## 6TL0DJJ8WV 23-09527

# 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 23-09527			Investigating Officer/Deputy  DEPUTY J. TROTH				
<b>&gt;</b>	Crash Date <b>08/31/2023</b>	Crash Time 08:35 PM		Date Arrived		Time	Time Arrived				
0DJJ8WV	Date Notified <b>08/31/2023</b>	Time Notified 08:41 PM		Total Units <b>01</b>		Total <b>00</b>		Total Killed <b>00</b>		i	
<u>.00</u>	On Emergency Hi	t and Run	Lane Closu		Ш	rk Zone		Trailer or T	owed	Reporting Threshold	
6TL	Government Property	Active Scl	nool Zone	NO School B	us Relat	ed	Tags	5			
	<b>✓</b> Reportable	Crash Type NON-DOMES	TICATED ANIM	AL W/ NC	INJUF	RY		Amended		Secondary Crash	
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.										
Ī	Location										
ł	ON STH58 SB					Latitude			Longitud	de	
	0.38 MI E					43.54122	21308	-90.15683		83696	
	OF CTHG EB					X Coordin	ate	Y Coordinate		inate	
	IN THE TOWN OF IRONTON IN SAUK COUNTY								482576	62	
	IN SAUK COUNTY					Structure	Туре				
						NO STRUCTURE					
	Crash Scene										
ì	First Harmful Event					Eiret Harm	nful Event Lo	acation			
	NON DOMESTICATED ANIM	AI (AI IVF)				ON ROA		Joanon			
	Manner of Collision	AL (ALIVE)				Light Condition					
	00 - NO COLLISION W/VEHIC	CLE IN TRANSF	PORT			Light Condition					
	Road Surface Condition(s)					Roadway	Factor(s)				
	Environment Factor(s)										
	Weather Condition(s)										
	Animal Type				Relation To Trafficway						
	DEER Crash Classification - Location				TRAFFICWAY - ON ROAD  Crash Classification - Jurisdiction						
	PUBLIC PROPERTY				NO SPECIAL JURISDICTION						
	Tribal Land				Access Control Special Study						
	, issues sainto.										
i	Unit Summary										
ì	Unit Status		Veh	icle Operat	ing As C	lassification		Unit Type			
				D CLASS			TRUCK				
_	Vehicle Type				Operating As Endorsements						
01	UTILITY TRUCK/PICKUP TRUCK										
	Total Occs Train/Bus # Recorded			Total # Citations Issued		Total Trai		ailers Total Haz		Mat Types	
	1		0			0		0			
	Insurance?	Direction Of Travel		Pre CrashTire		Speed Lin		nit Total Lane		es	
⊢	YES		Mark								
UNIT	Most Harmful Event: Collision With			Special Function			TION		Emergency Motor Vehicle Use		
_	NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNCTION				NOT APPLICABLE			
	Traffic Way			Traffic Control				Traffic Control Inoperative/Missing			
	Surface Type			Road Curvature				Road Grade			

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	Truc	k Bus or HazMat						
	,	Vehicle						
		License Plate Number TH1070	Plate Type  LTK - LIGHT TRUCK	St WI	Country of Issuance UNITED STATES			
6	VEHICLE 01	Vehicle Identification Number 1FTPX14594NC36497	Make FORD	Year <b>2004</b>	Model F150			
		Color TAN - TAN	Body Style Bus Use PK - PICKUP					
LINI		Initial Contact Point 01 - RIGHT FRONT CORNER Extent Of Damage FUNCTIONAL DAMAGE	Vehicle Damage  01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 12 - FRONT  5 4 3 2 1					
		Towed Due To Damage NOT TOWED	Vehicle Removed By					
		What Driver Was Doing	Vehicle Factors					
		Driver Prior Action Other						
LINI	VEHICLE	Driver Actions NO CONTRIBUTING ACTION						
		Owner Name	Owner Address					
0	6							
LIND		Policy Holder Insurance Company						
5		USAA-CASUALTY-INS-CO	RICHARD COHOON	ı				
	INDIVIDUAL	Individual Driver	Citations Issued Sex					
		RICHARD COHOON	0	MALE				
_		(608) 415-3917	Date of Birth	Race WHITE				
LIND		Address 207 FRAN CT OXFORD, WI 53952 , US	Driver License Number  STATE: WISCONSIN 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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ı			Distracted By Source					
Distracted By								
		Distracted By Action						
		Non Motorist	Striking Unit #	Location				
		Prior Action	1					
İ		Action						
	4							
<b> </b> _	INDIVIDUAL							
LNO	<u> </u>							
∣⊃	$\leq$							
	Z							
		Action Other						To/From School
	Suspected Alcohol Use  Drug & Alcohol NO			se	Suspected Drug Use			
		_	NO		NO			
		Alcohol Test Given		Alcohol Test Type			Alcohol Test Results	
		TEST NOT GIVEN						
İ			Drug Test Type	Test Type Drug Test Result		5		
		TEST NOT GIVEN						
2	001	Drug Type						
0	ŏ							
ŀ		Individual Condition						
		maividuai Condition						
		APPEARED NOR	MAL					
l								