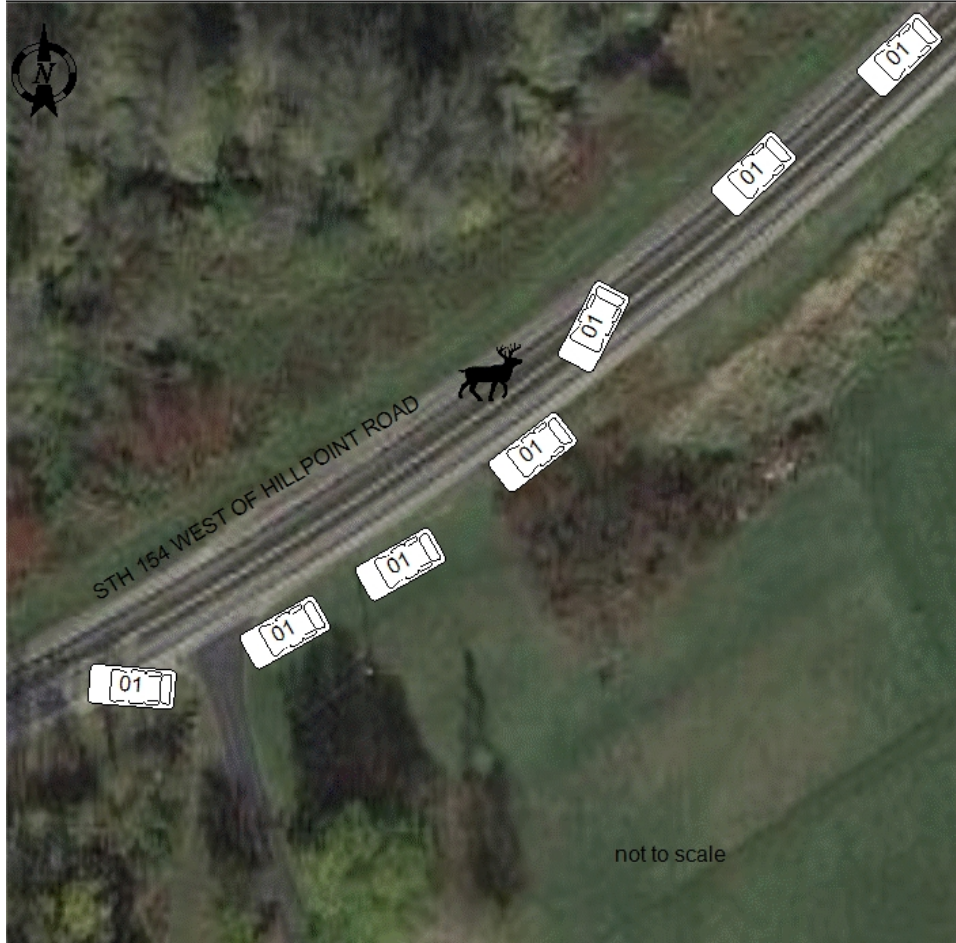


6TL0F2KRBS

Document Number Override		Primary Crash Document #		Agency Crash Number 23-13559		Investigating Officer/Deputy DEPUTY I. GALVAN	
Crash Date 12/21/2023		Crash Time 05:33 AM		Date Arrived 12/21/2023		Time Arrived 05:51 AM	
Date Notified 12/21/2023		Time Notified 05:35 AM		Total Units 01		Total Injured 01	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"/> Trailer or Towed	<input type="checkbox"/> Reporting Threshold
<input type="checkbox"/> Government Property		<input type="checkbox"/> Active School Zone		School Bus Related NO		Tags	
<input checked="" type="checkbox"/> Reportable		Crash Type DT4000 (STANDARD CRASH)				<input type="checkbox"/> Amended	<input type="checkbox"/> Secondary Crash

Description

Diagram		Reconstruction By	
		Photos By I GALVAN	
		Additional Information PHOTOS	

I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.

UNIT 1 WAS TRAVELING WESTBOUND ON STH 154 JUST WEST OF HILLPOINT ROAD WHEN A DEER RAN OUT IN FRONT OF HIM. UNIT 1 FAILED TO MAINTAIN CONTROL AND SWERVED INTO A DITCH. UNIT 1 TRAVELED THE DITCH FOR APPROXIMATELY 25-30 YARDS BEFORE STRIKING A CULVERT. UNIT 1 WAS TOWED BY SHIELD'S TOWING. UNIT 1 SUSTAINED POSSIBLE INJURIES TO NECK AND BACK. UNIT 1 OPERATOR WAS TRANSPORTED TO HOSPITAL VIA AMBULANCE.

