6TL0FB000F 24-00238

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override	Primary Crash Documer	Agency Crash Nu 24-00238				tigating Officer/Deputy UTY W. NEUBAUER				
0F	Crash Date 01/08/2024	Crash Time 06:30 AM		Date Arrived		Time	Time Arrived				
0FB000	Date Notified 01/08/2024	Time Notified 06:36 AM			otal Units 1		Total	I Injured Total Killed 00		i	
-0F	On Emergency Hi	and Run Lane Closu		re Work Zone			Trailer or Towed		Reporting Threshold		
6TL	Government Property	Active School Z	one	School Bus Related NO			Tags	Tags			
	✓ Reportable	Crash Type NON-DOMESTICAT	Crash Type NON-DOMESTICATED ANIMAL W/ NO INJUR			Amended			Secondary Crash		
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.										
ì	Location										
Ī	ON STH60 EB					Latitude Longitude			le		
	369 FT W			43.258		43.25868	258688158		-89.807	-89.80739568	
	OF BAUM RD					X Coordin	ate		Y Coordinate		
	IN THE TOWN OF PRAIRIE	JU SAC				272130.4375 4793369.5			9.5		
	IN SAUK COUNTY				Structure Type						
Į											
	Crash Scene										
Ī	First Harmful Event					First Harm	ıful Event Lo	cation			
	NON DOMESTICATED ANIM	AL (ALIVE)				ON ROADWAY					
l	Manner of Collision					Light Condition					
	00 - NO COLLISION W/VEHI	CLE IN TRANSPORT									
ı	Road Surface Condition(s)					Roadway	Factor(s)				
	Facility and Facility (a)										
	Environment Factor(s)										
l	Weather Condition(s)										
	Animal Type				Relation To Trafficway						
	DEER				TRAFFICWAY - ON ROAD						
	Crash Classification - Location				Crash Classification - Jurisdiction						
	PUBLIC PROPERTY					NO SPECIAL JURIS				On a sind Obrada	
	Tribal Land				Access Control Special Study						
L	Unit Summary										
`	Unit Status		I Vehic	cle Opera	tina As C	lassification		Unit Type			
	IN TRANSIT D CLASS					Oldomodion		AUTOMOBILE			
ŀ	Vehicle Type					Operating As Endorsements					
01	(SPORT) UTILITY VEHICLE										
ŀ				Total # Citations Issued		Total Traile		 lers		Mat Types	
	1		0				0		0	,,	
}		Direction Of Travel		Dro C	achTira		Speed Lim	nit	Total Lane	es	
⊢		EASTBOUND		Pre CrashTire Mark							
UNIT	Most Harmful Event: Collision With			Special Function					Emergency Motor Vehicle Use		
→	NON DOMESTICATED ANIMAL (ALIVE)			NO SPECIAL FUNCTION			TION		NOT APPLICABLE		
ŀ	Traffic Way			Traffic Control					Traffic Control Inoperative/Missing		
ŀ	Surface Type			Road Curvature				Road Grade			

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	Truc	k Bus or HazMat							
	,	Vehicle							
		License Plate Number 871ZMU	Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance UNITED STATES				
2	2	Vehicle Identification Number 1FMCU03Z58KC24856	Make FORD	Year 2008	Model ESCAPE XLT				
		Color TAN - TAN	Body Style LL - CARRYALL	Bus Use					
UNIT	VEHICLE	Initial Contact Point 12 - FRONT Extent Of Damage FUNCTIONAL DAMAGE	Vehicle Damage 01 - RIGHT FRONT CORNER, 02 - RIGHT SIDE FRONT, 10 - LEFT SIDE FRONT, 11 - LEFT FRONT CORNER, 12 - FRONT 5 4 3 2 1						
		Towed Due To Damage NOT TOWED	Vehicle Removed By OPERATOR						
		What Driver Was Doing	Vehicle Factors						
		Driver Prior Action Other							
TINO	VEHICLE	Driver Actions NO CONTRIBUTING ACTION							
10	10	Owner Name	Owner Address						
—		 Policy Holder		_					
LIND		Insurance Company AMERICAN-FAMILY-INS-CO	Individual MARY CURTIS						
	DIVIDUAL	ndividual							
		Driver CALEB CURTIS	Citations Issued 0	Sex MALE					
_		(608) 485-3924	Date of Birth	Race WHITE					
LIND		Address 33305 YEAGER LN LONE ROCK, WI 53556 , US	STATE: WISCONSIN COUNTRY: UNITED STATES						
	Sai	On Duty Crash fety Equipment	Safety Equipment						
		Row Seat Position	SHOULDER & LAP BELT						
		Helmet Use	Helmet Compliance						
	100	Eye Protection	Tint Compliance						
5		Injury Severity NO APPARENT INJURY	Airbag						
		Ejected Ejection Path			Trapped/Extricated				
		Medical Transport NOT TRANSPORTED	EMS Agency Identifier		EMS Run #				
		Hospital	Date of Death		Time of Death				

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Crash Date 01/08/2024

Crash Time 06:30 AM

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					