

6TL0FB0003
23-10869

WISCONSIN MOTOR VEHICLE
CRASH REPORT

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

6TL0FB0003

Document Number Override		Primary Crash Document #		Agency Crash Number 23-10869		Investigating Officer/Deputy DEPUTY W. NEUBAUER	
Crash Date 10/06/2023		Crash Time 06:50 AM		Date Arrived		Time Arrived	
Date Notified 10/06/2023		Time Notified 06:55 AM		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"/> Government Property		<input type="checkbox"/> Active School Zone		School Bus Related NO		<input type="checkbox"/> Trailer or Towed	
<input checked="" type="checkbox"/> Reportable		Crash Type NON-DOMESTICATED ANIMAL W/ NO INJURY		<input type="checkbox"/> Amended		<input type="checkbox"/> Reporting Threshold	
<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 STH23 EB 1308 FT W OF OPEN VIEW RD IN THE TOWN OF WESTFIELD IN SAUK COUNTY	Latitude 43.465739663	Longitude -90.023342647
	X Coordinate 255435.5	Y Coordinate 4816977.5
	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

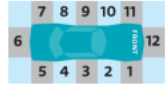
UNIT 01	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS	Unit Type AUTOMOBILE			
	Vehicle Type (SPORT) UTILITY VEHICLE		Operating As Endorsements			
	Total Occs 1	Train/Bus # Recorded	Total # Citations Issued 0	Total Trailers 0	Total HazMat Types 0	
	Insurance? YES	Direction Of Travel EASTBOUND	<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 ALY4666	Plate Type AUT - AUTOMOBILE
		Vehicle Identification Number 1C4NJDBB4HD139254	Make JEEP
		Color RED - RED	Body Style UT - SPORT UTILITY VEHICLE
		Initial Contact Point 12 - FRONT	Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT
		Extent Of Damage DISABLING DAMAGE	
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE	Vehicle Removed By SHIELDS TOWING
		What Driver Was Doing	Vehicle Factors
		Driver Prior Action Other	
		Driver Actions NO CONTRIBUTING ACTION	
01	UNIT	Owner Name	Owner Address
01	UNIT	Policy Holder	
		Insurance Company PROGRESSIVE-CASUALTY-INS-CO	Individual DEBRA SEEP
01	UNIT	Individual	
		Driver DEBRA SEEP (608) 963-7161	Citations Issued 0
			Sex FEMALE
			Race WHITE
	Address 312 NORTH ST CAZENOVIA, WI 53924 , US	Driver License Number	
01	UNIT	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
Medical Transport NOT TRANSPORTED	EMS Agency Identifier	EMS Run #	
Hospital	Date of Death	Time of Death	



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