6TL0CTJN47

23-12789

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 23-12789			DEPUTY A. KULAS				
TJN47	Crash Date Crash Time 11/28/2023 04:57 PM			Date Arrived		Time	Time Arrived				
	Date Notified Time Notified 11/28/2023 04:58 PM			Total Units 01			Total 00	al Injured Total Killed		1	
OC	On Emergency	t and Run	Lane Clos	sure	Work Zone			Trailer or Towed		Reporting Threshold	
6TL	Government Property	Active School Zone				School Bus Related NO					
	Crash Type NON-DOMESTICATED AN				NIMAL W/ NO INJURY			mended		Secondary Crash	
	✓ I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.										
	Location										
	ON CTHANB 236 FT E					Latitude Longitude 43.58903045 -89.741728639					
	OF RINGLING RD					43.58903045 X Coordinate			-89.741 Y Coord		
	IN THE TOWN OF DELTON IN SAUK COUNTY					-			482988		
						Structure Type NO STRUCTURE					
(Crash Scene										
	First Harmful Event					First Harm	iful Event Lo	cation			
	NON DOMESTICATED ANIM	AL (ALIVE)				ON ROADWAY					
	Manner of Collision					Light Condition					
	00 - NO COLLISION W/VEHIC	LE IN TRANS	PORT								
	Road Surface Condition(s)					Roadway I	Factor(s)				
	Environment Factor(s)										
	Weather Condition(s)										
	Animal Type					Relation To Trafficway					
	DEER					TRAFFICWAY - ON ROAD					
	Crash Classification - Location					Crash Classification - Jurisdiction					
	PUBLIC PROPERTY Tribal Land				NO SPECIAL JURISDICTION Access Control Special Study						
	Unit Summary									-	
	Unit Status Vehicle Operating As C					assification		Unit Type			
	IN TRANSIT D CLASS							AUTOMOBILE			
01								Operating	As Endorser	ments	
0	PASSENGER VAN Total Occs Train/Bus # Recorded Total # Citation						Tetel Teells		Tatalilar	Mat Types	
	Total Occs 1	rain/bus # Recor		Total # Citations Issue 0			Total Traile	15	10tai Haz 0	mat Types	
	Insurance?	Direction Of Trave	-	Pre CrashTire			Speed Limit		Total Lane	es	
UNIT		NORTHBOUND Mar			Mark			Emergency Motor Vehicle Use			
S	Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE)			Special Function NO SPECIAL FUNCTION		TION	NOT APPL				
	Traffic Way			Traffic Control			Traffic Con		trol Inoperative/Missing		
	Surface Type							Deed Crede			
	Surrace Type			Road Curvature				Road Grade			

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WISCONSIN MOTOR VEHICLE CRASH REPORT

	Truc	Truck Bus or HazMat								
		Vehicle								
		License Plate Number AKM8062		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance				
10	~	Vehicle Identification Number		Make	Year	Model				
0	9	5TDYK3DC9BS158968		TOYOTA	2011	SIENNA				
		Color SIL - SILVER (ALUMINUM)		Body Style MV - MINI VAN		Bus Use				
	щ	Initial Contact Point		Vehicle Damage						
Ŀ	VEHICL	01 - RIGHT FRONT CORNER								
UNIT		Extent Of Damage FUNCTIONAL DAMAGE		01 - RIGHT FRONT CORNER, 12 - FRONT						
		Towed Due To Damage		Vehicle Removed By						
		NOT TOWED		OPERATOR						
		What Driver Was Doing		Vehicle Factors						
		Driver Prior Action Other		-						
		Driver Actions								
_	Щ	NO CONTRIBUTING ACTION	N							
UNIT	₽									
	VEHICLE									
	-									
		Owner Name		Owner Address						
5	0									
⊢		Policy Holder								
UNIT		Insurance Company		Individual						
	HANOVER-INS-CO,-THE			KRISTIN HERMSEN						
	NDIVIDUAL	Individual Driver		Citations Issued	Sex					
		KRISTIN HERMSEN		0	FEMALE					
		(608) 393-5753		Date of Birth						
UNIT	ē	Address		Driver License Number						
5		212 5TH ST								
	≤	BARABOO, WI 53913 ,US		STATE: WISCONSIN COUNTRY: UNITED STATES						
		On Duty Crock								
	On Duty Crash Safety Equipment			Safety Equipment						
		Row	Seat Position	SHOULDER & LAP	BELT					
	001	Helmet Use		Helmet Compliance						
		Eye Protection		Tint Compliance						
2		Injury Severity Injury NO APPARENT INJURY		Airbag						
	0	Ejected Ejection Path		I		Trapped/Extricated				
	0	Ejected								
	J			FMS Agency Identifier		EMS Run #				
n.	U	Ejected Ej Medical Transport NOT TRANSPORTED		EMS Agency Identifier		EMS Run #				
	U	Medical Transport		EMS Agency Identifier Date of Death		EMS Run #				

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			Distracted By Source	٩							
		Distracted By	Distracted by Source	6							
		Distracted By Action									
		Non Motorist	Striking Unit #	Location							
		Prior Action									
		Action									
	INDIVIDUAL										
UNIT	Ы										
5	Σ										
	Z										
	-										
		A									
		Action Other						To/From School			
		Suspected Alcohol Use			Suspected Drug Use						
	1	Drug & Alcohol NO			NO						
		Alcohol Test Given Alcohol Test Ty				Alcohol Test Results					
		TEST NOT GIVEN									
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results					
2	001	Drug Type									
0	õ										
		Individual Condition									