6TL0CTJN46 23-12501

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| Crash Date 10.43 PM | nold | | | | |
|--|------------------------------|--|--|--|--|
| On Emergency Hit and Run Lane Closure Work Zone Trailer or Towed Threst Government Property Active School Zone NO Reportable Crash Type NON-DOMESTICATED ANIMAL W/ NO INJURY Amended Secon Crash Type NON-DOMESTICATED ANIMAL W/ NO INJURY Location ON CTHA SB 101 FT N OF BUNKER DR IN THE TOWN OF DELTON IN SAUK COUNTY Crash Scene Crash Scene Crash Scene First Harmful Event NON DOMESTICATED ANIMAL (ALIVE) ON ROADWAY Manner of Collision WVEHICLE IN TRANSPORT Road Surface Condition(s) Report Threst Work Zone Work Zone Work Zone Trailer or Towed Report Threst Report. Latitude 4.3.56859041 Amended Secon Crash Secone First Harmful Event Nongitude 43.56859041 X Coordinate 278855.6875 Structure Type NO STRUCTURE Crash Scene First Harmful Event Location On ROADWAY Manner of Collision WVEHICLE IN TRANSPORT Road Surface Condition(s) | nold | | | | |
| On Emergency Hit and Run Lane Closure Work Zone Trailer or Towed Threst Government Property Active School Zone NO Reportable Crash Type NON-DOMESTICATED ANIMAL W/ NO INJURY Amended Secon Crash Type NON-DOMESTICATED ANIMAL W/ NO INJURY Location ON CTHA SB 101 FT N OF BUNKER DR IN THE TOWN OF DELTON IN SAUK COUNTY Crash Scene Crash Scene Crash Scene First Harmful Event NON DOMESTICATED ANIMAL (ALIVE) ON ROADWAY Manner of Collision WVEHICLE IN TRANSPORT Road Surface Condition(s) Report Threst Work Zone Work Zone Work Zone Trailer or Towed Report Threst Report. Latitude 4.3.56859041 Amended Secon Crash Secone First Harmful Event Nongitude 43.56859041 X Coordinate 278855.6875 Structure Type NO STRUCTURE Crash Scene First Harmful Event Location On ROADWAY Manner of Collision WVEHICLE IN TRANSPORT Road Surface Condition(s) | nold | | | | |
| Government Property Active School Zone NO Reportable Crash Type NON-DOMESTICATED ANIMAL W/ NO INJURY Amended Secondary Crash Type NON-DOMESTICATED ANIMAL W/ NO INJURY I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report. Location ON CTHA SB 101 FT N | nold | | | | |
| Reportable Crash Type NON-DOMESTICATED ANIMAL W/ NO INJURY | | | | | |
| Reportable NON-DOMESTICATED ANIMAL W/ NO INJURY Amended Cra | | | | | |
| Location ON CTHA SB 101 FT N OF BUNKER DR IN THE TOWN OF DELTON IN SAUK COUNTY Trick Harmful Event NON DOMESTICATED ANIMAL (ALIVE) Manner of Collision O1 - NO COLLISION W/VEHICLE IN TRANSPORT Road Surface Condition(s) Latitude 43.56859041 -89.738482291 X Coordinate 43.56859041 X Coordinate 43.56859041 X Coordinate 43.56859041 Y Coordinate 4827603 Structure Type NO STRUCTURE First Harmful Event Location ON ROADWAY Light Condition Roadway Factor(s) | | | | | |
| ON CTHA SB 101 FT N OF BUNKER DR IN THE TOWN OF DELTON IN SAUK COUNTY X Coordinate | | | | | |
| 101 FT N OF BUNKER DR IN THE TOWN OF DELTON IN SAUK COUNTY 43.56859041 X Coordinate 278855.6875 Structure Type NO STRUCTURE Crash Scene First Harmful Event NON DOMESTICATED ANIMAL (ALIVE) Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT Road Surface Condition(s) 43.56859041 X Coordinate X Coordinate Y Coordinate 4827603 First Harmful Event Location ON STRUCTURE First Harmful Event Location ON ROADWAY Light Condition Roadway Factor(s) | | | | | |
| OF BUNKER DR IN THE TOWN OF DELTON IN SAUK COUNTY X Coordinate 278855.6875 Structure Type NO STRUCTURE Crash Scene First Harmful Event NON DOMESTICATED ANIMAL (ALIVE) Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT Road Surface Condition(s) Roadway Factor(s) | | | | | |
| IN THE TOWN OF DELTON IN SAUK COUNTY 278855.6875 Structure Type NO STRUCTURE Crash Scene First Harmful Event NON DOMESTICATED ANIMAL (ALIVE) Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT Road Surface Condition(s) 278855.6875 Structure Type NO STRUCTURE First Harmful Event Location ON ROADWAY Light Condition Roadway Factor(s) | | | | | |
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| First Harmful Event NON DOMESTICATED ANIMAL (ALIVE) Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT Road Surface Condition(s) First Harmful Event Location ON ROADWAY Light Condition Roadway Factor(s) | | | | | |
| First Harmful Event NON DOMESTICATED ANIMAL (ALIVE) Manner of Collision On ROADWAY Light Condition On NO COLLISION W/VEHICLE IN TRANSPORT Road Surface Condition(s) Roadway Factor(s) | | | | | |