Location

ON STH154 WB 734 FT W OF HILLPOINT RD IN THE TOWN OF WASHINGTON IN SAUK COUNTY	Latitude 43.417816822	Longitude -90.116271604
	X Coordinate 247718.625	Y Coordinate 4811932
	Structure Type NO STRUCTURE	

Crash Scene

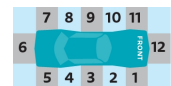
First Harmful Event DITCH	First Harmful Event Location ON ROADWAY	
Manner of Collision 00 - NO COLLISION W/VEHICLE IN TRANSPORT	Light Condition DARK/UNLIT	
Road Surface Condition(s) DRY	Roadway Factor(s) OBSTRUCTION IN ROADWAY	
Environment Factor(s) ANIMAL (S) IN ROADWAY		
Weather Condition(s) CLOUDY		
Animal Type DEER	Relation To Trafficway TRAFFICWAY - ON ROAD	
Crash Classification - Location PUBLIC PROPERTY	Crash Classification - Jurisdiction NO SPECIAL JURISDICTION	
Tribal Land	Access Control NO CONTROL	Special Study
Within Interchange Area NO	Junction Location NON-JUNCTION	Intersection Type NOT AN INTERSECTION

Unit Summary

UNIT	Unit Status IN TRANSIT	Vehicle Operating As Classification D CLASS		Unit Type AUTOMOBILE	
	Vehicle Type PASSENGER CAR	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 WESTBOUND	<input type="checkbox"/> Pre Crash Tire Mark	Speed Limit 55	Total Lanes 2
	Most Harmful Event: Collision With CULVERT		Special Function NO SPECIAL FUNCTION		Emergency Motor Vehicle Use NOT APPLICABLE
	Traffic Way TWO-WAY, NOT DIVIDED		Traffic Control NO CONTROL		Traffic Control Inoperative/Missing NO
	Surface Type BLACKTOP (BITUMINOUS)		Road Curvature CURVE RIGHT		Road Grade LEVEL
	Truck Bus or HazMat NO				

Vehicle

UNIT	VEHICLE	License Plate Number AMX3831	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES	
		Vehicle Identification Number 2B3KA43G77H893197	Make DODGE	Year 2007	Model CHARGER	
		Color BLK - BLACK	Body Style 4D - 4DR		Bus Use	
		Initial Contact Point 12 - FRONT	Vehicle Damage 01 - RIGHT FRONT CORNER, 11 - LEFT FRONT CORNER, 12 - FRONT, 14 - UNDERCARRIAGE			
		Extent Of Damage DISABLING DAMAGE				



UNIT	Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By SHIELDS TOWING		
	What Driver Was Doing NEGOTIATING CURVE		Vehicle Factors		
	Driver Prior Action Other		NOT APPLICABLE		
	Driver Actions FAILURE TO CONTROL				
01	01	Owner Name TANISHA MCMILLIAN (608) 434-8062		Owner Address 1201 EMERALD TER #8 SUN PRAIRIE, WI 53590 , US	
		Sequence Of Events			
UNIT	01	Event DITCH			
		Event CULVERT			
		Event			
		Event			
UNIT	01	Policy Holder			
		Insurance Company FOUNDERS-INS-CO	Individual HENRY MC MILLIAN		
UNIT	01	Individual			
		Driver HENRY MC MILLIAN (608) 370-0902	Citations Issued 0	Sex MALE	
		Address 1600 W SEMINARY ST # 4 RICHLAND CENTER, WI 53581 , US		Date of Birth	Race BLACK/AFRICAN AMERICAN
		Driver License Number			
UNIT	01	Safety Equipment			
		On Duty Crash		Safety Equipment	
		Row 01 - FRONT ROW	Seat Position 07 - LEFT	SHOULDER & LAP BELT	
		Helmet Use		Helmet Compliance	
		Eye Protection		Tint Compliance	
		Injury SUSPECTED MINOR INJURY		Airbag DEPLOYED-FRONT	
UNIT	001	Ejected NOT EJECTED	Ejection Path NOT EJECTED/NOT APPLICABLE	Trapped/Extricated NOT TRAPPED	
		Medical Transport EMS GROUND	EMS Agency Identifier 6001024	EMS Run # 232544	
		Hospital RICHLAND HOSP	Date of Death	Time of Death	
		Distracted By			
		Distracted By Source NOT APPLICABLE (NOT DISTRACTED)			
		Distracted By Action NOT DISTRACTED			

UNIT	INDIVIDUAL	Non Motorist		Striking Unit #	Location		
		Prior Action					
		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		
		Drug Type					
		Individual Condition APPEARED NORMAL					
		Property Owner					
PROP OWNER	01	Individual JEFFREY SMITH (608) 393-7055			Address S6276 STATE ROAD 154 HILLPOINT, WI 53937 , US		
		Fixed Objects Struck					
01	Striking Unit 01		Struck Object CULVERT	Structure Number	Damage Tag Number 0000		