6TL0CTJN3X 23-09143

# WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash I	Primary Crash Document #		Agency Crash Number 23-09143			Investigating Officer/Deputy DEPUTY A. KULAS			
χχ	Crash Date <b>08/22/2023</b>	Crash Time 01:20 AM			Date Arrived		Time	Time Arrived			
I JN3X	Date Notified <b>08/22/2023</b>	Time Notified 01:24 AM			Total Units 01		Total 00	al Injured Total Killed 00		I	
OI FOC	On Emergency	Hit and Run	Lane Clos		☐ Work Zone			Trailer or T	owed Reporting Threshold		
٥ [	Government Property		chool Zone	NO School I	Bus Relate	ed	Tags				
	Reportable Crash Type NON-DOMESTICATED A			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										
ĺ	ON CTHH WB					Latitude			Longitude -89.832049109		
	470 FT W OF BIRCHWOOD SPUR IN THE TOWN OF DELTON IN SAUK COUNTY					<b>43.616157816</b> X Coordinate			-89.832 Y Coord		
						271479.65625			4833139.5		
						Structure Type NO STRUCTURE					
(	Crash Scene										
Ī	First Harmful Event					First Harm	ful Event Lo	cation			
	NON DOMESTICATED A				ON ROADWAY						
	Manner of Collision					Light Condition					
	00 - NO COLLISION W/V	EHICLE IN TRANS	PORT			Roadway Factor(s)					
	Road Surface Condition(s)  Environment Factor(s)					uo.o.(e)					
	Weather Condition(s)										
	Animal Type DEER					Relation To Trafficway TRAFFICWAY - ON ROAD					
ŀ	Crash Classification - Location					Crash Classification - Jurisdiction					
PUBLIC PROPERTY							NO SPECIAL JURISDICTION				
Tribal Land				Access Control			ntrol	Special Study		Special Study	
ļ	Unit Summary										
	Unit Status		Ve	hicle Opera	ating As C	lassification		Unit Type			
IN TRANSIT Vehicle Type				D CLASS			AUTOMOBILI			.E	
			•	1				Operating As Endorsements			
ا د	ASSENGER CAR										
	Total Occs 1	Train/Bus # Recor	rded To	tal # Citatio	ns Issued	Total Traile  0		llers Total Hazi		Mat Types	
	Insurance?	Direction Of Trave	el	Pre C	rashTire	Speed Lim		nit Total Lanes		es	
	YES	WESTBOUND		☐ Mark					propay Motor Vobialo I I		
				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			

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

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Crash Date **08/22/2023**Crash Time **01:20 AM** 

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

	Truck Bus or HazMat									
	,									
	VEHICLE VEHICLE 01	License Plate Number AHK8211		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES				
۶		Vehicle Identification Number JF1VA2U63F9811587		Make SUBARU	Year 2015	Model WRX				
		Color WHI - WHITE		4H - HATCHBACK 4 E	Body Style 4H - HATCHBACK 4 DOOR  Bus Use					
LIND		Initial Contact Point  11 - LEFT FRONT CORNER  Extent Of Damage		Vehicle Damage  7 8 9 10 11  10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT  5 4 3 2 1						
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By CRAIGS TOWING						
		What Driver Was Doing	ING DAWAGE	Vehicle Factors						
		Driver Prior Action Other		7						
		Driver Actions								
TIND										
	>	Owner Name		Owner Address						
2	7	Owner Name		Owner Address						
FIN		Policy Holder Insurance Company		Individual						
5		SAFECO-INS-CO-OF-AM	ERICA	CARSON FUSCH						
	INDIVIDUAL	Individual								
		Driver CARSON FUSCH		Citations Issued  0	Sex MALE					
Ŀ		(608) 495-3119		Date of Birth	Race WHITE					
TINO		Address 916 CAROUSEL DR REEDSBURG, WI 53959 , US		Driver License Number						
	Sat	On Duty	Safety Equipment	Safety Equipment						
		Row	Seat Position	SHOULDER & LAP	SHOULDER & LAP BELT					
		Helmet Use		Helmet Compliance						
		Eye Protection		Tint Compliance						
2	001	Injury Seventy NO APPARENT INJURY		Airbag						
		Ejected	Ejection Path	•	Trapped/Extricated					
		Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run#				
		Hospital		Date of Death	Date of Death Time of Death					

Wisconsin Motor Vehicle Crash Form DT4000

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Crash Date 08/22/2023
Crash Time 01:20 AM

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Distracted By Source									
		Distracted By Action							
		Non Motorist	Striking Unit #	Location					
		Prior Action							
		Action							
l.	UAL								
LND	INDIVIDUAL								
	N D								
		Action Other						To/From School	
								10/F10III 3CH00I	
	Drug & Alcohol No				Suspected Drug Use NO				
	Alcohol Test Given TEST NOT GIVEN Alcohol T			Alcohol Test Type	ohol 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									