6TL0CBQ6SB 23-12788

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

| | Document Number Override | Primary Crash | Primary Crash Document # | | Agency Crash Number 23-12788 | | | Investigating Officer/Deputy DEPUTY A. JAHNKE | | | |
|----------------|---|---|--------------------------|--------------------------|------------------------------|-------------------------------------|--------------|---|----------|--------------------------------|--|
| S _E | Crash Date 11/28/2023 | Crash Time 04:55 PM | | | Date Arrived | | Time | Time Arrived | | | |
| ა ე | Date Notified 11/28/2023 | Time Notified 04:59 PM | | | Total Units 01 | | Total | otal Injured Total Killed 00 | | i | |
| 6 I LUCBU6S | On Emergency | n Emergency Hit and Run Lane Closure Worl | | rk Zone | | | | Reporting Threshold | | | |
| | Government Active School Zone | | | School Bus Related Tag | | | Tags | JS . | | | |
| | 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. | | | | | | | | | | |
| | Location —— | | | | | | | | | | |
| į | ON CTHBD SB | | | | | Latitude | | | Longitud | 10 | |
| | 0.39 MI N | | | | 43.490482944 | | | _ | | | |
| | OF TERRYTOWN RD | | | | | 43.490462944 | | | | 9.77703191 | |
| | IN THE VILLAGE OF WEST BARABOO IN SAUK COUNTY | | | | | | | X Coordinate 275452.6875 | | Y Coordinate 4819031 | |
| | | | | | Structure Type NO STRUCTURE | | | | | | |
| | Crash Scene | | | | | | | | | | |
| , | | | | | | | | | | | |
| | First Harmful Event | | | | | First Harm | ful Event Lo | cation | | | |
| | NON DOMESTICATED AN | MAL (ALIVE) | | | | ON ROADWAY | | | | | |
| ŀ | Manner of Collision | | | | | Light Condition | | | | | |
| | 00 - NO COLLISION W/VEH | JICLE IN TRANS | DODT | | | Light Conc | | | | | |
| | | TICLE IN TRANS | PUKI | | | | | | | | |
| | Road Surface Condition(s) | | | | | Roadway F | -actor(s) | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| ľ | Environment Factor(s) | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | _ | | | | | |
| ŀ | Weather Condition(s) | | | | | | | | | | |
| | weather Condition(s) | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | Animal Type | | | | | Relation To Trafficway | | | | | |
| | DEER | | | | | TRAFFICWAY - ON ROAD | | | | | |
| Ì | Crash Classification - Location | | | | | Crash Classification - Jurisdiction | | | | | |
| | PUBLIC PROPERTY | | | | | NO SPEC | CIAL JURI | SDICTION | ICTION | | |
| ŀ | Tribal Land | | | | | Access Control | | | | Special Study | |
| | Tibal Land | | | | | | | | | Special Study | |
| | | | | | | | | | | | |
| (| Unit Summary | | | | | | | | | | |
| | Unit Status | | Ve | hicle Opera | ating As C | lassification | | Unit Type | | | |
| | | | | D CLASS | | | AUTOMOBILE | | • | | |
| | - | | | | | | | | | | |
| _ | Vehicle Type | | | | | Operating As Endorsements | | | | | |
| 0 | (SPORT) UTILITY VEHICLE | | | | | | | | | | |
| | Total Occs Train/Bus # Recorded | | | Total # Citations Issued | | Total Trai | | ailers Total Haz | | Mat Types | |
| | 1 | | 0 | | | 0 | | 0 | | | |
| | Insurance? Direction Of Travel | | | | | Cnood Lim | | | | AS | |
| | | TIE CIASIIIII | | | | | Ороса Епт | . Total Zallie | | | |
| = | | | | | Mark | | | | | | |
| | ost Harmful Event: Collision With Special Function | | | | | TION | | Emergency Motor Vehicle Use | | | |
| ر | NON DOMESTICATED ANIMAL (ALIVE) | | | | NO SPECIAL FUNCTION | | | NOT APPLICABLE | | | |
| ŀ | Traffic Way | ` , | | | Traffic Control | | | Traffic Control Inoperative/Missing | | | |
| , · | | | | Traine Control | | | | | 3 | | |
| ŀ | Surface Type | Surface Type | | | Dood Compting | | | Road Grad | ۵ | | |
| | Ouriace Type | l Ro | Road Curvature | | | | Road Grade | | | | |
| Į. | | 1 | | | | | | | | | |

Wisconsin Motor Vehicle Crash Form DT4000

This report does not include any CJIS data.