| NON DOMESTICATED ANIMAL (ALIVE) Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT Road Surface Condition(s) Roadway Factor(s) | | | | | |
| Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT Road Surface Condition(s) Roadway Factor(s) | | | | | |
| 00 - NO COLLISION W/VEHICLE IN TRANSPORT Road Surface Condition(s) Roadway Factor(s) | | | | | |
| Road Surface Condition(s) Roadway Factor(s) | Light Condition | | | | |
| | | | | | |
| Environment Factor(s) | | | | | |
| Environment Factor(s) | | | | | |
| | | | | | |
| | | | | | |
| Weather Condition(s) | | | | | |
| | | | | | |
| Animal Type Relation To Trafficway | Relation To Trafficway | | | | |
| DEER TRAFFICWAY - ON ROAD | , | | | | |
| Crash Classification - Location Crash Classification - Jurisdiction | | | | | |
| PUBLIC PROPERTY NO SPECIAL JURISDICTION | | | | | |
| Tribal Land Access Control Special Study | Access Control Special Study | | | | |
| Hait Cummon: | | | | | |
| Unit Summary Unit Status Vehicle Operating As Classification Unit Type | | | | | |
| IN TRANSIT D CLASS AUTOMOBILE | | | | | |
| Vehicle Type Operating As Endorsements | | | | | |
| SPORT) UTILITY VEHICLE | | | | | |
| Total Occs | | | | | |
| Insurance? Direction Of Travel Pre CrashTire Speed Limit Total Lanes | | | | | |
| YES SOUTHBOUND Mark Most Harmful Event: Collision With Special Function Emergency Motor Vehicle Use NO SPECIAL FUNCTION NOT APPLICABLE | | | | | |
| 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 | | | | | | | | |
| UNIT 01 | | License Plate Number 572YYS | Plate Type AUT - AUTOMOBILE | St WI | Country of Issuance UNITED STATES | | | | | |
| | 2 | Vehicle Identification Number JHLRM4H70CC010912 | Make HONDA | Year 2012 | Model CRV | | | | | |
| | | Color SIL - SILVER (ALUMINUM) | Body Style UT - SPORT UTILITY | Y VEHICLE | Bus Use | | | | | |
| | VEHICLE | Initial Contact Point 11 - LEFT FRONT CORNER Extent Of Damage DISABLING DAMAGE | Vehicle Damage O1 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT, 14 - UNDERCARRIAGE 7 8 9 10 11 6 2 2 12 5 4 3 2 1 | | | | | | | |
| | | Towed Due To Damage TOWED DUE TO DISABLING DAMAGE | Vehicle Removed By CRAIGS TOWING | | | | | | | |
| | | What Driver Was Doing Driver Prior Action Other | Vehicle Factors | | | | | | | |
| LINO | VEHICLE | Driver Actions NO CONTRIBUTING ACTION | | | | | | | | |
| 7 | 10 | Owner Name | Owner Address | | | | | | | |
| _ | | Policy Holder | | | | | | | | |
| LNO | | Insurance Company PROGRESSIVE-CLASSIC-INS-CO | Individual OLVIER PALACIO | ndividual DLVIER PALACIOS BARBOZA | | | | | | |
| | | Individual | | | | | | | | |
| LNO | ļ | Driver OLVIER PALACIOS BARBOZA (608) 570-7688 | Citations Issued 0 | Sex MALE | | | | | | |
| | INDIVIDUAL | | Date of Birth | | MERICAN INDIAN OR ALASKAN NATIVE | | | | | |
| | | Address 421 4TH ST BARABOO, WI 53913 , US | STATE: WISCONS | STATE: WISCONSIN COUNTRY: UNITED STATES | | | | | | |
| | Sat | fety Equipment | Safety Equipment | Safety Equipment | | | | | | |
| | | Row Seat Position | SHOULDER & LAI | SHOULDER & LAP BELT | | | | | | |
| | | Helmet Use | Helmet Compliance | | | | | | | |
| | | Eye Protection | Tint Compliance | | | | | | | |
| 0 | 001 | Injury Severity NO APPARENT INJURY | Airbag | | | | | | | |
| | | Ejection Path | | | Trapped/Extricated | | | | | |
| | | Medical Transport NOT TRANSPORTED | EMS Agency Identifie | er | EMS Run # | | | | | |
| | | Hospital | Date of Death | | Time of Death | | | | | |

Crash Date 11/19/2023

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

| Distracted By Source | | | | | | | | |
|----------------------|------------|-----------------------------------|---------------------------|-------------------|-----------------------|-------------------|----------------------|----------------|
| | | Distracted By Action | | | | | | |
| | | Non Motorist | Striking Unit # | Location | | | | |
| | | Prior Action | | | | | | |
| | | Action | | | | | | |
| | JAL | | | | | | | |
| LNN | INDIVIDUAL | | | | | | | |
| | <u>N</u> | | | | | | | |
| | | | | | | | | |
| | | Action Other | | | | | | To/From School |
| | ı | Drug & Alcohol | Suspected Alcohol U NO | se | 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 | | |
| 10 | 004 | Drug Type | | | | • | | |
| | | Individual Condition | | | | | | |
| | | APPEARED NORM | MAL | | | | | |