6TL0D5DZ19

24-00593

WISCONSIN MOTOR VEHICLE CRASH REPORT

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

	Document Number Override Primary Cras		Document # Agency Crash Nu 24-00593		lumber			stigating Officer/Deputy PUTY J. HUNTER			
19	Crash Date 01/16/2024	Crash Time 05:40 PM			Date Arrived		Tim	Time Arrived			
5DZ	Date Notified 01/16/2024	Time Notified 05:41 PM			Total Units 01		Total 00		Total Killed 00	1	
	On Emergency	lit and Run	Lane Closu	-		ork Zone		Trailer or T	owed	Reporting Threshold	
6TL	Government Property		hool Zone	School NO	Bus Rela	ated	Тад	ļs			
	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										
-	ON STH33 WB					Latitude			Longitud	le	
	401 FT E					43.52487	43.524871704			5830644	
	OF MIRROR LAKE RD					X Coordin	X Coordinate			Y Coordinate	
	IN THE TOWN OF DELTON IN SAUK COUNTY					270828.3	270828.34375 4823011				
	IN SAUK COUNT F					Structure	Туре				
						NO STR					
	Crash Scene										
1	First Harmful Event										
						First Harmful Event Location					
	NON DOMESTICATED ANI Manner of Collision	MAL (ALIVE)					ON ROADWAY				
	00 - NO COLLISION W/VEF		DODT			Light Condition					
	Road Surface Condition(s)					Roadway	Roadway Factor(s)				
	rioud ounder oondhon(3)										
	Environment Factor(s)										
	Weather Condition(s)										
	Weather Condition(3)										
	Animal Type					Relation To Trafficway					
	DEER					TRAFFIC	TRAFFICWAY - ON ROAD				
	Crash Classification - Location					Crash Classification - Jurisdiction					
	PUBLIC PROPERTY					NO SPECIAL JURISDICTION					
	Tribal Land					Access Control Special Study					
										l	
	Unit Status Vehicle Operating As Classification Unit Type										
						Classification	- 51				
	IN TRANSIT D CLASS Vehicle Type				_A35			AUTOMOBILE Operating As Endorse		monte	
2	(SPORT) UTILITY VEHICLE							Operating		inents	
-						od .	Total Trailers Total HazMat Types			Mat Types	
	1 I I I I I I I I I I I I I I I I I I I			otal # Citations Issued		eu	0	liero	0	inat Types	
	Insurance?	Direction Of Trave		Pre CrashTire			0 11 1		Total Lan	es	
⊢│	YES	WESTBOUND			rash i ii Iark	e					
UNIT	Most Harmful Event: Collision With			Special Function					Emergency Motor Vehicle Use		
)	NON DOMESTICATED ANIMAL (ALIVE)			SPECIA	L FUN	CTION	TION		NOT APPLICABLE		
	Traffic Way			Traffic Control			T		Traffic Control Inoperative/Missing		
	Surface Type			Road Curvature				Road Grade			

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	Truc	k Bus or HazMat								
	,	Vehicle								
		License Plate Number 877RLK		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance				
01	VEHICLE 01	Vehicle Identification Number 2GNALCEK3H1616824		Make CHEVROLET	Year 2017	Model EQUINOX				
		Color		Body Style		Bus Use				
		BLU - BLUE Initial Contact Point		UT - SPORT UTILITY VEHICLE Vehicle Damage						
UNIT		12 - FRONT Extent Of Damage		12 - FRONT			7 8 9 10 11 6 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			
		DISABLING DAMAGE		5 4 3 2 1						
		Towed Due To Damage TOWED DUE TO DISABLING DAMAGE		Vehicle Removed By						
		What Driver Was Doing		Vehicle Factors						
		Driver Prior Action Other		-						
		Driver Actions NO CONTRIBUTING ACTION								
UNIT	VEHICLE									
5	/EHI									
	-	Owner Name		Owner Address						
01	01									
	•									
E		Policy Holder								
UNIT		Insurance Company PROGRESSIVE-ADVANCE	D-INSURANCE-CO	Individual ERIKA VARELA						
		Individual								
	NDIVIDUAL	Driver ERIKA VARELA		Citations Issued 0	Sex FEMALE					
		(608) 370-3956		Date of Birth	Race WHITE					
UNIT	IVIC	Address		Driver License Number						
	IJ	517 N PARK ST REEDSBURG, WI 53959 , US On Duty Crash		STATE: WISCONSIN COUNTRY: UNITED STATES						
				Safety Equipment						
	Sa	Fety Equipment Row Seat Position		SHOULDER & LAP BELT						
			Seat Position							
		Helmet Use		Helmet Compliance						
		Eye Protection		Tint Compliance						
01	001	Injury Severity		Airbag						
		Ejected Ejection Path		I		Trapped/Extricated	Trapped/Extricated			
		Medical Transport		EMS Agency Identifier		EMS Run #				
		NOT TRANSPORTED Hospital		Date of Death		Time of Death				

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			B : 1 1 B 0							
		Distracted By	Distracted By Source)						
		Distracted By Action								
		Non Motorist	Striking Unit #	Location						
		Prior Action								
		Action								
	٩L									
F	INDIVIDUAL									
LINU	IVI									
	IND									
		Action Other						To/From School		
		Suspected Alcohol Use Drug & Alcohol NO			Suspected Drug Use					
	-	Alcohol Test Given Alcohol Test Typ			-					
		TEST NOT GIVEN		Alcohol rest type						
		Drug Test Given TEST NOT GIVEN		Drug Test Type		Drug Test Results	L			
5	001	Drug Type								
		Individual Condition								
	APPEARED NORMAL									