAUK COUNTY	ON				242424				4825218.5	
							Structure Type				
(Crash Scene										
7						I =	=				
	First Harmful Event			First Harmful Event Location ON ROADWAY							
-	Manner of Collision	NIMAL (ALIVE)									
	00 - NO COLLISION W/VI	EHICLE IN TRANS	PORT			Light Condition					
ŀ	Road Surface Condition(s)					Roadway F	Factor(s)				
						, , ,					
ŀ	Environment Factor(s)										
	Environment ractor(s)										
	Weather Condition(s)										
	Animal Type					Relation To Trafficway					
ļ	DEER					TRAFFICWAY - ON ROAD					
	Crash Classification - Location PUBLIC PROPERTY					Crash Classification - Jurisdiction NO SPECIAL JURISDICTION					
-	Tribal Land					Access Control		001011011		Special Study	
į	Unit Summary									•	
Ī	Unit Status		I V	ehicle Opera	ating As C	lassification		Unit Type			
	IN TRANSIT D CLAS				CLASS			AUTOMOBILE			
_	Vehicle Type					Operating As Endorsements					
0	PASSENGER VAN										
	Total Occs	Train/Bus # Reco		otal # Citatio	ns Issued					:Mat Types	
	1 Insurance?	Direction Of Trave	0			0 Speed Lim		0 mit Total Lane		es	
_	YES	WESTBOUND			rashTire Iark	Spood Ellin					
		Most Harmful Event: Collision With Special Function						Emergency Motor Vehicle Use			
ַ				NO SPECIAL FUNCTION				NOT APPLICABLE			
	Traffic Way			Traffic Control				Traffic Control Inoperative/Missing			
Surface Type Road Co				oad Curvatu	d Curvature			Road Grade			

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

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Crash Date **07/29/2023**Crash Time **04:20 PM**

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	Truck Bus or HazMat									
	,									
	VEHICLE 01	License Plate Number ATD5428		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES				
2		Vehicle Identification Number 2C4RC1BG9ER275362		Make CHRYSLER	Year 2014	Model TOWN & COU				
		Color BLU - BLUE		VN - VAN	Body Style Bus Use VN - VAN					
FIN		Initial Contact Point 12 - FRONT Extent Of Damage MINOR DAMAGE		Vehicle Damage 7 8 9 10 11 101 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT 5 4 3 2 1						
		Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR						
		What Driver Was Doing		Vehicle Factors						
		Driver Prior Action Other								
Driver Actions NO CONTRIBUTING ACTION										
_		Owner Name		Owner Address	Owner Address					
2	0									
Policy Holder										
HND	Insurance Company PEKIN-INS-CO			Individual KATHERINE HOOKS						
	INDIVIDUAL	Individual								
		Driver KATHERINE HOOKS (608) 415-7265		Citations Issued 0	Sex FEMALE	MALE				
E				Date of Birth	Race WHITE					
TINO		Address 207 MARSHALL RD CAZENOVIA, WI 53924 , US		Driver License Number						
	Sat	On Duty	Safety Equipment							
		Row	Seat Position	SHOULDER & LAP	SHOULDER & LAP BELT					
		Helmet Use		Helmet Compliance						
		Eye Protection		Tint Compliance						
2	00	Injury Seventy 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 07/29/2023
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		Distracted By	Distracted By Source							
		Distracted By Action								
		Non Motorist	Striking Unit #	Location						
		Prior Action								
		Action								
	UAL									
LNO	INDIVIDUAL									
	N									
								I.T. (5		
		Action Other To/From School								
	L	Drug & Alcohol 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				
2	001	Drug Type								
		Individual Condition								
		APPEARED NORMAL								