# 6TL0C884KN

24-00769

### 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 24-00769				DEPUTY D. HORN			
Ś	Crash Date         Crash Time           01/20/2024         10:26 PM		Date Arrived			Time	Time Arrived				
384 <b> </b>	Date Notified         Time Notified           01/20/2024         10:26 PM		Total Units <b>01</b>		its	Tot: <b>00</b>		al Injured	Total Killed <b>00</b>		
6TL0C884KN	On Emergency	and Run		sure	e Work Zone			Trailer or Towed		Reporting Threshold	
6TL	Government Active School Zone			School Bus Related <b>NO</b>			Tag	Tags			
	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										
	ON STH78 SB 770 FT W					Latitude 43.372883072			Longitude -89.685921495		
	OF EAGLE POINT DR IN THE TOWN OF MERRIMAC				X Coordinate 282398.8125			Y Coordinate 4805728			
	IN SAUK COUNTY					262396.6125         4603726           Structure Type         1					
	Crash Scene										
1	First Harmful Event Location										
	NON DOMESTICATED ANIM			ON ROA							
	Manner of Collision					Light Cond					
	-	CLE IN TRANSI	PORT			Light Condition					
	00 - NO COLLISION W/VEHICLE IN TRANSPORT Road Surface Condition(s)					Roadway Factor(s)					
	Environment Factor(s)										
	Weather Condition(s)										
	Animal Type					Relation To Trafficway					
	DEER					TRAFFICWAY - ON ROAD					
	Crash Classification - Location PUBLIC PROPERTY					Crash Classification - Jurisdiction NO SPECIAL JURISDICTION					
	Tribal Land					Access Control Special Study					
ļ	Unit Summary									l	
	Unit Status		Ve	hicle Opera	tina As C	assification		Unit Type			
	IN TRANSIT D CLASS					Jassincation		AUTOMOBILE			
01								Operating <i>i</i>	As Endorser	nents	
	PASSENGER VAN								T <del>.</del>	Total HazMat Types	
	Total Occs 1	Train/Bus # Recor	aea 10 0	Total # Citations Issued 0			1 otal 1 rai <b>0</b>	0		Matiypes	
⊢		Direction Of Trave		Pre CrashTire Spe		Speed Lir	ed Limit Total Lanes		es		
UNIT	Most Harmful Event: Collision With NON DOMESTICATED ANIMAL (ALIVE)			Special Function NO SPECIAL FUNCTION		<u>I</u>	Emergency Motor Vehicle Use NOT APPLICABLE		cle Use		
	Traffic Way			Traffic Control				Traffic Control Inoperative/Missing			
	Surface Type			Road Curvature				Road Grade			

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	Iruc	uck Bus or HazMat									
	,	Vehicle									
		License Plate Number 268YUG		Plate Type AUT - AUTOMOBILE	St WI	Country of Issuance					
5	6	Vehicle Identification Number 5TDKK4CC9AS334395		Make TOYOTA	Year <b>2010</b>	Model SIENNA					
	U	Color		Body Style			Bus Use				
		RED - RED		VN - VAN		NOT A BUS					
⊢	Ë	Initial Contact Point 01 - RIGHT FRONT CORNER		Vehicle Damage 7 8 9 10 11							
UNIT	VEHICL	Extent Of Damage		01 - RIGHT FRONT C	RONT	6 12					
-	ΥE	FUNCTIONAL DAMAGE		5 4 3 2 1							
		Towed Due To Damage NOT TOWED		Vehicle Removed By OPERATOR							
		What Driver Was Doing		Vehicle Factors							
		GOING STRAIGHT Driver Prior Action Other		NOT APPLICABLE							
E	VEHICLE	NO CONTRIBUTING ACTION									
UNIT	Ĭ										
	2										
		Owner Name		Owner Address							
6	01										
	Ŭ										
⊢		Policy Holder									
UNIT		Insurance Company PROGRESSIVE-CASUALT		Individual JOY SPILLANE							
			Individual								
	NDIVIDUAL	Driver		Citations Issued	Sex						
		JOY SPILLANE (608) 370-0288		<b>0</b> Date of Birth	FEMALE Race						
-				Date of Dirtit	WHITE						
UNIT	N	Address 950 13TH ST # 106 PRAIRIE DU SAC, WI 53578 , US		Driver License Number							
	Z			STATE: WISCONSIN COUNTRY: UNITED STATES							
	Sa	fety Equipment	Safety Equipment	Safety Equipment							
		Row	Seat Position	SHOULDER & LAP	BELT						
		Helmet Use		Helmet Compliance							
		Tiemer 036									
		Eye Protection		Tint Compliance							
-	Ξ	Injury Severity		Airbag							
5	001	B Injury NO APPARENT INJURY Ejected Ejection Path			Trapped/Extricated						
						Tappour Extronged					
				EMS Agency Identifier		EMS Run #					
		NOT TRANSPORTED Hospital		Date of Death		Time of Death	Time of Death				

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			<u> </u>						
		Distracted By	Distracted By Source						
		Distracted By Action							
	l	Non Motorist	Striking Unit #	Location					
		Prior Action							
		Action							
	٩L								
F	INDIVIDUAL								
LINU	IVI								
	IND								
		Action Other						To/From School	
	Suspected Alcohol Use			se	Suspected Drug Use				
	1	Drug & Alcohol	NO		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	1		
6	001	Drug Type		L		1			
		Individual Condition							
		APPEARED NORMAL							