1 of 3

Crash Date 11/28/2023
Crash Time 04:55 PM

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| | Truc | ick Bus or HazMat | | | | | | | | |
|----------|--------------------------------|--|------------------------------------|---|---------------------|-----------------------------------|--|--|--|--|
| | Vehicle | | | | | | | | | |
| | VEHICLE 01 | License Plate Number AGL2477 | | Plate Type AUT - AUTOMOBILE | St WI | Country of Issuance UNITED STATES | | | | |
| ٤ | | Vehicle Identification Number 1FMCU9JD2HUD73502 | | Make FORD | Year 2017 | Model ESCAPE | | | | |
| | | Color RED - RED | UT - SPORT UTILITY | Body Style UT - SPORT UTILITY VEHICLE Bus Use | | | | | | |
| FIND | | Initial Contact Point 09 - LEFT SIDE MIDDLE Extent Of Damage MINOR DAMAGE | | Vehicle Damage 09 - LEFT SIDE MIDD | LE | | 7 8 9 10 11 6 2 2 3 12 5 4 3 2 1 | | | |
| | | Towed Due To Damage NOT TOWED | | Vehicle Removed By OPERATOR | | | | | | |
| | | What Driver Was Doing | Vehicle Factors | Vehicle Factors | | | | | | |
| | | Driver Prior Action Other | | | | | | | | |
| TIND | VEHICLE | Driver Actions NO CONTRIBUTING ACTION | N | | | | | | | |
| 10 | 10 | Owner Name | | Owner Address | | | | | | |
| - | Policy Holder | | | | | | | | | |
| LIND | | Insurance Company PARTNERS-MUTUAL-INS-C | Individual BRANDY STEIN | | | | | | | |
| | - 1 | ndividual | | | | | | | | |
| | INDIVIDUAL | Driver BRANDY STEIN (608) 617-4648 | Citations Issued 0 Date of Birth | Sex FEMALE Race | | | | | | |
| ╘ | | | | | | | | | | |
| TIND | | Address 1560 W PINE ST # 615 BARABOO, WI 53913 , US | | Driver License Number | | | | | | |
| | Safety Equipment On Duty Crash | | | Safety Equipment | | | | | | |
| | | Row | Seat Position | SHOULDER & LAP | SHOULDER & LAP BELT | | | | | |
| | | Helmet Use | | Helmet Compliance | | | | | | |
| | | Eye Protection | | Tint Compliance | | | | | | |
| 2 | THO ALL ARENT INSORT | | | Airbag | | | | | | |
| | | Ejected Ejection Path | | | | Trapped/Extricated | | | | |
| | | Medical Transport NOT TRANSPORTED | | EMS Agency Identifier | | EMS Run # | | | | |
| | | Hospital | | Date of Death | | Time of Death | | | | |

Wisconsin Motor Vehicle Crash Form DT4000

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| | | Distracted By Distracted B | By Source | | | | | | |
|-------------------|------------|-----------------------------------|-------------------|-----------------------|-------------------|----------------------|----------------|--|--|
| | | Distracted By Action | | | | | | | |
| | | Non Motorist Striking Unit | t# Location | | | | | | |
| | | Prior Action | | | | | | | |
| | | Action | | | | | | | |
| | JAL | | | | | | | | |
| LIND | INDIVIDUAL | | | | | | | | |
| | N | | | | | | | | |
| | | | | | | | T | | |
| | | Action Other | | | | | To/From School | | |
| Drug & Alcohol NO | | | Alcohol Use | 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 | | | | |
| 2 | 001 | Drug Type | | | 1 | | | | |
| | | Individual Condition | | | | | | | |
| | | APPEARED NORMAL | | | | | | | |
| | | | | | | | | | |